The following applications have been received by the Village Clerk-Treasurer of the Village of Allouez, County of Brown, State of Wisconsin, for licenses to sell fermented malt beverages and intoxicating liquors from July 1, 2017 through June 30, 2018:

CLASS B FERMENTED MALT BEVERAGE & CLASS B LIQUOR (COMBINATION)

Michael Bloomer, 517 Somerset Drive, Green Bay, WI 54301 for the premises at 1539 Riverside Drive (St. Michael's Pub)

Lorelei Inn, Inc., 1412 S. Webster Avenue, Green Bay, WI 54301 for the premises at 1412 S. Webster Avenue (Lorelei Inn - David Hack)

Mc Elrone and Mertz WI Partnersip, 1500 S. Webster Avenue, Green Bay, WI 54301 for the premises at 1500 S. Webster Avenue (Pump Room)

Ziggeys Inn LLC, 741 Hoffman Road, Green Bay, WI 54301 for the premises at 741 Hoffman Road (Ziggey's Inn - Agent: Mary DeJardin)

D & M Entertainment Incorporated, 3600 Riverside Drive, Green Bay, WI 54301 for the premises at 3600 Riverside Drive (Doug's Take 5 – James D. Meikle)

J.P. Real Properties, Inc., P.O. Box 250774, Milwaukee, WI 53225-6511, for the premises at 335 W. St. Joseph Street (Hawthorn Suites by Wyndham-Green Bay - John A. Petcoff)

Jimmy Seas Inc, 1330 Marine Street, for the premises at 1330 Marine Street (Jimmy Seas – Rochelle A. Nelson)

Gallagher's Pizza Inc, 1927 S Webster Avenue, for the premises at 1927 S Webster Avenue (Gallagher's Pizza - Kevin Osadjan)

Manasanoke Chanthasena, 849 Centennial Centre Blvd, Oneida, WI 54155 for the premises at 1350 Marine Street (Nuk's Thai Cuisine)

Village Grille LLC, 801 Hoffman Road, Green Bay, WI 54301 for the premises at 801 Hoffman Road, Ste. 109 (The Village Grille - Kathleen Proctor)

Los Magueyes Inc., 1329 S Webster Avenue, Green Bay, WI 54301 for the premises at 1329 S Webster Avenue (Los Magueyes – Julio Herrera)

The Riviera Bar and Grille, 2150 Riverside Drive, Green Bay, WI 54301 for the premises at 2150 Riverside Drive (The Riviera Bar and Grille – Agent: Mari O'Brien)

Galley 57, LLC, 2222 Riverside Drive, Green Bay, WI 54301 for the premises at 2222 Riverside Drive (Galley 57 – Andrew Mueller)

Wisconsin Pub and Palette, 516 Greene Avenue, Green Bay, WI 54301 for the premises at 516 Greene Avenue (Palette and Pub)

CLASS A FERMENTED MALT BEVERAGE & CLASS A LIQUOR (COMBINATION)

Allouez Beer & Liquor Depot Inc., 1255 S Monroe Avenue, Green Bay, WI 54301 for the premises at 1255 S. Monroe, Ste. 101 (Allouez Beer & Liquor - Edward N. Gerczak Jr.)

Austin's Stores, Inc., 3823 S. Webster Avenue, Green Bay, WI 54301 for the premises at 3823 S. Webster Avenue (The Original Austin's - Richard P. Austin)

Foodmen 2, Inc, 1220 S Webster Avenue, Green Bay, WI 54301 for the premises at 1220 S. Webster Avenue (Webster Avenue Market - Michael F. Novak)

Pit Row, Inc., 1501 S Webster Avenue, Green Bay, WI 54301 for the premises at 1501 S Webster Avenue (Pit Row on Webster – Thomas E Matuszak)

Trailside Convenience Mart Inc., 2203 S. Webster Avenue, Green Bay, for the premises at 2203 S. Webster Avenue (Allouez Quik Stop – Allen L. Morin)

Kwik Trip, Inc., P.O. Box 2107, La Crosse, WI 54602-2107 for the premises at 1401 S Webster Avenue (Kwik Trip Express 543 – Agent: Victoria L. Holmes)

CLASS A FERMENTED MALT BEVERAGE & CLASS A LIQUOR (CIDER ONLY)

Condon Oil Company, 126 E. Jackson Street, Ripon, WI 54971 for the premises at 3907 S. Webster Avenue (Midway Mobil – Kraig Bauman)

Dated this 14th day of April, 2017 Debra M. Baenen, Allouez Clerk-Treasurer

Publish: April 18, April 19 and April 20, 2017 (Affidavit Requested)

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION Applicant's Wi Seller's Permit No.: FEIN 456 - 0000 36 25 - 03 Submit to municipal clerk. Read instructions on reverse side. *3*91*23362*2 LICENSE REQUESTED For the license period beginning: 07-01-17 TYPE FEE Class A beer **⊠**Class B beer $OO.\overline{\infty}$ TO THE GOVERNING BODY of the: X Village of Class C wine ☐ City of Class A liquor Aldermanic Dist. No. (if required by ordinance) 🔲 Class A liquor (cider only) \$ Class B liquor CHECK ONE Individual Partnership ☐ Limited Liability Company Reserve Class B liquor ☐ Corporation/Nonprofit Organization Class B (wine only) winery Publication fee Complete A or B. All must complete C. **TOTAL FEE** Individual or Partnership: Full Name(s) (Last, First and Middle Name) Home Address Somerset Dr Green Bay WI omer Michael And Full Name of Corporation/Nonprofit Organization/Limited Liability Company Address of Corporation/Limited Liability Company (if different from licensed premises) All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company: Title Name (Inc. Middle Name) **Home Address** Post Office & Zip Code President/Member Vice President/Member Secretary/Member Treasurer/Member Agent > Directors/Managers C.1. Trade Name > St Michael's Pub

2. Address of Premises > 1539 Riverside Dr Business Phone Number 940 434 2348 2. Address of Premises > 1539 Riverside Dr Post Office & Zip Code > Creen Bay, W7 5430/
3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? 4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must 15+ \$1 1200 54 include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. Area.

(Alcohol beverages may be sold and stored only on the premises described.) 8x8 cooler (A NE corner: 3.5x5 Bathrooms:

5. Legal description (orbit if street address is given above). The sales is given above to a partnership licensee, or any member, officer, director manager or according to the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director manager or according limited liability approach to a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side 7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. 8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. 9. Does the applicant understand they must hold a Wisconsin Seller's Permit? 10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to open to this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual solicitudes and penalty member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) SUBSCRIBED AND SWORN TO BE (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

this day of Corporation Member/Manager of Limited Liability Company /Partner/Individual)

(Cierk/Notery Public)

(

R#20779 >\$60,00

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICAT	Applicant's W. Seller's Permit No.: FEIN Number: 45.0-0004.04.782-03 39-20398.08
Submit to municipal clerk. Read instructions on reverse side.	LICENSE REQUESTED
For the license period beginning: () 1 2017 ending July 30, 3	TYPE FEE
Town of	Class A beer \$
TO THE GOVERNING BODY of the: Village of \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Class C wine \$
City of	Class A liquor \$
County of Augury) Aldermanic Dist. No. (if required by or	
	Defass B Ilquor \$400
CHECK ONE Individual Partnership I Limited Liability Com	
☐ Corporation/Nonprofit Organization	Class B (wine only) winery \$ Publication fee \$ (\$\alpha \cdot \cdo
Complete A or B. All must complete C.	TOTAL FEE \$5000
A. Individual or Partnership:	
Full Name(s) (Last, First and Middle Name) Home Address	Post Office & Zip Gode) Me agan (Aslows from 1348 Taxe at Xul
Chang Stall 80' Ralphist Rule (1) 54217	(Mayer (Mary) Bayer
B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company	order In Vac
Address of Corporation/Limited Liability Company (if different from licensed premises	
All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Ag	pent of Limited Liability Company: Home Address Post Office & Zip Code
Title Name (Inc. Middle Name) President/Member A Record (Inc. Middle Name)	Hollie Address
Vice President/Member 4/100 and Calomlia	
Secretary/Member	
Treasurer/Mariber Tylane Witak	
Agent Adul Clack	
Directors/Managers C.1. Trade Name (Nate Ling Law , Law)	Business Phone Number 926-437-5921
2. Address of Premises \ /4/2 & Webster/live	Post Office & Zip Code > Mesa Bru
3. Does the applicant understand that they must purchase alcohol beverages only from Wi	sconsin wholesalers, brewerles and brewpubs? Yes
4. Premises description: Describe building or buildings where alcohol beverages are	to be sold and stored. The applicant must
include all rooms including living quarters, if used, for the sales, service, consump	tion, ang/or storage of algonolpheverages and records.
(Alcohol beverages may be sold and stored only on the premises described.) \times	W Ander & Churchloon
(Alcohol beverages may be sold and stored only on the premises described.) 5. Legal description (omit if street address is given above):	u from 8 Jung Loon
5. Legal description (omit if street address is given above): 6. a. Since filing of the last application, has the named licensee, any member of a pa	est Septemble 22-23, 2017 rtnership licensee, or any member, officer,
 5. Legal description (omit if street address is given above):	the September 23-23 2017 rinership licensee, or any member, officer, ration licensee, or nonprofit organization
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	K#21244 >	\$60	,00
DENIEWAL ALCOHOL DEVENO COLLEGE	456-1026 9795	· 28 -	03
RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION Submit to municipal clerk. Read instructions on reverse side.	Applicant's WI Seller's Permit No.: FEIN 450-102079528 39	Number:	500
and the same of th	LICENSE REQUESTED		,,,,,
(MM DD YYYY) (MM DD YYYY)	TYPE Class A beer	S FE	EE
TO THE GOVERNING BODY of the: 🔯 Village of }	Class B beer	\$ 100	
☐ City of)		\$	
County of <u>βροωη</u> Aldermanic Dist. No (if required by ordinance)	Class A liquor (cider only)	\$ N/	
CHECK ONE 🔲 Individual 💢 Partnership 🔲 Limited Liability Company		\$ 400 \$	2
☐ Corporation/Nonprofit Organization	Class B (wine only) winery	<u> </u>	
Complete A or B. All must complete C.		\$ (00	ე.00
A. Individual or Partnership: Full Name(s) (Last, First and Middle Name) Home Address	Post Office & Z		<u>J.00</u>
Russell 1. Mc Elrone 1500 S. Webster Aug Gre	CEN Bay, WI 5	4301	
B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company \ M(2) VEV	en Bay WI S	4301	····
Address of Corporation/Limited Liability Company (if different from licensed premises)		rine	212
All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limit Title Name (Inc. Middle Name) Home A			In 0 - d -
President/Member	uuress Post C	office & Z	ib Code
Vice President/MemberSecretary/Member	-		
Treasurer/Member	·		
Agent Directors/Managers			
C.1. Trade Name The Pump Room Business	Phone Number (920) 432	-8711	<i>_</i>
2. Address of Premises 1500 S. Webster Ave Post Offi	ce & Zip Code > Green Ba	4 WI	
 Does the applicant understand that they must purchase alcohol beverages only from Wisconsin whole. Premises description: Describe building or buildings where alcohol beverages are to be sold a include all rooms including living quarters, if used, for the sales, service, consumption, and/or (Alcohol beverages may be sold and stored only on the premises described.) 	and stored. The applicant must storage of alcohol beverages and	d records.	_
5. Legal description (omit if street address is given above): 8 X (6 BCCL STORAGE, a	6 610 GiGlen Stoma	6' K 12'	OFFICE
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensetor, manager or agent for either a limited liability company licensee, corporation license licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality	ensee, or any member, officer, ee, or nonprofit organization		\ <i>t</i>
 b. Are charges for any offenses presently pending (excluding traffic offenses not related to all 	cohol) against the named		[ZKNo
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions	le	☐ Yes	≯ No
last application for this license? If yes, explain.	•	☐ Yes	⊠ No
Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Franchise Tax return of the licensee? If not, explain.	Wisconsin Income or	Ĭ X Î Yes	□ No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776]			_
Does the applicant understand that alcohol beverage involces must be kept at the licensed predate of invoice and made available for inspection by law enforcement?	mole on for O versus from the	Yes	□ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?		X Yes	□ No Ճ No
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the best of the knowledge of the signers. Signers agree to operate this business according to law and that the if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant of Limited Liability Companies must sign.)	e above questions has been truthful	lly answer	ed to the
SUBSCRIBED AND SWODN TO REFORE ME	. 1		
this 3 day of Marchillillillillillillillillillillillillill	PMELL	ae -	
(Officer of Corporation/M	ember/Manager of Limited Liability Company	//Partner/Inc	lividual)
My commission expires (Clerk/Notary Public) (Officer or Corporation/M	ember/Manager of Limited Liability Company		
TO BE COMPLETED BY CLERK (Additional Partner(s)/Me	mber/Manager of Limited Liability Company	if Any)	
Date received and filed with municipal clerk Date reported to Suntificoard	Date license granted		
License number issued Apate license issued	Signature of Clerk / Deputy Clerk		
TO BE COMPLETED BY CLERK Date received and filed with municipal clerk License number issued AT-115 (R. 7-15)			
	Wisconsin D	apartment of	Revenue

		R# 20775 \ 3128/17 (\$ 60.00)
RENEWAL ALCOHOL BEVERAG	E LICENSE APPLICATION	Applicant's W. Seller's Permit No.: FEIN N	lumber:	\neg
Submit to municipal clerk. Read instructions of	on reverse side.	LICENSE REQUESTED		
For the license period beginning:	17 ending: 6 30 18	TYPE	FEE	
(MMIDD YY	(MM DD VYYY)	Class A beer	\$	
☐ Town of	1 (11 (N) (N (N) (N)	Class B beer	\$ 100.	
TO THE GOVERNING BODY of the: ॡ Village	of \	Class C wine	\$	
n ☐ City of)	Class A liquor	\$	
County of DOMO Aldermania	c Dist. No. (if required by ordinance)	37	\$ N/A	
		Class B liquor	\$400.	
CHECK ONE Individual Partners	· · ·	Reserve Class B liquor	<u>\$</u>	
☐ Corporation/Nonprofit Org	ganization		\$	
Complete A or B. All must complete C.			\$ 6O	_
•		TOTAL FEE	\$560.0	0
A. Individual or Partnership: Full Name(s) (Last, First and Middle No.	ame) Home Address	Post Office & Z	ip Code	_
B. Full Name of Corporation/Nonprofit Organization Address of Corporation/Limited Liability Comp	pany (if different from licensed premises)			
Title Name (I	tion and Members/Managers and Agent of Limi nc. Middle Name) Home A	red Liability Company: ddress Post 0	Office & Zip Co	ode
			·	
Secretary/Member				
Treasuler/Member	line			
Directors/Managers	NO Puninga	s Phone Number <u>920 33</u>	30-78	10
C. I. Hade Halle	Busines	ice & Zip Code Date 184	11/01/00	54
2. Address of Premises] No
3. Does the applicant understand that they must pu	rchase alcohol beverages only from visconsin with	and stored. The applicant must	ــا 103 ـــا	J 110
Premises description: Describe building or building or building all rooms including living quarters, if u (Alcohol beverages may be sold and stored on the control of	ildings where alcohol beverages are to be sold ised, for the sales, service, consumption, and/o ly on the premises described.)	· storage of alcohol beverages an	id records.	Loca
5. Legal description (omit if street address is give	en above):		room of	Z.C
Since filing of the last application, has the redirector, manager or agent for either a limiting licensee been convicted of any offenses.	named licensee, any member of a partnership licted liability company licensee, corporation licen (excluding traffic offenses not related to alcohostates, or ordinances of any county or municipalli	see, or nonprofit organization i) for violation of any federal	//C a □ Yes □	7 No
h Are charges for any offenses presently no	ending (excluding traffic offenses not related to a this license? If yes, explain fully on reverse s	Icohol) against the named] No
7. Except for questions 6a and 6b, have there b last application for this license? If yes, expla	een any changes in the answers to the question			⊒ √No
8. Was the profit or loss from the sale of alcohol Franchise Tax return of the licensee? If not, e	beverages for the previous year reported on the explain.	e Wisconsin Income or	□Yes □] No
9. Does the applicant understand they must hole [phone (608) 266-2776]	d a Wisconsin Seller's Permit?		Yes [] No
Does the applicant understand that alcohol be date of invoice and made available for inspection.	ction by law enforcement?] No
11. Is the applicant indebted to any wholesaler be	eyond 15 days for beer or 30 days for liquor?.		. ∐ Yes L	∐-No
READ CAREFULLY BEFORE SIGNING: Under pena best of the knowledge of the signers. Signers agree to if granted, will not be assigned to another. (Individual of Limited Liability Companies must sign.)	o operate this business according to law and that the	ne rights and responsibilities confer	red by the licen	1SO(S),
SUBSCRIBED AND SWORN TO BEFORE	ME	αM	•	
this 28 day of March	. 20 7 (Officer of Corporation	Wiember/Manager of Iffiliaed Liability Comp	pany /Partner/Indivi	idual)
	1000 of Company to	Member/Manager of Limited Liability Comp	nany /Darlach	
My commission expires (Clerk/Notary Public)		Member/Manager of Limited Liability Comp		
TO BE COMPLETED BY CLERK			 *	
Date received and filed with municipal clerk	Date reported to council/board	Date license granted	····	
3/28/17	·			
License number Issued	Date license issued	Signature of Clerk / Deputy Clerk		

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION 56-102699 Submit to municipal clerk. Read instructions on reverse side. LICENSE REQUESTED 01/01 For the license period beginning: TYPE FEE MM DD YY 🗌 Class A beer ☐ Town of Class B beer DO TO THE GOVERNING BODY of the: Village of Class C wine ☐ City of ☐ Class A liquor \$ County of Aldermanic Dist. No. (if required by ordinance) Class A liquor (cider only) \$ Class B liquor 400 CHECK ONE Individual Partnership Limited Liability Company Reserve Class B liquor ☐ Corporation/Nonprofit Organization Class B (wine only) winery Complete A or B. All must complete C. Publication fee **TOTAL FEE** .00 Individual or Partnership: Full Name(s) (Last, First and Middle Name) Full Name of Corporation/Nonprofit Organization/Limited Liability Company Address of Corporation/Limited Liability Company (if different from licensed premises) KIVERCIDE All Officer(s) Director(s) and Agent-of Corporation and Members/Managers and Agent of Limited Liability Company: Title Name (Inc. Middle Name) Home Address President/Member Vice President/Member Secretary/Member Treasurer/Member Agent > Directors/Managers C.1. Trade Name **Business Phone Number** 2. Address of Premises > Post Office & Zip Code 3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? 4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and (Alcohol beverages may be sold and stored only on the premises described.) //VTERIOR OF (SAICD. 5. Legal description (omit if street address is given above): 6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side 7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. 8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. 9. Does the applicant understand they must hold a Wisconsin Seller's Permit? □ No 10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the ☐ No **₩** No READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another included applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign; SUBSCRIBED AND SWORN TO BEFORE WER (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual) (Officer of Corporation/Member/Manager of Limited Liability Company /Partner) WISCO. (Additional Partner(s)/Member/Manager of Limited Liability Company if Any) TO BE COMPLETED BY CLERK Date reported to council/board Date license granted License number issue Date license Issued Signature of Clerk / Deputy Clerk

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION	450-0000233dde-03 39-1	100 BA
futurit to inunicipal clark. Read frustructions on reverue alds.		- WE 000
For the liceness nected deglinning: 07/01/2017 ending: 06/30/2018	AND THE PARTY OF THE PROPERTY OF THE PARTY O	WE'S -
C) Town of	L Cines A baser.	
TO THE GOVERNMENTORY of the K VIllage of Allouez	Class II bon'	100.00
[] city of	Chas C white	into programme annuaged
county of Brown Aldermanic Dist No. (If regulated by ordinance)	Ches A figure (cities only) 3	N/A
1 compression of the property of the same	Cities is liquor	400.00
CHECK ONE [] Individual [] Partnership [] Limited Liability Company	["] Premerve Chape & Ingular. S.	
Corporation/Monorative Consentation	[] Clear A (value buly) whery \$	
Complete A or B. All must complete C.		60.00
A. Individual of Portnership:	TOTAL FIRE	500.00
manta diministrative de la company de la com	Post Office & Zip	Coide
the second of th	a magazini and a salah salah salah	a apara kan dan sering
G. Full Nation of Comportation/Nonprost Crosmizulion/Limited Habitity Company, J. J.P. Keral	Properties into	At a few states and the second
Address of Composition/Limited Liability Company of different from floorsest premises at	CLEASE ORAZZA MARKANIA	actoba IVA)
Addition of Compared the Internation of Company (find the Company) of Company (find the Company (find the Company) of Company (find the Co	ited Tippliff Courbants.	Artification of the telephone single a
Yilly Neme (inc. Middle Name) Home A	Acdresie Post Of	nna h Zip Gade 📒
Geraldine V Czajkowski PC Box 25 Vice President/Member Geraldine V Czajkowski PC Box 25	0774 Milwaukog VV U774 Milwaukog VV	しつる ととう からなわった
Continuity of the Continuity o		4.46
Secretary/Manhar Geralidine Craincwisk PO Box 2	50774 Milwaukes, VV 50774 Milwaukes, V	人にある28
Treesurer/Member John A Potcoff PO Box 2 Agent John A Percoff PO Box 2	50774 Milwaukee.) 20774 Milwaukee.)	VI 88225
Diractoro/Managera		List of the Londille
Direction/Manapera Buchan Cream Bay M. Buchan Address of Premises & 198 MCM, Joseph St. Green Bay M. Post Cl.	ck frions Nurober (920), £35:223	Will remark to the me and the second
2. Address of Premises 1 1981-WCat. Joseph St. Green-Rey, William Post Ci 5. Does no opplican industry that they ourt purchase obvious by wedge dily from Wagonolis wh	flice is Sin Conan A	54301
5. Dues the applicant undustrial that may built purchase elevined by whether only from Wagonolis wh	ci seelats, browenea and brolypube?	IN YOU !! NO
 Priembace description: Doubling building or buildings where stocks betting a restorment include all round fuduating tiving querters, if used, for the adds, service; consumation, end/c 	- ena marea. The appusent must ir stornae of electiol bevertales land	inderde.
include all round including living querters, if used, for the salets, service, consumption, englic (Alcohol beverages may be sold and atomationly on the premises described.) 335 W. St.	doseph St. Green Bay, Wi-	Getenouse
6. Legal description (orall il street advioce le given aveva):	ariana nama aran in a mara hisana a Ale	t to the second seco
6. c. Since filling of the last epipliculion, has the main or beginner, any merticly of a partnership is director, manager of agent for oilings a firmled flability company licenties, corporation licenties.	ioenyaei, or any morniari, chingr.	
licenses been convicted of any offerees (excluding traffic offeneds not related to elech-	ol; for violation of any tadaral	
laws, city Muccotkin laws, any laws of other states, or orgital rotal of shy bounty or municipal		CO Yes (X) No
to Diar obargos for any extremes presently ponding generally little of the present of related to the licenses of the property of the state of the property of the state of the present of the state of the	ortiol of against the named	[] Yes [X No
7. Except for duestical in and 6b, have their hear any observes in the displace to the quantic	ore an authoritied by you on your	1'' 10u 183 i.o.
inst upulcation for this itemse? If year expirite. 5. Was the profit to loss from the orde of about of beverages for the previous year rejusted on the	the same state of the same sta	LI You: IN No
S. Was the profit to loss from the table of abatic beverages for the previous year rejurted on the	he Wiedenblir Iricome or	rod v in v
Franchise The return of the licensor's if not, explain. 0. Door the applicant understand they must bold a Wisconsin Saller's Permit?	alay i ay i maring a said i	Yer No
10 Properties (1919) 1919 (1919) 1919 (1919) 1919 (1919) 1919 (1919)		Yen [] No
10. Does the explanat unregational that alcohol haverage involves must be keet at the licensed	bramings for 2 ventre from the	
: dolo of invoice and made evallable for inepactors because of the solution in the contract of		X Yes Dive
11. Is the applicant indebted to any wholeseless their a whole the part of 30 days for liquor?		Yeo [2 No
NEAD CAREFULLY BEFORE STONING: Und Toman Townsell was, the design states that each of	of the playe guestone has been milities	illy anowhrad to the
NEAD CAREFULLY BEFORE BIGNING: Unc. Think? Miled by the or should state that each of best of the knewledge of the signers. Signer, select is operate this business according to law and that if ground, the high not be nuclioned to another. Or different applicants of a community of a partnership contract to build community in a partnership contract to build community in a partnership contract to build community in a partnership contract.	the rights and responsibilities confere	id by the tleanered.
	and the street of the street o	indirection and the second
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	ent Manthaille Sour of Undalfile Hilly Chings	कुष्ट्र भारतात्वकात्वरीयकार्यका
Concept of Conjoral	บาง Mambarn สอเก็บเก็บ ซา Dindico Dicidity ใช้เล้ากูล	ay Henthing
My contribution of the second	e) A laribilitan o sper al Limilioù l'Epoliti Comput	
UP LICE COMMANDERS AND THE REPORT OF THE PROPERTY OF THE PROPE	т. т. т. накажатыны калыматын тарамын таматы Булук метикетин калыматын тарамын байры	schostina e pompleto manhan. An station
TO HE COMPLETED BY CLERK	Chile Hounes Granled	en de la companya de
1 Manua minus mana 30 17	Nighting etchicker the anning	July and and the state of the s
		战的 经成份计
AT-110 (R.7.4-6)	Widoonille	Dalakidiladilat Kasamala

	•					
				R# 21290	4116	7
				3/31/17.	490	/ ni
RENEWAL	ALCOHOL BEV	ERAGE LICENSE APPI	-ICATION	Applicant's Wisconsin)7584×33	$\frac{\partial^2 O_2}{\partial I}$
Submit to mun	icipal clerk. Read inst	ructions on reverse side.		Seller's Permit Number: 004-000 Federal Employer Identification Number (FEIN):	<u> </u>	101
	period beginning: 0'		06/30/2018	Number (FEIN): 2U-	4992407	
		(MM DD YYYY)	(MM DD YYYY)	TYPE	FE	E
TO THE GOVE	ERNING BODY of the:	☐ Town of ✓ Allouez		Class A beer	\$	_
10 1112 00 12	INTINO BODT OF INC.	City of		Class B beer	\$ 100.00	
County of Bro	own	Aldermanic Dist. No. (if	required by ordinance)	☐ Wholesale beer ☐ Class C wine	\$	
obuilty of		 ·		☐ Class A liquor	\$	$\overline{}$
CHECK ONE	☐ Individual	-· · · -	d Liability Company	Class B liquor	\$ 4000)
	L Corporation/Nonp	profit Organization		Reserve Class B liquor	\$	
Complete A o	r B. All must complet	te C.		Publication fee	\$ 60.0	
	or Partnership:			TOTAL FEE	\$ \$60.0	<u> </u>
Full N	lame(s) (Last, First and N	Vilddle Name) Home	Address	Post Office & Z	ip Code	
<u></u>						
		Organization/Limited Liability Compan	,	Inc.		
	-	lity Company (if different from license f Corporation and Members/Manager	· · · · · · · · · · · · · · · · · · ·	lability Company	-	
Title		Name (Inc. Middle Name)	Home Ad	dress Post (Office & Zip C	ode
President/M	Member <u>Troy J. Strec</u>	ckenbach - 205 Miramar Str	eet - Green Bay,	WI 54301	<u> </u>	
		A. Nelson - 1146 Oregon	Street - Green Ba	y, W1 54303		
Secretary/N Treasurer/N		<u> </u>		<u> </u>		
Agent • Re	ochelle A. Nelson -	- 1146 Oregon St-Green Ba	y, WI 54303			
Directors/M	lanagers /					
C. 1, Trade Nam	e Jimmy 36	45	Business	Phone Number 920-438-76	540	
	Premises 1330 Mar			e & Zip Code <u>Green Bay</u>		
	•	hey must purchase alcohol beverage:	•		√ Yes [_] No
include all r (Alcohol be	ooms including living quareverages may be sold and	ing or buildings where alcohol bevera rters, if used, for the sales, service, a stored only on the premises describe	nd/or storage of alcohord) 3208 SF 1nsi	stored. The applicant must I beverages and records. de bar, 2034 SF outside	patio	
Legal desci	ription (omit if street addre	ess is given above):				
		has the named licensee, any membe ner a limited liability company licensee				
		offenses (excluding traffic offenses n				
laws, an	y Wisconsin laws, any laws	s of other states, or ordinances of any o	county or municipality?	f yes, complete reverse side	☐ Yes 🖫	No 🛚
b. Are cha	rges for any offenses pre	esently pending (excluding traffic offe liated with this license? If yes, explai	enses not related to alc	ohol) against the named	∏ Yes [√	71 No
		e there been any changes in the ansv			res (y	ZI No
last applica	ition for this license? If ye	s, explain.		s submitted by you on your	☐ Yes 📮	Z No
Franchise T	Tax return of the licensee?				✓ Yes] No
		consin Seller's Permit must be applie (608) 266-2776]			✓ Yes	_ No
		Ilcohol beverage invoices must be ke			(A) 100 [7 170
date of invo	pice and made available fo	or inspection by law enforcement? , .	·		₹ Yes □	□No
11. Is the applic	cant indebted to any whole	esaler beyond 15 days for beer or 30	days for liquor?		Yes 🗓	Z No
READ CAREFUL	.LY BEFORE SIGNING: Un	ider pedalty pour expyjaw, toe application	ant states that each of th	e above questions has been truth	fully answered	to the
best of the knowle	adge of the signers. Signers	nder penning when pyjaw, the applici s agree to operate this plants accord tivideal applicants and each manner of	ling to law and that the ri	ghts and responsibilities conferred	J by the license	e(s), if
Limited Liability C	companies must sign.)	SON NOTAD. YES	a barthership abblicant	must sign, corporate officer(s), file	mine silianay	eis oi
SUBSCRIBED	AND SWORN TO BEI		(\mathcal{L})	/ \		
this 10th	_ day of March		1 Journal	I de		
Sh	WIDE A Me		(OfficeNot Corporation/M	ember/Manager of Umiled Liability Compa	ny /Partner/Individ	ual)
	(Clerk/Notary Public	ON OF MICCOLLIN	(Officer of Corporation/M	ember/Manager of Limited Liability Compa	iny /Parlner)	
My commission of	expires 4 4 20)ZU MANININI	(Additional Partner(s)/Ma	mber/Manager of Limited Liability Compar	ny if Any)	
TO BE COMPI	LETED BY CLERK		(Additional Partner (S)rive		y a cuy)	
	ed with municipal clerk	Date reported to council/board		Date Ilcense granted		
License number issue	7 7 1 1	Date license issued		Signature of Clerk / Deputy Clerk		
	1	Date livering insular		Signature of Clerk / Deputy Clerk		

H#21479 3/31/17 \$60.00

RENEWAL ALCOHOL BEVERAGE		Applicant's WI Seller's Permit No.: FEIN 1	Number: 2700191	448
Submit to municipal clerk. Read instructions on	a 1 1761 17	LICENSE REQUESTED		
For the license period beginning:	ending: 0 70 70	TYPE	FEE	
(MM Dig YYYY	ר) (אואן טט אַדדר)	Class A beer	\$	
TO THE GOVERNING BODY of the: X Village of	ALLOUSZ		\$ 100	
City of	ALCOUR E		\$	
•		Class A Ilquor	\$	
County of Brown Aldermanic I	Dist. No (if required by ordinance)	[\$ N/A	
OUEOK ONE Individual Badasank	in D. Lincite d Liebility Commons		\$400	
CHECK ONE	. —		\$	
💢 Corporation/Nonprofit Orga	inization	☐ Class B (wine only) winery		
Complete A or B. All must complete C.			\$ 60	- 70
A. Individual or Partnership:		TOTAL FEE	\$ 560	<u> </u>
Full Name(s) (Last, First and Middle Nam	ne) Home Address	Post Office & Z	lp Code	<u></u>
B. Full Name of Corporation/Nonprofit Organization Address of Corporation/Limited Liability Compar	ny (if different from licensed premises)			
All Officer(s) Director(s) and Agent of Corporatio	on and Members/Managers and Agent of Limi	ted Liability Company:		
	. Middle Name) Home A	_	Office & Zip	
President/Member	LOUIS CHATCHE SILVE	. TWIN PINIS CT G.B	<u>, 5431</u>	1
Vice President/Member				
Secretary/Member	ward hubbard 370 G	THING OF DOTON	25 5411	15
Treasurer/Member				
Agent YOUN OSADSAN				
Directors/Managers	ZA Busines	Dhone Number 73: "CTC		
	Dost Off	ice & Zip Code > Grow 3	س بريم	7.00
,				
3. Does the applicant understand that they must purch			LAJ 165	
 Premises description: Describe building or building include all rooms including living quarters, if use (Alcohol beverages may be sold and stored only 	d, for the sales, service, consumption, and/or	storage of alcohol beverages an	id records. ભર્ટ : અન્ય	12 1. J. CO.
5. Legal description (omit if street address is given a				
6. a. Since filing of the last application, has the nar		ensee, or any member, officer.		
director, manager or agent for either a limited	I liability company licensee, corporation license	see, or nonprofit organization		
licensee been convicted of any offenses (e.	xcluding traffic offenses not related to alcoho) for violation of any federal	_	_
laws, any Wisconsin laws, any laws of other sta	ates, or ordinances of any county or municipalit	y? If yes, complete reverse side	⊢ ∐ Yes	⊠ No
 b. Are charges for any offenses presently pend licensee or any other persons affiliated with th 	ding (excluding traffic offenses not related to a lis license? If yes, explain fully on reverse si	lcohol) against the named	. 🗌 Yes	∑ No
7. Except for questions 6a and 6b, have there beer				
last application for this license? If yes, explain.			☐ Yes	🔀 No
8. Was the profit or loss from the sale of alcohol be Franchise Tax return of the licensee? If not, expl	everages for the previous year reported on the	e Wisconsin Income or	∑ Yes	□No
9. Does the applicant understand they must hold a			•	
[phone (608) 266-2776]			. 🔀 Yes	☐ No
10. Does the applicant understand that alcohol beve	erage invoices must be kept at the licensed p	remises for 2 years from the		
date of invoice and made available for inspection			. 🔀 Yes	☐ No
11. Is the applicant indebted to any wholesaler beyo	ond 15 days for beer or 30 days for liquor?		. 🗌 Yes	∑ No
,				
READ CAREFULLY BEFORE SIGNING: Under penalty best of the knowledge of the signers. Signers agree in the figranted, will not be assigned to another. (Individual approof Limited Liability Companies must sign.)	provided by law, the applicant states that each of perate/this susiness according to law and that the provided that the	the above questions has been truth e rights and responsibilities conferr ant must sign; corporate officer(s),	fully answere ed by the lic members/m	ense(s), anagers
SUBSCRIBED AND SWORN TO BEFORE	YOA 注言			
· · · · · · · · · · · · · · · · · ·	· Page Y	7		
this Started day of 1 197-04	(Officer of Corporation	Nember/Manager of Limited Liability Comp	any /Partner/In-	dividual)
1-1197 (James)		Alember (Monor and Marie and Monor and Marie and Monor a		
My commission expires	(Officer of Corporation	Member/Manager of Limited Liability Comp	any /Partner)	
wy contribution cypies	(Additional Partner(s)/	Member/Manager of Limited Liability Compa	ny If Any)	···
TO BE COMPLETED BY CLERK	The state of the s			
	te reported to council/board	Date license granted		
3/3/11		9.		
License number issued Dat	te license issued	Signature of Clerk / Deputy Clerk		
' ' ' '				1

		R#21228 \ \$	60.00	
RENEWAL ALCOHOL BEVERAGE Submit to municipal clerk. Read instructions		7 30 17 Applicant's WI Seller's Permit No. 150 N Ny 45 6 0000 25/04 39	3 Imber: -204318,	7
For the license period beginning:	ending: b 30 (8	LICENSE REQUESTED TYPE Services A beer \$	FEE	1
☐ Town of TO THE GOVERNING BODY of the: ☒ Village ☐ City of		Class B beer \$ Class C wine \$ Class A liquor \$	100]
County of Brown Aldermani	c Dist. No (if required by ordinance)	Class A liquor (cider only) \$		7
CHECK ONE MI Individual Partner:	ship 🔲 Limited Liability Company	Reserve Class B Ilquor \$ Class B (wine only) winery \$		
Complete A or B. All must complete C.	:	Publication fee \$ TOTAL FEE \$	\$100.00	\dashv
A. Individual or Partnership: Full Name(s) (Last, First and Middle N Chart hasseme Manascine L	ame) Home Address Ce 749 Centennial			_
Title Name (I President/Member Vice President/Member Secretary/Member	pany (if different from licensed premises) ition and Members/Managers and Agent of Limite nc. Middle Name) Home Ac		ffice & Zip Code	
Treasurer/MemberAgent				_
Directors/Managers		Phone Number 910) 455-	-0282	
C.1. Trade Name Mult & Phase 14	no. 5t. Greenby Cott. Post Office	ce & Zip Code	1301	
3. Does the applicant understand that they must put	rchase alcohol beverages only from Wisconsin whol	esalers, brewerles and brewpubs?	Yes □ N	10
Premises description: Describe building or building or building duarters, if upper describe building duarters, if upper descriptions.	ildings where alcohol beverages are to be sold a used, for the sales, service, consumption, and/or all on the premises described.)	nd stored. The applicant must storage of alcohol be y erages and	I records.	_
5. Legal description (omit if street address is give	en above):	ansee or any member officer		_
director, manager or agent for either a limi licensee been convicted of any offenses laws, any Wisconsin laws, any laws of other	ted liability company licensee, corporation licens (excluding traffic offenses not related to alcohol) states, or ordinances of any county or municipality	ee, or nonprofit organization for violation of any federal If yes, complete reverse side	☐ Yes	10
Are charges for any offenses presently per licensee or any other persons affiliated with	ending (excluding traffic offenses not related to al n this license? If yes, explain fully on reverse slo	cohol) against the named	☐ Yes Yes	10
7. Except for questions 6a and 6b, have there b	een any changes in the answers to the questions in.	s as submitted by you on your	☐ Yes 🖾 Ñ	١o
Was the profit or loss from the sale of alcohol Franchise Tax return of the licensee? If not, e	beverages for the previous year reported on the explain.	Wisconsin Income or	"⊠Yes □ N	۷o
9. Does the applicant understand they must hole	d a Wisconsin Seller's Permit?		√ Yes □ N	40
10. Does the applicant understand that alcohol be date of involce and made available for inspec	everage Invoices must be kept at the licensed protion by law enforcement?	emises for 2 years from the	Yes D	
11. Is the applicant indebted to any wholesaler be				
READ CAREFULLY BEFORE SIGNING: Under penal best of the knowledge of the signers. Signers agree to if granted, will not be assigned to another. (Individual of Limited Liability Companies must sign.)	n operate this business according to law and that the	e rights and responsibilities conferre	ed by the licenset:	S),
SUBSCRIBED AND SWORN TO BEFORE I	20 7		, 	
Debu MBas	2	Member/Marrager of Limited Liability Compa		<i>,</i> —
My commission expires (Clerk/Notary Public)	(4)	Member/Manager of Limited Liability Compa fember/Manager of Limited Liability Compan		
TO BE COMPLETED BY CLERK				
Date received and filed with municipal clerk	Date reported to council/board	Date license granted	·····	
License number issued	Date license issued	Signature of Clerk / Deputy Clerk		
AT-115 (R. 7-15)		Wisconsin	Department of Rever	nue

R#20851 > \$60.00

RENEWAL ALCOHOL BEVERA		Applicant's WI Seller's Permit No.: FEIN I	Number:	
Submit to municipal clerk. Read instruction	s on reverse side.	456-0003277884-02	26-02	<u> 190</u> 02
For the license period beginning:	11 ending: 6 30 18	LICENSE REQUESTED)		
(MM DD		TYPE	FEE	
□ Town	of \		\$ 6 1500 C	50
TO THE GOVERNING BODY of the: Villag	e of \ Alloyez		* ICO	
☐ City o			\$ '	
17 .			\$	
Alderma	nic Dist. No (if required by ordinance)		\$ N/A	
CHECK ONE 🔲 Individual 🦳 Partne	ership 🗹 Limited Liability Company	<u></u>	* 1 UU	
☐ Corporation/Nonprofit C			\$	
L. Corporation/Nonprofit C	riganization		\$	\sim
Complete A or B. All must complete C.		Publication fee	\$ 60.0	
A. Individual or Partnership:	•	TOTAL FEE	\$ 560.	∞
Full Name(s) (Last, First and Middle	Name) Home Address	Post Office & Z	in Code	
•	· · · · · · · · · · · · · · · · · · ·	1 000 011100 01 2	h cono	
	·			
B. Full Name of Corporation/Nonprofit Organiza	tion/Limited Liability Company	AGE GRIVE LLC		
Address of Corporation/Limited Liability Con				
	ation and Members/Managers and Agent of Limite	nd Liability Company:		
	(Inc. Middle Name) Home Ad		Office & Zip	Codo
President/Member	(inc. widdle Name) Home Ad	uress Post C	vince or Tib	Code
		-··· - · · · · · · · · · · · · · · · ·		
Vice President/Member Secretary/Member				
Treasurer/Member	OR ZOZZ RUSHWAY CURCLE	DEPOLE WI G	1110-	
· /	OR 2022 Rustionly Curcle	Detale wit 54	415	
Directors/Managers	lie Li A	(124 127)	000	
C.1. Trade Name THE VILLAGE COR	\ A\=	Phone Number <u>920 3369</u>		
2. Address of Premises > 801 Hoffm		e & Zlp Code 🕨 <u>GUEN B</u>		<u> </u>
	urchase alcohol beverages only from Wisconsin whole		Yes	□ No
4. Premises description: Describe building or b	uildings where alcohol beverages are to be sold a	nd stored. The applicant must		
include all rooms including living quarters, if	used, for the sales, service, consumption, and/or	storage of alcohol beverages and	d records.	d. At 10:
	nly on the premises described.) DINING ALGA		UX93 DXI	ALLAR VICE
5. Legal description (omit if street address is given		PAGE GXID		5
	named licensee, any member of a partnership lice			
director, manager or agent for either a lim	ited liability company licensee, corporation license	ee, or nonprofit organization		
laws any Misconsin laws any laws of other	s (excluding traffic offenses not related to alcohol)	for violation of any federal	□ v 1	
	r states, or ordinances of any county or municipality		Yes	☑ No
licensee or any other persons affiliated with	ending (excluding traffic offenses not related to ald h this license? If yes, explain fully on reverse sid	onoi) against the named	□ Voc. I	No
			L res [- NO
last application for this license? If yes, expl	peen any changes in the answers to the questions	as submitted by you on your	☐ Yes [ماهاه
**		Associate la company	∐ tes (Li No
Franchise Tax return of the licensee? If not,	I beverages for the previous year reported on the	vvisconsin income or	Yes [□No
9. Does the applicant understand they must ho	· · · · · · · · · · · · · · · · · · ·		K⊂ ies i	
	u a visconsin seller s remit?		Yes	□No
10 Does the applicant understand that alcohol b	everage invoices must be kept at the licensed pre	mises for 2 years from the	12] 103 [
date of invoice and made available for inspe	ction by law enforcement?	mises for 2 years from the	Yes [□ No
	eyond 15 days for beer or 30 days for Ilquor?			
The the applicant indebted to any wholesale, b	eyond 10 days for beer of 50 days for fiduor	• • • • • • • • • • • • • • • • • • • •	tes [_ P N0
READ CAREFULLY BEFORE SIGNING: Under pene	ity!brovided by law, the applicant states that each of th	e above questions has been truthfu	Jllv answered	l to the
pest of the knowledge of the signers. Signers agree t	Ity brovided by law, the applicant states that each of the contract this business according to law and that the	rights and responsibilities conferre	d by the lice	nse(s),
f granted, will not be assigned to another. (Individual of Limited Liability Companies must sign.)	applicants and each member of a partnership applica	nt must sign: corporate officer(s), n	nembers/mar	nagers
S 3/1		1 .		
SUBSCRIBED AND SWORN TO BER ORE	MOZE	# 1/20		
his 29 Nak of Macach	S. 20 PD Tunh	11 1400		
	(Officer of Corporation/M	embar/Manager of Limited Liability Compa	ny /Partner/Indiv	idual)
//y commission expires			•	
(Clerk/Notary Public) Ny commission expires	(Officer of Corporation/M	ember/Manager of Limited Liability Compa	ny /Partner)	
ii) sommodori expires	(Additional Partner(s)/Me	mber/Manager of Limited Liability Compan	v If Anul	
O BE COMPLETED BY OLEDY	WITHIN PROGRAMMENT AND COMMENTAL PROGRAMMENT AND COMMENT AND COM		, a ray)	
O BE COMPLETED BY CLERK Date received and filed with municipal clerk	Date reported to go mol/hourd	Data Iliana		
3129117	Date reported to council/board	Date license granted		
icense number issued	Date license Issued	Signature of Clerk / Deputy Clerk		
•				,

		K#20792\\$60	90	
		3/21/17/ 3	10-46	378044
RENEWAL ALCOHOL BEVERA		Applicant's Wi Seller's Permit No.: FEII 756-10264112	N Number:	7
Submit to municipal clerk. Read instruction For the license period beginning:	ns on reverse side.	LICENSE REQUESTED)	
(MM DE	DIYYYY) (MM DD YYYY)	_ TYPE ☐ Class A beer	\$	
TO THE GOVERNING BODY of the: X Village		Class B beer		1.00
☐ City		Class C wine	\$	
County of Brown Alderma	anic Dist. No (if required by ordinance	Class A liquor (cider only)	\$ N/	'A
CHECK ONE 🔲 Individual 🔲 Partn		☐ Class B liquor ☐ Reserve Class B liquor	\$400	,,,,,,
Corporation/Nonprofit (Organization	Class B (wine only) winery	/ \$	
Complete A or B. All must complete C.		Publication fee TOTAL FEE	\$ 600	, 00
A. Individual or Partnership: Full Name(s) (Last, First and Middle	Name) Home Address	Post Office &		
	15 commanche Ave 6	breen Bay Wi 543		
	ation/Limited Liability Company 205	magueres Ir	\ C	
	mpany (if different from licensed premises)	•		
Title Name	oration and Members/Managers and Agent of e (Inc. Middle Name) Hon	e Address Post	Office & Z	ip Code
President/Member <u>OUVCY</u> Vice President/Member	Julio Herrera 'Con	1295 Commanche Ave	_ Grain	Big W S
Secretary/Member				
Treasurer/Member Julio Herra Agent Julio Herra	rera			
Directors/Managers				
C.1. Trade Name 205 mag vc		ness Phone Number 920 430	375	5
 2. Address of Premises ► 13 2 9 3 9 3. Does the applicant understand that they must perfect the second second		Office & Zip Code 54301	2 []/Vas	□ No
 Premises description: Describe building or the include all rooms including living quarters, if (Alcohol beverages may be sold and stored of the premise of the premise of the	buildings where alcohol beverages are to be s f used, for the sales, service, consumption, an only on the premises described.)	old and stored. The applicant must	nd records.	
5. Legal description (omit if street address is given for a Since filling of the last application has the		. !!		
licensee been convicted of any offense	e named licerisee, any member of a partnershi mited liability company licensee, corporation lices (excluding traffic offenses not related to alco er states, or ordinances of any county or municip	ensee, or nonprofit organization	a 🗆 Vas	₽ No
b. Are charges for any offenses presently	pending (excluding traffic offenses not related	to alcohol) against the named		
7. Except for questions 6a and 6b, have there	ith this license? If yes, explain fully on revers been any changes in the answers to the gues		. 🗌 Yes	Ø No
last application for this license? If yes, exp	lain		☐ Yes	☑ No
Was the profit or loss from the sale of alcohoranchise Tax return of the licensee? If not,	explain.	the Wisconsin Income or	Yes	☐ No
Does the applicant understand they must he [phone (608) 266-2776]	old a Wisconsin Seller's Permit?		. 🗹 Yes	□ No
10. Does the applicant understand that alcohol i	beverage invoices must be kept at the license	d premises for 2 years from the		□ 140
11. Is the applicant indebted to any wholesaler t	ection by law enforcement?		. 🗹 Yes	
READ CAREFULLY BEFORE SIGNING: Under pena				
best of the knowledge of the signers. Signers agree if granted, will not be assigned to another. (Individual of Limited Liability Companies must sign.)	to operate this business according to law and that applicants and the law and	to the above questions has been truth the rights and responsibilities confer plicant must sign: corporate officer(s)	rully answer red by the lic members/n	ed to the cense(s), nanagers
of Limited Liability Companies must sign.)	A PARTIE		momborom	lanagora
SUBSCRIBED AND SWORN TO BEFORE	ME NOTAWA			
methodieta	Officer of Corpora	llon/Member/Manager of Limited Liability Comp	any /Partner/In	ndividual)
(Clerk/Notary Public)	(Officer of Corpora	lion/Member/Manager of Limited Liability Comp	any /Parlner)	
My commission expires	OFFICE (Officer of Corporal (Additional Partner	(s)/Member/Manager of Limited Liability Compa	iny if Any)	
TO BE COMPLETED BY CLERK Date received and fled with municipal clerk	Date reported to council/board	Date Ilcones greated		
License number issued	Date license (ssued	Date Ilcense granted		
	Date irealise isonen	Signature of Clerk / Deputy Clerk		
AT-115 (R. 7-15)		Micogneli	Donadment o	of Daysanus

Wisconsin Department of Revenue

	*		K#21705313117	> \$60	<u>γ</u> .α0
RENEWAL ALCOHOL BEVERA		TION	Applicant's WI Seller's Permit No.: FEIN N		242
Submit to municipal clerk. Read instruction	1101	ı <i>(</i> ?	456-1029208310 8	81-20780 •	J12
For the license period beginning:	ending: b 30	(<u> </u>	TYPE	FEI	2
□Jown		,	Class A beer	\$ 100·	00
TO THE GOVERNING BODY of the: Villag			<u> </u>	\$ 100°	
☐ City o	of)		Class A liquor	\$	
County of Brown Alderma	inic Dist. No (if required by o	ordinance)	,	\$ N/A	
CHECK ONE Individual Partne	ership \(\sqrt{\frac{1}{2}} \) Limited Liability Co	mnany	Class B liquor	\$ 400.	.00
☐ Corporation/Nonprofit C		itipally	Reserve Class B liquor	\$.	
,	- gamzanon			\$ \$ (0(O) · C	
Complete A or B. All must complete C.				\$ 500	00.
A. Individual or Partnership: Full Name(s) (Last, First and Middle	Name) Home Address		Post Office & Zi		
	npany (if different from licensed prem ration and Members/Managers and A (Inc. Middle Name) i Elaine O'Brien	ises) <u>2°</u> gent of Limits Home Ad 1954 Tyle	150 Riverside Drive, Green de Liability Company:	Office & Zi	
Transurar/Mambas					-
Amout & Mari Elaino O'Brion					
Directors/Managers					
C.1. Trade Name The Riviera Bar and Gri	Drive Creen Boy Ma	Business	Phone Number 9204691000		
 2. Address of Premises ▶ 2150 Riverside 3. Does the applicant understand that they must p 					□ No
 Premises description: Describe building or be include all rooms including living quarters, if (Alcohol beverages may be sold and stored of 	ouildings where alcohol beverages are used, for the sales, service, consum only on the premises described.) <u>W</u>	e to be sold a	nd stored. The applicant must	d records	
5. Legal description (omit if street address is given6. a. Since filing of the last application, has the					
director, manager or agent for either a lin licensee been convicted of any offense laws, any Wisconsin laws, any laws of othe	nited liability company licensee, corpo s (excluding traffic offenses not relate	oration license ed to alcohol)	ee, or nonprofit organization for violation of any federal	∏ Yes	☑ No
 b. Are charges for any offenses presently placeholders. licensee or any other persons affiliated with 	pending (excluding traffic offenses no	t related to alc	ohol) against the named		I√No
7. Except for questions 6a and 6b, have there last application for this license? If yes, exp	been any changes in the answers to				_,
8. Was the profit or loss from the sale of alcohol	ol beverages for the previous year rep	ported on the	Wisconsin Income or	☐ Yes	□ / No
Franchise Tax return of the licensee? If not, 9. Does the applicant understand they must ho	old a Wisconsin Seller's Permit?		,	☐ Yes	□√No
[phone (608) 266-2776]	neverage invoices must be kent at the	licensed are	mises for 2 years from the	Yes	☐ No
date of invoice and made available for inspe	ction by law enforcement?			√Yes	□ No
11. Is the applicant indebted to any wholesaler I	peyond 15 days for beer or 30 days for	or liquor?		Yes	□ v N₀
READ CAREFULLY BEFORE SIGNING: Under pen- best of the knowledge of the signers. Signers agree if granted, will not be assigned to another. (Individual of Limited Liability Companies must sign.)	to operate this business according to law	w and that the	rights and responsibilities conferre	d by the lic	rence/cl
SUBSCRIBED AND SWORN TO BEFORE this day of day.		Mari E	, , 4000	60	Grev
Debra W. Bac (Clerk/Notary Publicy)	2122		ember/Manager of Limited Liability Compa		divldual)
My commission expires	117		ember/Manager of Limited Liability Compa		
TO BE COMPLETED BY CLERK	(Additio	mai Martner(s)/Me	mber/Manager of Limited Liability Compan	y if Any)	
Date received and filed with municipal clerk	Date reported to council/board		Date license granted		
License number issued	Data license laural				
	Date license issued		Signature of Clerk / Deputy Clerk		

BRIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION Applicant's Wisconsin Seller's Permit Number: 456 - 10290 Seller's Permit recines. Federal Employer Identification 81-Submit to municipal clerk. For the license period beginning LICENSE REQUESTED ending Class A beer Town of Class B beer 00.00 \$ 1 TO THE GOVERNING BODY of the: Village of Wholesale beer Clty of Class C wine Aldermanic Dist. No. Class A liquor (if required by ordinance) Class B liquor ☐ INDIVIDUAL ☐ PARTNERSHIP Reserve Class B liquor ☐ CORPORATION/NONPROFIT ORGANIZATIÓN Publication fee hereby makes application for the alcohol beverage license(s) checked above. **TOTAL FEE** 2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): > 150 An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person. President/Member Vice President/Member Secretary/Member_ Treasurer/Member Agent >_ Directors/Managers 3. Trade Name Business Phone Number Address of Premises _ Post Office & Zip Code 🕨 _____ 5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server 7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes 8. (a) Corporate/limited liability company applicants only: Insert state _______ and date 2/34/11e of registration. (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.) 9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records. (Alcohol beverage may be sold and stored only on the premises described.) vestawant - Diving Room 10. Legal description (omit if street address is given above):____ 0-6 ☐ No (b) If yes, under what name was license issued? Galley 57 Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864].... □ No Does the applicant understand a Wisconsin Seller's Permit must be applied for and Issued in the same name as that shown in Section 2, above? [phone (608) 266-2776]..... □No 14. Is the applicant Indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? X No READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicant individual applicants and each member of a particle of applicants and responsibilities conferred by the license(s), if granted to the best of the knowledge of the particle of the par SUBSCRIBED AND SWORN TO BEFORE THE (Officer of Corporation/Member/Manager of Limited Liability Company /Partner) My commission expires (Additional Partner(s)/Member/Manager of Limited Liability Company If Any) TO BE COMPLETED BY CLERK Date reported to council/board Date provisional license issued Signature of Clerk / Deputy Clerk

License number issued

Date Ilcense granted

Date license issued

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION pplicant's WI Seller's Permit No.: FEI Submit to municipal clerk. Read instructions on reverse side. LICENSE REQUESTED > For the license period beginning: 07/0 TYPE FEE Class A beer ☐ Town of Class B beer 00.00 TO THE GOVERNING BODY of the: X Village of Class C wine City of Class A liquor \$ County of Brown Aldermanic Dist. No. (if required by ordinance) Class A liquor (cider only) 1\$ 00,00 Class B liquor CHECK ONE | Individual Partnership Reserve Class B liquor ☐ Corporation/Nonprofit Organization Class B (wine only) winery \$ Complete A or B. All must complete C. Publication fee TOTAL FEE Individual or Partnership: Full Name(s) (Last, First and Middle Name) **Home Address** Post Office & Zip Code Full Name of Corporation/Nonprofit Organization/Limited Liability Company \ wisconsin Pub and Palette, Address of Corporation/Limited Liability Company (If different from licensed premises) All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company: Name (inc. Middle Name) **Home Address** Post Office & Zip Code President/Member Carrie A Schmechel 1043 Marvelle Ln #A5 Green Bay 54304 Vice President/Member Secretary/Member Treasurer/Member Agent \ (\arrive Directors/Managers C.1. Trade Name > Palette and Pu Business Phone Number 920-940-8441 2. Address of Premises > 5/10 Greene Aue Post Office & Zip Code Deven Bay 54301 3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, brewerles and brewpubs? 🛛 Yes 🗀 No 4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 516 Greene Ave and outdoor seating 5. Legal description (omit if street address is given above): 6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side IX No b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes X No 7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. No 🏠 8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. ☐ No 9. Does the applicant understand they must hold a Wisconsin Seller's Permit? □ No 10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the □ No READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) MICH SUBSCRIBED AND SWORN TO BEF (Officer of Corporation/Member/Manager of Limited Liability Company /Partner) My commission expires Used reported to council/board (Additional Partner(s)/Member/Manager of Limited Liability Company if Any) TO BE COMPLETED BY CLERK Date received and filed with municipal Date Ilcense granted License number Issued Date license issued Signature of Clerk / Deputy Clerk

Wisconsin Department of Revenue

AT-115 (R. 7-15)

R#20207 > \$60.00

RENEWAL ALCOHOL BEVERA	GE LICENSE APPLICATION	Applicant's Wt Seller's Permit No.: FEIN	Number:	
Submit to municipal clerk. Read instruction	s on reverse side.	i	16-172	87/1
per ut to		LICENSE REQUESTED	<u> </u>	
(MM DD	<u>√-20/7</u> ending: <u>06~30~20/8</u> <u>YYYY)</u> (MM DD YYYY)	TYPE	FE	E.00
☐ Town	•	Class A beer	\$ 250	,.00
TO THE GOVERNING BODY of the: X Villag	e of \ Allouez	Class B beer	\$	
☐ City o	of Carrier Car	Class C wine	\$	
•		Class A liquor	\$ 250	.00
County of Brown Alderma	nic Dist. No (if required by ordinance)	☐ Class A liquor (cider only)	\$ N/	Α
CHECK ONE ☐ Individual ☐ Partne	and in Table 111 1111 6	☐ Class B liquor	\$	
	· —	Reserve Class B liquor	\$	
☑ Corporation Nonprofit C	rganization	Class B (wine only) winery	\$	
Complete A or B. All must complete C.		Publication fee	\$ (00).0	٥
A. Individual or Partnership:		TOTAL FEE	\$ 5000	00.0
Full Name(s) (Last, First and Middle	Name) Home Address	Post Office & Z	ip Code	
Address of Corporation/Limited Liability Con All Officer(s) Director(s) and Agent of Corporative Name President/Member Edward Norma Vice President/Member	ntion/Limited Liability Company Allowez npany (if different from licensed premises) ration and Members/Managers and Agent of Limite (Inc. Middle Name) Home Ac An Gerczak Jr Pres. 508 Lorr rczak Sceretary 508 Lorran	ed Liability Company: Idress Post (Taine Lane Green (/	5431
C.1. Trade Name Allower Beer & L	iguor Inc. Business	Phone Number (920) 437	2-8501	<i></i>
2. Address of Premises > 1255 S. Mo	hose Ave - Ste 101 Post Office	re & Zin Code	WII.	54 301
3. Does the applicant understand that they must n	urchase alcohol beverages only from Wisconsin whole	poolers browning and browning	7. N. V.	
Premises description: Describe building or b	uildings where alcohol beverages are to be sold a	esalers, breweries and brewpubs?	M res	∐ No
Include all rooms including living quarters, if	used for the sales conside consumption and in-	المراجع والمراجع	d rooorda	
(Alcohol beverages may be sold and stored of	nly on the premises described.) 60x 30 Wood	Game building being	u recorus.	۔ سہ برنیس
5. Legal description (omit if street address is giv	en above):	The Dividity Drie	CL.	101
director, manager or agent for either a lim licensee been convicted of any offense:	named licensee, any member of a partnership lice lited liability company licensee, corporation license s (excluding traffic offenses not related to alcohol)	ee, or nonprofit organization	sirifo.	-1007
b. Are charges for any offenses presently p	r states, or ordinances of any county or municipality' ending (excluding traffic offenses not related to alc	? If yes, complete reverse side		🔀 No
licensee or any other persons affiliated wit	h this license? If yes, explain fully on reverse sld been any changes in the answers to the questions	e	☐ Yes	⊠ No
8. Was the profit or loss from the sale of alcohol	ain. I beverages for the previous year reported on the		☐ Yes	⊠ No
Franchise Tax return of the licensee? If not, of	explain		X Yes	☐ No
9. Does the applicant understand they must hole [phone (608) 266-2776]			X Yes	□ No
date of invoice and made available for insper	everage invoices must be kept at the licensed prection by law enforcement?		∑ Yes	☐ No
11. Is the applicant indebted to any wholesaler b	eyond 15 days for beer or 30 days for liquor?		☐ Yes	🔀 No
READ CAREFULLY BEFORE SIGNING: Under pena pest of the knowledge of the signers. Signers agreed f granted, will not be assigned to another. (Individual of Limited Liability Companies must sign.)	ly provided by law, the applicant states that each of the operate the business according to law and that the applicants and each member of a partnership applicants.	e above questions has been truthfi rights and responsibilities conferre nt must sign; corporate officer(s), r	ully answer ed by the lic members/m	ed to the ense(s), anagers
SUBSCRIBED AND SWORN TO BEFORE	MATARY ! E	0 ~		
his 22 day of March	20 1 2	resold JR		
My commission expires	17 ³ /58	emberi/Manager of Limited Liability Compa		dividual)
My commission expires	Call do Mill	ember/Manager of Limited Liability Compa		
TO BE COMPLETED BY ALTER	(Additional Partner(s)/Me	mber/Manager of Limited Liability Compan	y if Any)	
TO BE COMPLETED BY CLERK Date received and filed with invalidation flerk	Data			
	Date reported to council/board	Date Ilcense granted		
License number issued	Date license Issued	Signature of Clerk / Deputy Clerk		
		, ,,		1

		R# 20400, \ 560.00	J
RENEWAL ALCOHOL BEVERAGE Submit to municipal clerk. Read instructions		Applicant's Wi Seller's Permit No. FEIN Number: はちゃんにもなる。 37ー(ス) 5	39 p
For the license period beginning:		TYPE FEI	_
☐ Town of TO THE GOVERNING BODY of the: ☑ Village ☐ City of	of } Allouez	☐ Class B beer \$ ☐ Class C wine \$ ☑ Class A liquor \$ Z\$Z	
· D	nic Dist. No (If required by ordinance)	☐ Class A liquor (clder only) \$ N/A	
CHECK ONE ☐ Individual ☐ Partne. ☐ Corporation/Nonprofit Or	. —	☐ Class B liquor \$ ☐ Reserve Class B liquor \$ ☐ Class B (wine only) winery \$	
Complete A or B. All must complete C.		Publication fee \$ (0 C) TOTAL FEE \$ \$ CLO	<u> </u>
A. Individual or Partnership: Full Name(s) (Last, First and Middle N	Name) Home Address	Post Office & Zip Code	
B. Full Name of Corporation/Nonprofit Organization		ns Stores Inc	
Title Name (President/Member Foldert Vice President/Member Secretary/Member Secretary/Member	ation and Members/Managers and Agent of Lim (Inc. Middle Name) Home A J. AUSTIN 506 (Jenword Austin N3578 Riverible	Address Post Office & Zi en haven C. Green Ba. Defere WI 54N w Haths Chilten WI	, wi 54301 15 53014
	tin 806 Genwood O	Defe col 54115	<u>53</u> 014
Directors/Managers C.1. Trade Name Course 2. Address of Premises 3823 5		ss Phone Number (196) - 33 1-0.	
 Premises description: Describe building or building all rooms including living quarters, if the (Alcohol beverages may be sold and stored or 	urchase alcohol beverages only from Wisconsin who uildings where alcohol beverages are to be sold used, for the sales, service, consumption, and/o nly on the premises described.) <u>(</u> , , ひひ	and stored. The applicant must	
director, manager or agent for either a lim licensee been convicted of any offenses	en above): named licensee, any member of a partnership livited liability company licensee, corporation license (excluding traffic offenses not related to alcohor states, or ordinances of any county or municipality.	see, or nonprofit organization ol) for violation of any federal	\`
	ending (excluding traffic offenses not related to a h this license? If yes, explain fully on reverse s		☑ No
last application for this license? If yes, expla			₩ No
Franchise Tax return of the licensee? If not, e		e Wisconsin Income or Y	□ No
			□ No
Does the applicant understand that alcohol be date of invoice and made available for inspect of the applicant indebted to any wholesaler be applicant indebted.	ction by law enforcement?	🗓 Yes	□ No 図.No
READ CAREFULLY BEFORE SIGNING: Under pena best of the knowledge of the signers. Signers agree to if granted, will not be assigned to another. (Individual of Limited Liability Companies must sign.) SUBSCRIBED AND SWORN TO BEFORE If this 24 day of March	alty provided by law, the applicant states that each of cooperate this business according to law and that the applicants and each members a partnership applicants.	the above questions has been truthfully answer to rights and responsibilities conferred by the licant must sign; corporate officer(s), members/n	red to the cense(s), nanagers
(Clerk/Notary Public)	RYAN (Office of Congration CASP Former of Congration	n/Member/Manager of Limited Liability Company /Partner/Ir n/Member/Manager of Limited Liability Company /Partner)	naividual)
My commission expires 09/08/2017	(Activated and Control of Control	imember/manager of Limited Liability Company if Any)	<u></u>
TO BE COMPLETED BY CLERK Date received and flied/with municipal clerk	Date reported to council/documents	Date license granted	
フール コート	Date license issued	Signature of Clerk / Deputy Clerk	
AT-115 (R. 7-15)	h	Wisconsin Department	of Revenue

R#18146 > \$60.00

RENEWAL ALCOHOL BEVERA	GE LICENSE APPLICATION	Applicant's W. Seller's Permit No.: FEIN 1	Number	CO 0 0
Submit to municipal clerk. Read instructions	s on reverse side.			12 87 10
For the license period beginning: 🐧 👢 📗	2017 ending: June 30 2018	LICENSE REQUESTED		
(MM DD		TYPE Class A beer	s 25	-00
Town			\$ 230	
TO THE GOVERNING BODY of the: 🕍 Villago	0 01 /	···	\$	
City o	f J	Class A liquor	\$ 750	.00
County of <i>Brのいん</i> Alderma	nic Dist. No (if required by ordinance)		\$ N/A	4
			\$	
CHECK ONE 🔲 Individual 🔲 Partne	,	Reserve Class B liquor	\$	
🔀, Corporation/Nonprofit O	rganization	Class B (wine only) winery	\$,	
Complete A or B. All must complete C.		Publication fee	\$ 60.00	5
A. Individual or Partnership:		TOTAL FEE	\$ 500	.00
Full Name(s) (Last, First and Middle	Name) Home Address	Post Office & Z	in Code	
>	Tome Address	i ost Onice a zi	h oode	
B. Full Name of Corporation/Nonprofit Organiza	tion/Limited Liability Company > Foodm.	EN 2. INC.	•	
	npany (if different from licensed premises)			
	ation and Members/Managers and Agent of Limite	ed Liability Company:		
Title Name	(inc. Middle Name) Home Ad		Office & ZI	p Code
President/Member Michael F		N. Abrams	5410	>/
Vice President/Member				
Secretary/Member				
Treasurer/Member	0.1/			
Agent YICHUCI I. NOV	UR			
Directors/Managers	10		~ ~	
C.1. Trade Name Luebster Av	renve Market Business Webster Post Office	Phone Number 920 - 4	32-7	<u> 284</u>
2. Address of Premises \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Nebs Ter Post Office	ee & Zip Code Green Br	2×; 5	4301
3. Does the applicant understand that they must pr	urchase alcohol beverages only from Wisconsin whole	esalers, breweries and brewpubs?	🔀 Yes	☐ No
4. Premises description: Describe building or building or building of building of building all recommendations in the building of the building	ulldings where alcohol beverages are to be sold a	nd stored. The applicant must		
(Alcohol beverages may be sold and stored o	used, for the sales, service, consumption, and/or solve on the premises described.)	storage of alcohol beverages and	I records.	200
5. Legal description (omit if street address is give	eu apove).	BELL COLLIE	<u>، ر ر </u>	<u> </u>
=	named licensee, any member of a partnership lice	nsee or any member officer		
director, manager or agent for either a lim	ited liability company licensee, corporation license	e, or nonprofit organization		
licensee been convicted of any offenses	(excluding traffic offenses not related to alcohol)	for violation of any federal	_	
	r states, or ordinances of any county or municipality		∐ Yes	Ø No
D. Are charges for any offenses presently p	ending (excluding traffic offenses not related to alc h this license? If yes, explain fully on reverse sid	ohol) against the named	□ v	Γ <mark>α</mark> Λυ.
	peen any changes in the answers to the questions		☐ Yes	⊠ ″No
last application for this license? If yes, expla		as submitted by you on your	☐ Yes	⊠ No
• •	I beverages for the previous year reported on the	Misconsin Income or	□ 163	Z
Franchise Tax return of the licensee? If not, e	explain.	VVISCOTISTIT THEOTHE OF	🔀 Yes	□ No
9. Does the applicant understand they must hol	d a Wisconsin Seller's Permit?			
[phone (608) 266-2776]			X Yes	☐ No
10. Does the applicant understand that alcohol b	everage invoices must be kept at the licensed pre	mises for 2 years from the	_	
	ction by law enforcement?			☐ No
11. Is the applicant indebted to any wholesaler b	eyond 15 days for beer or 30 days for liquor?		☐ Yes	⊠ No
EAD CAREFULLY BEFORE SIGNING: Under nene	Ity provided by law, the applicant states that each of th	a above guartians has been to the	.11	
est of the knowledge of the signers. Signers agree to	operate this business according to law and that the	rights and responsibilities conferre	d by the lic	enee/e\
granted, will not be assigned to another. (Individual:	applicants and each member of a partnership applicat	nt must sign; corporate officer(s), n	nembers/m	anagers
f Limited Liability Companies must sign.) GUBSCRIBED AND SWORN TO BEFORE Only day of Companies must sign.)			,	
SUBSCRIBED AND SWORN TO BEFORE	The state of the s	and E Vand	,	
nis day of March		- 1 works		
MEX) IIIM MODES	NOTAP (Officer of Corporation/M	ember/Manager of Limited Liability Compar	ny /Partner/Inc	dividual)
(Clerk/Notery Public)		ember/Manager of Limited Liability Compar	ov /Padner)	
ly commission expires 12.45:2	\$ 6 849€ : €		•	
	(Additional Partner(s)/Me	mber/Manager of Limited Liability Company	/ If Any)	
O BE COMPLETED BY CLERK	WICHONSIA	•		
Date received and filed with municipal clerk	Date reported to council/board	Date license granted		
icense number issued	Date license issued	Slangture of Clark / Danish Clark	- 	
		Signature of Clerk / Deputy Clerk		

R# 17968 > \$60.00

R!	ENEWAL ALCOHOL BEVERAGE	LICENSE APPLIC	ATION	Applicant's WI Seller's Permit No.: FEIN	Nurther	
	bmit to municipal clerk. Read instructions on			456-0000227902-0	3 80-	0052463
	the license period beginning: 7-1-17	ending: X-X-	18	LICENSE REQUESTED	'	
	(MM DD YYYY) (MM D	D YYYY)	TYPE Class A beer	S 2 CT) O O
то	THE GOVERNING BODY of the: Village of) K.11.		Class B beer	\$	
10		}_MILDUCZ		☐ Class C wine	\$	
_	☐ City of	,		Class A liquor	\$ 250	5 .00
Col	unty of Browth Aldermanic D	Dist. No (If required I	y ordinance)	Class A liquor (cider only)		I/A
СН	ECK ONE 🔲 Individual 🔲 Partnershi	n	.	☐ Class B liquor	\$	
• • •	Corporation/Nonprofit Organ		company /	Reserve Class B liquor	\$	
_		lization			\$	
Co	mplete A or B. All must complete C.			Publication fee	\$ 60	2-
A.	Individual or Partnership:			TOTAL FEE	\$ 50	00.00
	Full Name(s) (Last, First and Middle Name	e) Home Addre Edulard 2944 Sh	Field Ct.	Post Office & Z	ip Code <u>3</u>	
В.	Full Name of Corporation/Nonprofit Organization/L	imited Liability Company	PitK	Out The		
	Address of Corporation/Limited Liability Company	(if different from licensed pr	emises) 🕨 🎜	2500 Undamesty	so las	Less R
	" Sincor(o) Bircotor(s) and Agent of Corporation	i and Members/Managers an	d Agent of Limit	ed Liability Company:	16.69	econ in
	litie A Name (Inc.)	Middle Name)	/ Home A	ddress/ Post (Office & Z	ip Code
	President/Member Thomas Eduse	rua UNUTUBZAK	2944	Though It. Green	Bay_	54311
	Vice President/Member Secretary/Member			<u> </u>		
	Treasurer/Member		 -	· · · · · · · · · · · · · · · · · · ·		
	Agent Thomas E. Maturia	4				
	Directors/Managers Cathylac Lace					
C.1.	Trade Name DIT Row on Web	Aten	Puoleone	Phone Number	11 1221	2/-
2.	Address of Premises > 1501 5. Webst	en Alex Green Bra	Business	ce & Zin Code N	7-77	70
3.	Does the applicant understand that they must purchase	se alcohol beverages only from	Misconsin what	appless browned a and become to	ستهملت	
4.	Premises description: Describe building or building	as where alcohol heverages	are to be sold a	esalers, brewelles and brewpups?	Le Yes	☐ No
	Include all 100HS Including living allarters it lised	tor the calce convice concu	motion and/or	-t	d records	
	A recount peverages may be sold and stoled only of	ine premises described.)	C-Stoke	LOCIEDS WEDING	u records. S '	•
5.	Legal description (omit if street address is given ab	ove): Gas station v	L C-Stol	re.		
6.	a. Since filing of the last application, has the name	ed licensee, any member of a	partnership lice	ensee, or any member, officer,		
	unector, manager or agent for either a limited li	ability company licensee, cou	noration licens	OO OF nonprofit organization		
	licensee been convicted of any offenses (exclaws, any Wisconsin laws, any laws of other state	sidding traffic offenses not releast es, or ordinances of any count	ated to alcohol)	for violation of any federal	□ v _* -	
	b. Are charges for any offenses presently pendir licensee or any other persons affiliated with this	ια (excluding traffic offenses r	not related to alc	cohall against the named		₩ No
7.	Except for questions 6a and 6b, have there been a	anv changes in the answers t	on the guestions	as submitted by you on your	L res	LE INO
	last application for this license? If yes, explain Was the profit or loss from the sale of alcohol beve		•		☐ Yes	No
	rranchise tax return of the licensee? If not, explain	n	eported on the	vvisconsin income or	Yes	□ No
٥.	Does the applicant understand they must hold a W [phone (608) 266-2776]	visconsin Seller's Permit?			130 V = =	
10.	Does the applicant understand that alcohol bevera	ge involces must be kent at t	he licensed are	micas for 2 years from the	Yes Yes	☐ No
11	date of invoice and made available for inspection b	by law enforcement?			Yes	□ No
11.	Is the applicant Indebted to any wholesaler beyond	1 15 days for beer or 30 days	for liquor?	• • • • • • • • • • • • • • • • • • • •	Yes	₩ No
REAL best of if grain of Lim	O CAREFULLY BEFORE SIGNING: Under penalty pro of the knowledge of the signers. Signers agree to oper nted, will not be assigned to another. (Individual application inted Liability Companies must sign.)	vided by law, the applicant state ate this business according to anta and each member of a par 시 C 보	es that each of th law and that the tnership applica	ne above questions has been truthfur rights and responsibilities conferred nt must sign; corporate officer(s), m	rlly answer d by the lic nembers/m	ed to the cense(s), nanagers
SUB	SCRIBED AND SWORN TO BEFORE ME.	ひんとい	11/	101		
this	ayof Marchia	1/2 20 1 Fe	PO VIA			
٧		TO T	er of Corporation/M	ember/Nanager of Amited Liability Compan	v /Parlnor/la	dhiduett
	· revelle marting	FE _			•	ulvioual)
Му с	ommission expires	201.7 8		ember/Manager of Limited Liability Compan	•	
TO F	E COMPLETED BY OLD BY	(Add	tional Partner(s)/Me	mber/Manager of Limited Liability Company	if Any)	
Date re	SE COMPLETED BY CLERK Coclived and filegywith mynicipal clerk Date to	VSIN WIND COUNCIL/board				
		Hankstr to council/board		Date license granted		
Licens	e number issued Date lic	ense Issued		Signature of Clerk / Deputy Clerk		
AT-116	(R. 7-15)	······································				
,, -110				Wisconsin D	epartment of	f Revenue

		R#21227 \	410	(11)
RENEWAL ALCOHOL BEVERA	AGE LICENSE APPLICATION	3/30/17 at	Animper:	, .UU
Submit to municipal clerk. Read instruction			319741	332
For the license period beginning:	(MM DD YYYY)	LICENSE REQUESTED TYPE Class A beer	\$ 25 ^{FE}	
TO THE GOVERNING BODY of the:	ge of \ ALLOUEZ	☐ Class B beer☐ Class C wine	\$ \$	
	anic Dist. No (if required by ordinance)		\$ 257 \$ N/A	2
CHECK ONE Individual Partn Check ONE Corporation/Nonprofit Corpor			\$ \$ \$	
Complete A or B. All must complete C.			\$ 60	
A. Individual or Partnership:			\$ 500	\overline{O}
Full Name(s) (Last, First and Middle	Name) Home Address	Post Office & Zi	p Code	
Address of Corporation/Limited Liability Cor All Officer(s) Director(s) and Agent of Corpo		ted Liability Company:	office & ZI	
Treasurer/Member				
Agent ALLEN L MORI	7			
Directors/Managers		· · · · · · · · · · · · · · · · · · ·		
C.1. Trade Name ALLOUGE QUIV 2. Address of Premises 22.03 5. UE	.	s Phone Number (920) 43° ce & Zip Code \ 54301	7- Bo	70
	ourchase alcohol beverages only from Wisconsin who			□ No
 Premises description: Describe building or be include all rooms including living quarters, if (Alcohol beverages may be sold and stored of 	uilldings where alcohol beverages are to be sold a used, for the sales, service, consumption, and/or only on the premises described.)	and stored. The applicant must storage of alcohol beverages and	records.	975
Legal description (omit if street address is given	ven above):	<u>`</u>	ACKROG	
director, manager or agent for either a lin licensee been convicted of any offense	named licensee, any member of a partnership lic nited liability company licensee, corporation licens s (excluding traffic offenses not related to alcohol er states, or ordinances of any county or municipality	ee, or nonprofit organization) for violation of any federal	☐ Yes	X No
b. Are charges for any offenses presently p	pending (excluding traffic offenses not related to al th this license? If yes, explain fully on reverse si	cohol) against the named	☐ Yes	₩ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain.				
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or				
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776]				
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement?				∐ No
	peyond 15 days for beer or 30 days for liquor?			S No
READ CAREFULLY BEFORE SIGNING: Under pena pest of the knowledge of the signers. Signers agree of granted, will not be assigned to another. (Individual of Limited Liability Companies must sign.)	alty provided by law, the applicant states that each of to apparate this business according to law and that the applicant sand each member of a partnership applicant sand each member of a partnership applicant.	ne above questions has been truthfu r rights and responsibilities conferred ant must sign; corporate officer(s), m	lly answere by the llc embers/m	ed to the ense(s), anagers
	OTARL 20 E	_ 3,	-	
malle malte		Member/Manager of Limited Liability Compan	•	lividual)
My commission expires (Clerk/Noten/Putricity	901022	Member/Manager of Limited Liability Compan		
TO BE COMPLETED BY CLERK Date received and filed with municipal clerk	WISCOMMIN (Additional Partner(s)/M	ember/Manager of Limited Liability Company	If Any)	
Date received and fled with rhunicipal clerk	Date reported to council/board	Date license granted		
License number issued	Date license issued	Signature of Clerk / Deputy Clerk	-	
		1		1

		K#21488 413117 \$	5/6/6()	UU			
RENEWAL ALCOHOL BEVERAG	Applicant's WI Seller's Permit No. FEIN Number:						
Submit to municipal clerk. Read instructions of	430-0000207014-00						
		LICENSE REQUESTED TYPE FEE					
For the license period beginning: 07/01/2017 ending: 06/30/2018 (MM DD YYYY) (MM DD YYYY)			250.0	(2)			
☐ Town o	4 Allana - Villaga - af	Class B beer \$					
TO THE GOVERNING BODY of the: Uillage	of Allouez Village of	Class C wine \$		200			
☐ City of)	Class A liquor \$		4)			
County of Brown Aldermanic Dist. No. (ifrequired by ordinance)							
Class R lidnor							
CHECK ONE Individual Partnership Limited Liability Company Reserve Class B liquor Class B (wine only) winer							
Corporation/Nonprofit Organization				47			
Complete A or B. All must complete C.		Publication fee \$					
A. Individual or Partnership:	1	TOTAL FEE \$	<u> </u>	il			
Full Name(s) (Last, First and Middle Na		Post Office & Zip	Code				
B. Full Name of Corporation/Nonprofit Organization	on/Limited Liability Company Kwik Trip, Ir		00.0407				
Address of Corporation/Limited Liability Comp	any (if different from licensed premises)	O Box 2107 La Crosse, WI 506	02-2107				
All Officer(s) Director(s) and Agent of Corporal	ion and Members/Managers and Agent of Limite	d Liability Company: ddress	ffice & Zip	Code			
•			ska, <u>WI 5</u>				
President/Member President, Donald P	aul Zietlow 2802 Bergam	IOLPI. Olialas	ska, vvi c	14000			
Vice President/Member	4004 715 04 6	Danhari	- NAN 5	E002			
Secretary/Member Asst. Secretary, Mar	k Scott Zietlow 1301 7th St. S						
Treasurer/Member Treasurer, Jeffrey Jar	nes Wrobel 3633 Bentwood	d Pl. La Cros	sse, WI 5	54 <u>601</u>			
Agent Victoria Lynn Holmes, 1718 Beac	h Tree Dr, Green Bay, WI 54304						
Directors/Managers Donald P. Zietlow a							
C. 1. TradeName ► KWIK TRIP EXPRESS		Phone Number 920/436-0490					
2. Address of Premises ▶ 1401 S Webster A	~,·~	ice & Zip Code ▶ Green Bay 543	301				
2. Regardle applicant understand that they must but		•		☐ No			
 Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) One-story frame construction with storage in walk-in cooler, on sales floor, behind sales counter. Liquor in locked cabinetry. 							
5. Legal description (omit if street address is give							
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete							
licensee or any other persons affiliated wit	ending (excluding traffic offenses not related to a n this license? if yes, explain fully on reverse s	ide	☐ Yes	□ No			
Except for questions 6a and 6b, have there be last application for this license? If yes, expla	in		☐ Yes	No			
Was the profit or loss from the sale of alcoho Franchise Tax return of the licensee? If not, e.	xplain	e Wisconsin Income or	X Yes	☐ No			
			X Yes	☐ No			
date of invoice and made available for inspec	10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement?			□ No			
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?				x No			
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and seach member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) SUBSCRIBED AND SWORN TO BEFORE ME							
Limited Liability Companies must sign.) SUBSCRIBED AND SWORN TO BEFORE this day of land	『『子・タイプ・ファンスペー・ノ()	118/2					
A James Children Children HAFNED							
(Clerk/Notary Public) (Clerk/Notary Public) (Officer of Company Manager of Limited Lability Company /Partner)							
	(Additional Partner(s))	Member/Manager of Limited Liability Company	f Any)				
TO BE COMPLETED BY CLERK Date received and filed with municipal, clerk Date reported to council/board Date license granted							
41311							
License number issued	Date license issued	Signature of Clerk / Deputy Clerk					

R#21289 313117 > \$60.00

Submit to municipal clerk. Read instructions on reverse side.				Applicant's W Seller's Permit No.: FEIN Number: 456000053547403 39-0704880			
	r the license period beginning: 07 01		C 00 0010	LICENSE REQUESTED			
	(MM	DD YYYY) ending0	6 30 2018 (MM DD YYYY)	TYPE	F	EE CO	
_	☐ Tov	wn of 🦴	•	☑ Class A beer ☐ Class B beer		0.00	
10	THE GOVERNING BODY of the: 🗹 Vill	• /		☐ Class B beer	\$		
_	□ City	y of 🔰		☐ Class A liquor	\$		
C	ounty of BROWN Alderr	manic Dist. No (if	required by ordinance)	☑ Class A liquor (cider only)	T		
C			•	Class B liquor	\$		
0.	✓ Corporation/Nonprofit	tnership Limited	Liability Company	☐ Reserve Class B liquor	\$		
_		=		Class B (wine only) winery	\$		
C	omplete A or B. All must complete C	•		Publication fee	\$	60	
A.	Individual or Partnership: Full Name(s) (Last, First and Middle	le Name) Ho	me Address	TOTAL FEE Post Office & 2	\$ <u>3 (C</u> Zip Code	, 20gg	
		·		- ,	 -		
В.	Full Name of Corporation/Nonprofit Organ	ization/Limited Liability Cor	npany • CONDON C	TI. COMDANY			
	Address of Corporation/Limited Liability C	company (if different from III	censed premises) N 1 2	OF TACKSON DIDON	WT 54	971	
	Un Chirce (a) Director(a) and Agent of Coli	poration and Members/Mar	nagers and Agent of Limi	ted Liability Company:	MT DE	9/1	
	nule Nam	18 (Inc. Middle Name)	Home A	ddress Post	Office & Z	ip Code	
	President/Member KRZ	AIG BAUMAN	434 STONEHED	GE CT RIPON W	I 5497	/1	
	Vice President/MemberKA	DIA V DIOCK	NTT 0.2.0. TO 0.1.1.				
•	Treasurer/Member DA	RLENE V TARRED	N7930 DOTY D				
	Agent KR	AIG BAUMAN	434 STONEHED		W1 53	3919	
	Directors/Managers			SE CI KIFON W	1 349/		
	. Trade Name MIDWAY MOB		Business	s Phone Number 920-336-	1161		
	. Address of Premises ▶ 3907 S WEB	STER ST	Post Off	ce & Zin Code A CREEN DA	V WT C	4304	
3	Does the applicant understand that they must	t purchase alcohol beverages	only from Wisconsin who	lecalore browning and brown it - o	Ves	□ No	
	include all rooms including living quarters, (Alcohol beverages may be sold and stored	f buildings where alcohol be if used, for the sales, servi if only on the premises desc	everages are to be sold a	and stored. The applicant must			
	. Legal description (omit it street address is g	given above):		- 177	ST FO		
€	Since filing of the last application, has the director, manager or agent for either a licensee been convicted of any offens laws, any Wisconsin laws, any laws of other states.	innited liability company lice	ensee, corporation licens	ensee, or any member, officer, see, or nonprofit organization		<u> </u>	
	b. Are charges for any offenses presently	ner states, or ordinances of a	any county or municipality	? If yes, complete reverse side		☑ No	
7	licensee or any other persons affiliated v Except for questions 6a and 6b, have there last application for this license? If yes, ex	Milli this license? I t yes, ext Theen any changes in the	ilain fuliv on rovoreo el	40	☐ Yes	☑ No	
	Was the profit or loss from the sale of alcoh	hall heverages for the provi			☐ Yes	✓ No	
	Does the applicant understand they must h	i, explain.			√ Yes	☐ No	
10	[phone (608) 266-2776]					☐ No	
	made available for illap	ection by law efficicement	(✓ Yes	☐ No	
- ''	to the applicant indepted to any wholesaler	beyond 15 days for beer o	r 30 days for ilquor?		☐ Yes	☑ No	
REA best if gra of Li	D CAREFULLY BEFORE SIGNING: Under per of the knowledge of the signers. Signers agree nted, will not be assigned to another. (Individua nited Liability Companies must sign.)	nalty provided by law, the app to operate this business acc al applicants and each memb	licant states that each of the cording to law and that the er of a partnership application	ne above questions has been truthforights and responsibilities conferrent must sign; corporate officer(s), r	ully answer od by the lic nembers/m	ed to the cense(s), anagers	
SU	SCRIBED AND SWORN TO BEFORE	ME					
this	2740	, 20 <u>17</u>	du B				
<u> </u>	Ommission expires (2 - 27 - 19)			ember/Manager of Limited Liability Compai Light Compai ember/Manager of Limited Liability Compai		dividual)	
My c	ommission expires 12-27-19				•		
TO	BE COMPLETED BY CLERK		(лачиона Раппел(s)/Ме	mber/Manager of Limited Liability Compan	(if Any)		
Date	eceived and filed with municipal clerk	Date reported to council/board		Date license granted			
Licen	e number Issued						
L	· ·	Date license issued		Signature of Clerk / Deputy Clerk			
AT-115	(R. 7-15)					1	