(((CUTING EVENT) Application for Temporary Class "B" / "Class B" Retailer's Lisense

See Additional Information on reverse side. Contact the munici	pal clerk if you have questions.
FEE \$ 20,00 R#155518 1/10/2020	Application Date: 1/9/2020
Town X Village City of Allouez	County of Brown
The named organization applies for: (check appropriate box(es).) X A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats. X A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats. at the premises described below during a special event beginning 3/5/20@ 4 PM and ending 3/5/20@ 10 PM and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.	
1. Organization (check appropriate box) → Xi Bona fide C	[ub ☐ Church ☐ Lodge/Society
Chamber of	Commerce or similar Civic or Trade Organization
☐ Veteran's O	rganization [] Fair Association
(a) Name St. Matthew's Men's Club	TO TO THE CONTROL OF
(b) Address 130 St. Matthews Street, Green Bay, W	The state of the s
	☐ Town ☐ Village ☒ City
(c) Date organized 1965 (d) If corporation, give date of incorporation	
	onsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this
box: [X]	main some a perink purquant to a. 11.04 (11th), vvia. otalo., oneok mis
(f) Names and addresses of all officers: President Doug Hutchison, 1419 S. Irwin, Green	Bay, WI 54301
Vice President Robert Olson, 1716 11th Avenue, Green Bay, WI 54304	
Secretary Pete Kirschling, 2036 Spring Creek Circle, Green Bay, WI 54311	
Treasurer Pete Kirschling, 2036 Spring Creek Cir	cle, Green Bay, WI 54311
(g) Name and address of manager or person in charge of af	a 1 Commence of the Commence o
Sean Ryan, 1971 Prescott Place, De Pere, Wi	54115
 Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored: (a) Street number 130 St. Matthews Street, Green Bay, WI 54301 	
(b) Lot	Block
(c) Do premises occupy all or part of building? Part (gymi	nasium and basement)
(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover:	
3. Name of Event (a) List name of the event St. Matthew's Men's Club Wild Game Feed (b) Dates of event March 5, 2020	
DECLARATION	
The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.	
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1, 11	(Name of Organization)
Officer / 1/7/2020 President (Signoture/date)	Officer / Live (5/gnoturo/date)
Officer (Signature/dute) 1/7/2020	Officer(Signature/date)
Date Filed with Clerk	Date Reported to Council or Board
Date Granted by Council	Lîcense No.