



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Why is this form needed?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing liquor license. Applicants should review **Title 04 of Alaska Statutes** and **Chapter 304 of the Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, and 3 AAC 304.105.

This form must be completed and submitted to AMCO's Anchorage office, along with all other required forms and documents before any license application will be considered complete.

Section 1 – Transferor Information

Enter information for the **current** licensee and licensed establishment.

Licensee:	Bruce and Robert Burton	License #:	5232
License Type:	Beverage Dispensary – Tourism Seasonal (+RE)	Doing Business As:	AK King Salmon Lodge
Licensee Mailing Address:	350 Sherwood Road Willits, CA 95490		
Full Premises Address:	165 West Housing Road		
City:	King Salmon	State:	AK
		ZIP:	99613
Local Governing Body:	Bristol Bay Borough	Email:	willitsredwood@gmail.com

Transfer Type:

- ☒ Regular transfer
☐ Transfer with security interest
☐ Involuntary retransfer

OFFICE USE ONLY			
Complete Date:		Transaction #:	#106787880
Board Meeting Date:		License Years:	
Issue Date:		Examiner:	

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MAR 18 2023

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MAR 7 8 2023



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application**Section 2 – Transferee Information**Enter information for the **new** applicant and/or location seeking to be licensed.

Licensee:	KSL Adventures, LLC (Nicholas Larsen)				
Doing Business As:	Alaska King Salmon Lodge				
Premises Address:	165 West Housing Road				
City:	King Salmon	State:	AK	ZIP:	99613
Community Council:	Bristol Bay Borough				

Mailing Address:	350 E 2200 N				
City:	North Logan	State:	UT	ZIP:	84341

Designated Licensee:	Nicholas Larsen				
Contact Phone:	435-754-4034	Business Phone:	907-246-8643		
Contact Email:	nicklarsen@maplespringsliving.com / hyrum@kingsalmonlodge.com				

Seasonal License? Yes ☒ No ☐ If "Yes", write your six-month operating period: 05/01 through 10/31

Section 3 – Premises Information

Premises to be licensed is:

☒ an existing facility ☐ a new building ☐ a proposed building

The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer.

1.9 miles to school district office. Closest school ground is in Naknek which is over 10 miles.

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer.

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Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

1.8 miles

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 4 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 5.
If more space is needed, please attach a separate sheet with the required information.
The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	

Section 5 – Entity Ownership Information

This section must be completed by any entity, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 6.
If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a corporation, the following information must be completed for each *stockholder who owns 10% or more* of the stock in the corporation, and for each *president, vice-president, secretary, and managing officer*.
- If the applicant is a limited liability organization, the following information must be completed for each *member with an ownership interest of 10% or more*, and for each *manager*.
- If the applicant is a partnership, including a limited partnership, the following information must be completed for each *partner with an interest of 10% or more*, and for each *general partner*.

Entity Official:	Nicholas Larsen				
Title(s):	Manager	Phone:	435-754-4034	% Owned:	<input checked="" type="checkbox"/> JmW
Address:	5090 East Hart Lake Loop				
City:	Wasilla	State:	AK	ZIP:	99654



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Entity Official:	Pistis Mercury, LLC (Nicholas Larsen) ✓				
Title(s):	Member	Phone:	435-754-4034	% Owned:	20
Address:	350 E 2200 N				
City:	North Logan	State:	UT	ZIP:	84341

Entity Official:	Morpheus Universe, LLC (Greg Larsen) ✓				
Title(s):	Member	Phone:	435-714-9912	% Owned:	20
Address:	1406 E 1900 N				
City:	North Logan	State:	UT	ZIP:	84341

Entity Official:	Bronshield, LLC (Marc Dunn)				
Title(s):	Member	Phone:	785-341-3893	% Owned:	20 ✓
Address:	350 E 2200 N				
City:	North Logan	State:	UT	ZIP:	84341

Entity Official:	Hilltop Lane, LLC (Lauralyn Larsen)				
Title(s):	Member	Phone:	435-881-3707	% Owned:	20
Address:	1406 E 1900 N				
City:	North Logan	State:	UT	ZIP:	84341

Entity Official:	BBB Holdings, LLC (Mike Larsen)				
Title(s):	Member	Phone:	507-254-1109	% Owned:	20 ✓
Address:	15983 N Rimrock Rd				
City:	Hayden	State:	ID	ZIP:	83835

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10248562	AK Formed Date:	10/17/2023	Home State:	ALASKA
Registered Agent:	Nick Larsen	Agent's Phone:	435-754-4034		
Agent's Mailing Address:	5090 East Hart Lake Loop				
City:	Wasilla	State:	AK	ZIP:	99654

Residency of Agent:

Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?

☒☐

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MAR 3 2023



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 6 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses:

Yes No

Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?

☐☒

If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s):

Section 7 – Authorization

Communication with AMCO staff:

Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?

☒☐

If "Yes", disclose the name of the individual and the reason for this authorization:

Hyrum Neilson – manager of the Alaska King Salmon Lodge
Gia Haycock – business manager for KSL Adventures
Greg Larsen – owner

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Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 8 – Transferor Certifications

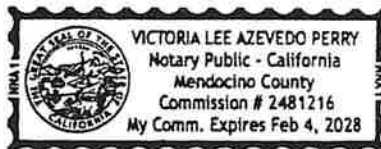
Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

Signature of transferor

Printed name of transferor

Subscribed and sworn to before me this 1st day of March, 2024.



Signature of Notary Public

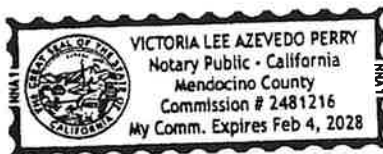
Notary Public in and for the State of California.

My commission expires: 2/4/2028

Signature of transferor

Printed name of transferor

Subscribed and sworn to before me this 1st day of March, 2024.



Signature of Notary Public

Notary Public in and for the State of California.

My commission expires: 2/4/2028



Alcohol and Marijuana Control Office
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Anchorage, AK 99501
alcohol.licensing@alaska.gov
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Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 – Transferee Certifications

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.



I certify that all proposed licensees have been listed with the Division of Corporations.



I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.



I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.



I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.



I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.



Nicholas Larsen

Signature of transferee

NICHOLAS LARSEN

Printed name



Roxanne Albretsen

Signature of Notary Public

Notary Public in and for the State of Idaho

My commission expires: 05-26-28

Subscribed and sworn to before me this 28th day of February, 2024.



Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram**Why is this form needed?**

A detailed diagram of the proposed licensed premises is required for all alcohol license applications, per AS 04.11.260, 3 AAC 305.630 and 3 AAC 305.660. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing.

This form must be completed and submitted to AMCO's Anchorage office before any license application will be considered complete. You may attach blueprints or other detailed drawings that meet the requirements of this form.

The diagram MUST include:

- You must use a **solid, contiguous red line** to outline the outer perimeter of your premises with no breaks or separations.
 - The red outline is required to follow a physical barrier (wall, fence and even across doorways).
 - There should be no red lines within the perimeter
- Each area should be clearly labeled in any color other than red where alcohol is:
 - Stored
 - Served/Sold
 - Manufactured
 - Consumed
- All diagrams must include:
 - Dimensions (AMCO does not accept diagrams drawn to scale)
 - Cross streets
 - Points of reference, such as a compass rose indicating True North
 - All entrances, exits, walls, bars, and fixtures
- If your premises include multiple floors, please include a separate diagram of each floor.
 - You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- If your premises includes multiple floors, please include a separate diagram of each floor. You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.
- **Any license applications that include outdoor space** are required to submit a security plan that includes information about the barriers, practices, and personnel that are to be used to ensure that alcohol is not introduced or removed from the permitted premises and to prevent the access of alcohol by a minor during the permitted event. A security plan may be requested for other proposed locations on a case-by-case basis.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	KSL Adventures, LLC (Nicholas Larsen)	License Number:	5232		
License Type:	Beverage Dispensary – Tourism Seasonal (+RE)				
Doing Business As:	Alaska King Salmon Lodge				
Premises Address:	165 West Housing Road				
City:	King Salmon	State:	AK	ZIP:	99613



Alcohol and Marijuana Control Office

550 W 7th Avenue, Suite 1600

Anchorage, AK 99501

alcohol.licensing@alaska.gov

<https://www.commerce.alaska.gov/web/amco>

Phone: 907.269.0350

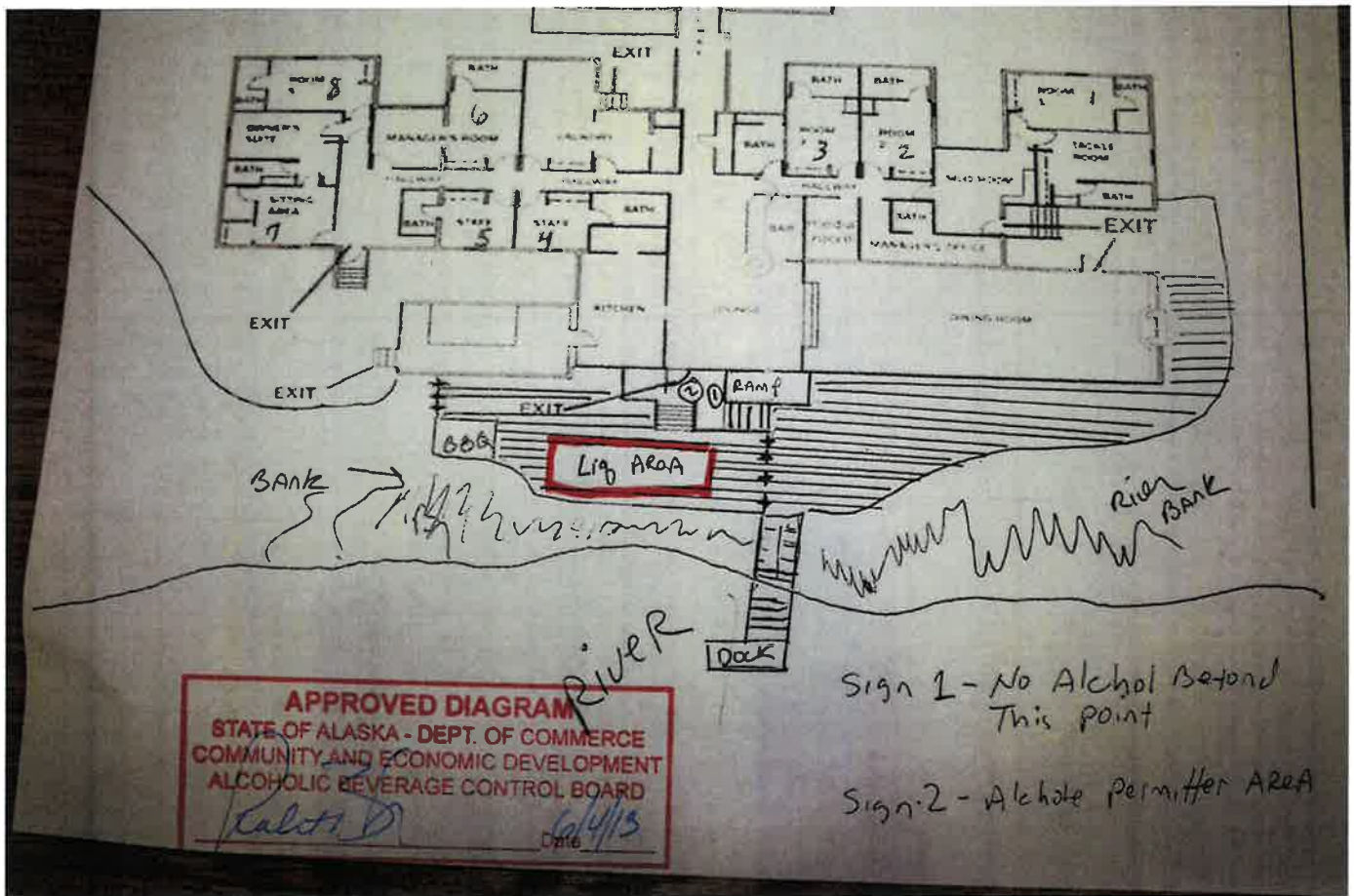
Alaska Alcoholic Beverage Control Board

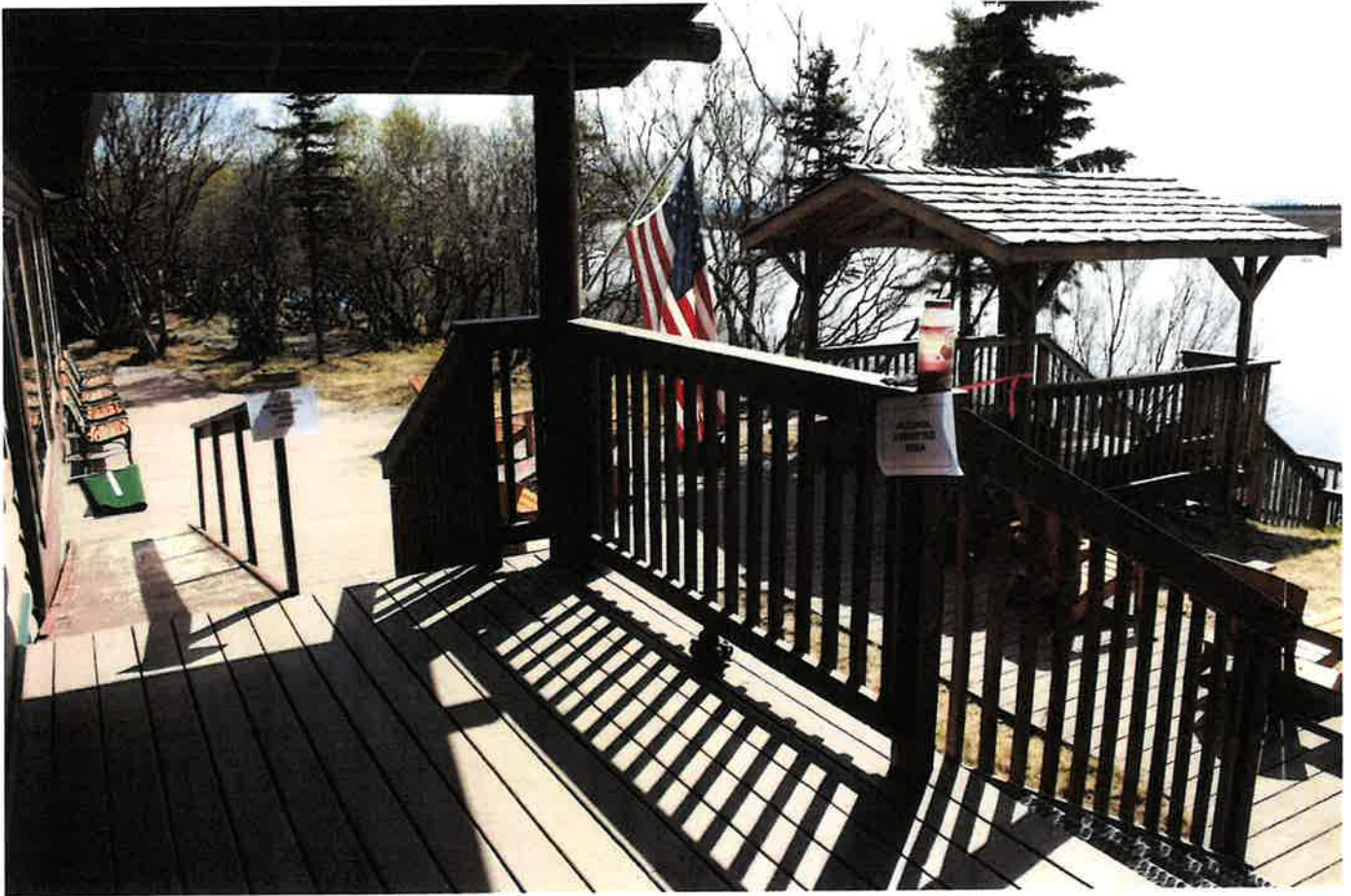
Form AB-02: Premises Diagram

Section 2 – Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. See above for detailed instructions.

A scan of the approved "Premise Diagram" from the previous owner is attached. This diagram is on file with the AMCO office. There have been no changes to the building layout or areas of storage, service, and consumption.



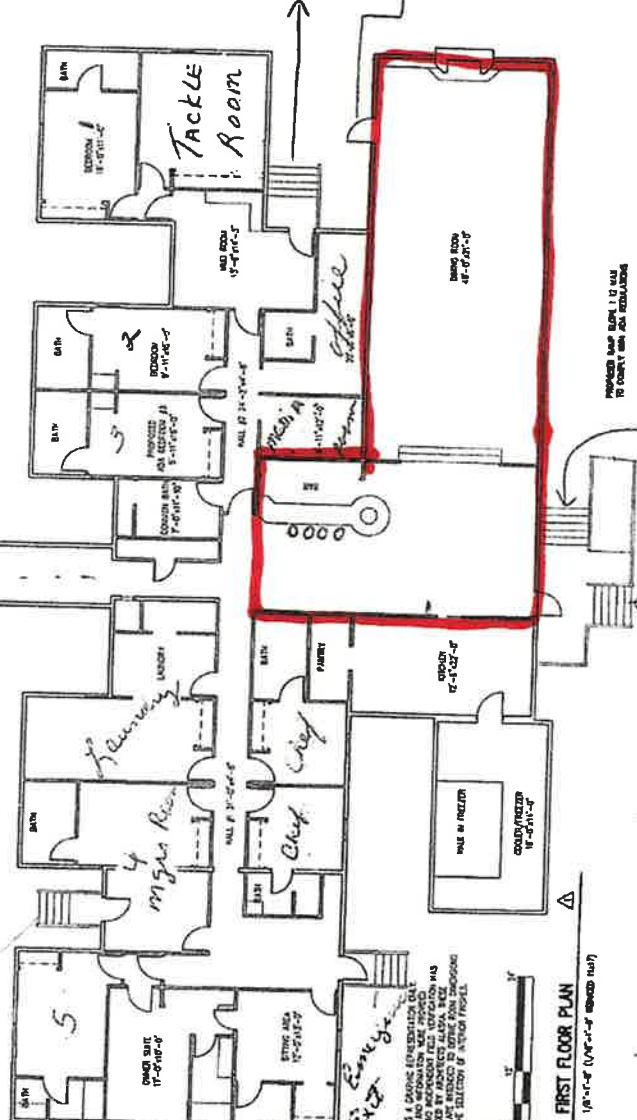













→ Riverside Entrance to ~~the~~ College

4" stairs
to upstairs
rooms &
kitchen

Emergency
Ext. 600

THE PLAN IS A COORDINATED INVESTIGATION OF THE
SOURCES AND INFORMATION WERE PROVIDED
IT OTHER TO DISCLOSED THAT INVESTIGATION WAS
THE PROVIDED BY SUBJECTS WERE VERY
CONDUCTED ARE INTENDED TO OBTAIN MORE INFORMATION
FOR THE COLLECTION OF ACTION REPORTS.

SCALE:



0' 5' 10' 15'

FIRST FLOOR PLAN

1/8" = 1'-0" (NAT'L & S' SCALED 1/8" = 1'-0")



Alaska Alcoholic Beverage Control Board Restaurant Endorsement Application

The new endorsement application form is required to apply for a restaurant endorsement to support your underlying license or pending license application. Applicants should review and become familiar with AS 04.09.450, **Title 04 of Alaska Statutes and Chapter 305 of the Alaska Administrative Code**. This form must be completed and submitted along with all other required forms and documents before any endorsement application will be considered complete and placed in the queue for our licensing examiners review.

Section 1 – Establishment and Contact Information

Enter information for the **current** licensee and licensed establish.

Licensee:	KSL Adventures, LLC (Nicholas Larsen)	License #:	5232
License Type:	Beverage Dispensary - Tourism Seasonal	Doing Business As:	AK King Salmon Lodge
Licensee Mailing Address:	350 East 2200 North, North Logan, UT 84341		
Full Premises Address:	165 West Housing Road		
City:	King Salmon	State:	AK
		ZIP:	99613
Local Governing Body:	Bristol Bay Borough	Email:	nicklarsen@maplespringsliving.com

Section 2 – Endorsement Requested

Restaurant Endorsement:	AS 04.09.450. A restaurant endorsement authorizes the holder of a beverage dispensary license, fair license, golf course license, sporting activity or event license, club license, outdoor recreation lodge license, destination resort license, or beverage dispensary tourism license. The biennial fee for a restaurant endorsement is \$200 with a \$25 application fee.
-------------------------	---

An application for a restaurant endorsement must specify the establishment or portion of the establishment that constitutes a bona fide restaurant, that there is supervision on the premises adequate to reasonably ensure that a person under 21 years of age will not obtain alcoholic beverages. This **endorsement** application is for the request of a designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

- ☒ Dining after standard closing hours: AS 04.16.010(c)
- ☒ Dining by persons 16 – 20 years of age: AS 04.16.049(a)
- ☒ Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)
- ☒ Employment for any persons under 21 years of age: AS 04.16.049(c)

NOTE: Under AS 04.16.049(d), a Department of Labor and Workforce Development work permit is not required to employ a person 18 - 20 years of age.

Section 3 – Minor Access

Review AS 04.16.049(a); AS 04.16.049(c)

Be specific in your list where within the premises minors are anticipated to have access in the course of either dining or employment as designated in Section 2. (Example: Minors will only be allowed in the dining area OR minors will only be employed and present in the kitchen).

Minors will be allowed in the main dining area. Minors under the age of 21 may have access to the lounge tables within the bar while accompanied by an adult over the age of 21 and only during restaurant hours. Minor employees will be allowed in the kitchen, main dining area, and bar lounge area where food is served.

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Alaska Alcoholic Beverage Control Board Restaurant Endorsement Application

Describe the policies, practices and procedures that will be in place to ensure that minors do not gain access to alcohol while dining or employed at your premises. Outline how and where alcohol is stored on premises. Acknowledge that employees who sell and serve alcohol must have a current Server Education Card.

The double locked liquor room is located 15' off of the main bar area. After restaurant hours, all unopened liquor is secured in this room. No minors will have access to keys for this room.

Remaining, open liquor behind the bar will be secured and locked at closing time.

Kegs will be untapped nightly. Kegs are stored behind locked cooler doors.

Employees over the age of 21 who sell and serve alcohol will have a current TAM card. All staff involved in the restaurant will have a current food handlers card. AK Health Dept. Certificates will be displayed with liquor license behind the bar. Restaurant license will be by register in dining room.

Is an owner, manager, or assistant manager who is 21 years of age or older always present on the premises during business hours?

Yes ☒ No ☐

Section 4 – ADEC Food Service Permit

Per AS 04.21.080(b) for an establishment to qualify as a bona fide restaurant, a Food Service Permit or (for licenses within the Municipality of Anchorage) corresponding Department of Health and Human Services documentation is required.

Link to the Alaska Department of Environmental Conservation (ADEC) Food Safety Website:

<http://dec.alaska.gov/eh/fss/food/>

Link to the Municipality of Anchorage Food Safety Website:

<http://www.muni.org/Departments/health/Admin/environment/FSS/Pages/fssfood.aspx>

IF you are unable to certify the below statement, please discuss the matter with the AMCO office:

I have attached a copy of the current food service permit for this premises OR the plan review approval.

Initials
NL

**Note: If a plan review approval is submitted, a final permit will be required before finalization of any permit or license application.*

Section 5 – Hours of Operation

Review AS 04.16.010(c).

Include variances in weekend/weekday hours, and indicate AM/PM:

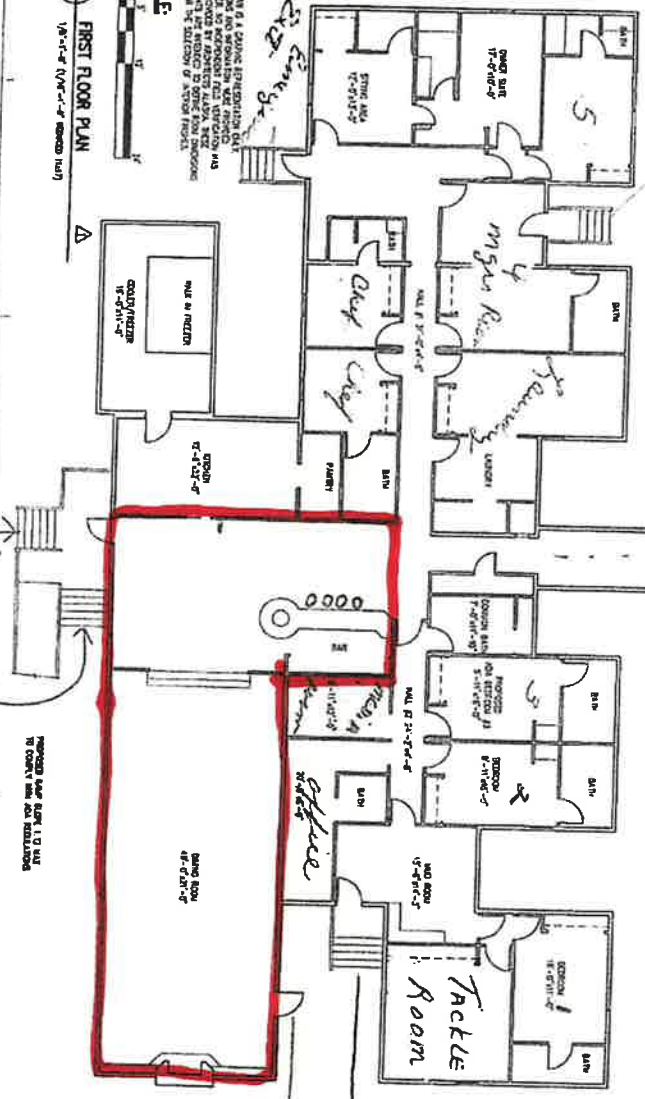
Days/Hours of Operation

Weekday	Hours	Hours
Sunday	3:30 pm	10:30 pm
Monday	3:30 pm	10:30 pm
Tuesday	3:30 pm	10:30 pm
Wednesday	3:30 pm	10:30 pm
Thursday	3:30 pm	10:30 pm
Friday	3:30 pm	10:30 pm
Saturday	3:30 pm	10:30 pm

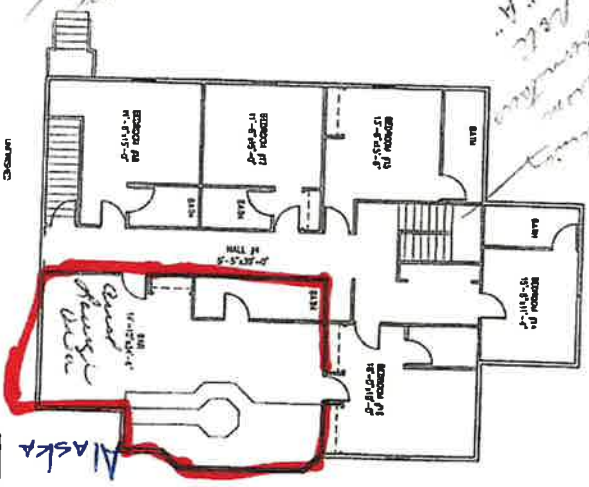
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Alaska King Salmon Lodge

FIRST FLOOR PLAN
1/8" = 1'-0" (0/8" = 1'-0" EXCEPT HALL)



SECOND FLOOR PLAN
1/8" = 1'-0" (0/8" = 1'-0" EXCEPT HALL)



Emergency Exit only

Emergency Exit only

Emergency Exit only

Emergency Exit only

Emergency Exit only



Alaska Alcoholic Beverage Control Board Restaurant Endorsement Application

Section 6 – Areas Covered by Endorsement

Does the endorsement apply to your entire licensed premises as approved by the ABC Board? Yes ☒ No ☐
Does the requested endorsement expand your currently licensed premises? Yes ☐ No ☒

- If No, attach the approved diagram, no larger than 8 1/2" x 11" of the layout, and identify the portions of the premises covered by various requested endorsements. You must use a solid, contiguous colored line in any color other than red to outline the outer perimeter of the area of the premises covered by the requested endorsement(s).
- If endorsements are overlapping, provide a conspicuous means to distinguish each endorsement from the other (e.g., keyed map with varying colors for each requested endorsement).
- Your drawing MUST include:
 - Dimensions in feet **not** square feet of all exterior walls and major interior walls (we do not accept diagrams drawn to scale)
 - Include cross-streets
 - A north arrow, and any significant geographical features. Points of reference, such as a compass showing North.
 - All entrances, exits, walls, bars, and fixtures
- If your premises includes multiple floors, please include a separate diagram of each floor. You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- **Any endorsement applications that include outdoor space** are required to submit a security plan that includes information about the barriers, practices, and personnel that are to be used to ensure that alcohol is not introduced or removed from the permitted premises and to prevent the access of alcohol by a minor during the permitted event. A security plan may be requested for other proposed locations on a case-by-case basis.

Section 7 – Attestations

I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.

Initials

NL

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3AAC 305.340.

NL

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

NL

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence of other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license, and or endorsement. I further understand that this is a Class A misdemeanor under AS 11.56.210 to falsify an application and commit the crime of unsworn falsification.

NL

Nicholas Larsen - Manager KSL Adventures, LLC

Printed name of licensee

Signature of licensee

04/17/2024

Date

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KSL ADVENTURES LLC
350 E 2200 North
Logan, UT 84341

YOUR PERMIT IS PRINTED ON THE REVERSE SIDE OF THIS PAGE.

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Alaska Food Code 2024 Establishment Permit

Division of Environmental Health
Food Safety & Sanitation Program

Permit Number: 15890
Issued to: **KSL ADVENTURES LLC**
For: **Alaska King Salmon Lodge FN-4**
For Operation of: **FN-4 Tavern/Bar**
Located at: **165 W Housing RD King Salmon, AK 99613**

This permit, issued under the provisions of 18 AAC 31, is valid until the noted expiration date or unless suspended or revoked by the department.

This permit is not transferable for change of ownership, facility location, or type of operation. It must be posted in plain view in the establishment and is the property of the State of Alaska.

Expiration Date:
December 31, 2024

Program Manager:

A handwritten signature in black ink, appearing to read "Kimberly S. Brown".

**If you have questions or concerns regarding
safe food handling practices call toll free:**

1-87-SAFE-FOOD

(in Anchorage call 334-2560)



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APR 17 2024

KSL ADVENTURES LLC
350 E 2200 North
Logan, UT 84341

YOUR PERMIT IS PRINTED ON THE REVERSE SIDE OF THIS PAGE.

RECEIVED

APR 17 2024



Alaska Food Code 2024 Establishment Permit

Division of Environmental Health
Food Safety & Sanitation Program

Permit Number: 15889
Issued to: **KSL ADVENTURES LLC**
For: **Alaska King Salmon Lodge**
For Operation of: **FF-1 Food Service**
Located at: **165 W Housing RD King Salmon, AK 99613**

This permit, issued under the provisions of 18 AAC 31, is valid until the noted expiration date or unless suspended or revoked by the department.

This permit is not transferable for change of ownership, facility location, or type of operation. It must be posted in plain view in the establishment and is the property of the State of Alaska.

Expiration Date:
December 31, 2024

Program Manager:

A handwritten signature in black ink, appearing to read "Kimberly 881", is written over the printed name of the Program Manager.

**If you have questions or concerns regarding
safe food handling practices call toll free:**

1-87-SAFE-FOOD

(in Anchorage call 334-2560)



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THE LODGE DINNER MENU

SALMON OF THE DAY 35

POULTRY OF THE DAY 30

PASTA OF THE DAY 28

CHEFS SPECIAL OF THE DAY 40

(ADD A CUP OF SOUP OR SIDE SALAD TO ANY ENTREE \$8)

DAILY APPETIZERS

Spinach and Artichoke dip served with toasted Naan bread \$18

Smoked local salmon dip served with Melba toast \$18

3 slow cooked BBQ pork sliders topped with cole slaw & Meyers Rum infused pineapple chunks \$15

Chicken Wings, 1-lb breaded BB-Q or Buffalo style served with carrots & celery \$22

Meatball-tini served in a martini glass with a rim of Parmesan cheese & crostinis \$18

Seared Tuna served over corn tortilla chips with avocado, cilantro and a balsamic glaze \$22

Chefs inspired personal pizza with Naan bread crust (Indian style flat bread) \$18

DINNER SALADS

Iceberg Wedge w/bacon bits, blue cheese crumbles, sliced red onions & homemade croutons \$20

Caesar with fresh Romaine, Parmesan cheese, homemade croutons & tossed with Caesar dressing \$20

Burrata Cheese plate surrounded with beets, mandarine slices, berries & side of balsamic glaze \$25

Add on 4 oz of grilled chicken, salmon or beef for an additional \$8.00

SOUP OF THE DAY

Bowl \$15

DESSERT

Chef's special \$15

Add a scoop of vanilla ice cream \$5

BEVERAGES

Shirley Temple, Roy Rogers, Arnold palmer \$4

Coke, Diet Coke, Sprite, Sprite Zero, Mug Root Beer \$4

Organic Kombucha (raspberry or ginger lemon) \$8

Lemonade & Unsweetened Ice Tea \$3 (strawberry or mango add \$2)

Pellegrino flavored fruit seltzers \$5

(Ask your server for our variety of flavors)

*Consuming raw or undercooked meats, poultry seafood, shellfish or eggs may increase your risk of food borne illnesses
Especially if you have certain medical conditions