



"meeting community needs
.....enhancing quality of life"

FEES ARE NON-REFUNDABLE

License Fee - \$10.00 per event
Investigation Fee 7.00
Total Amount Paid 17.⁰⁰

Date Rec'd 1/6/20
Acct. 11030.4322
Acct. 100.2359
Receipt 264-0001

Application for Special Class "B" License to Sell Fermented Malt Beverages at Picnics or Gatherings

The named organization applies for:								
<input checked="" type="checkbox"/> A temporary Class "B" license to sell FERMENTED MALT BEVERAGES at picnics or similar gathering under s. 125.26(6) Wis. Stats.								
<input checked="" type="checkbox"/> A temporary Class "B" license to sell WINE at picnics or similar gathering under s. 125.51(10) Wis. Stats. (Limit 2 permits in a 12 month period)								
SECTION 1 – ORGANIZATION INFORMATION – Answer all questions completely. Please PRINT clearly								
Name of Organization (Bona fide club, lodge or society, veteran's organization or fair association) Global Outreach Catholic Exchange Program, Inc.						Date Organized 01/01/1990		
Address 4815 Whitetail Way				City Appleton		State WI	Zip 54914	
Person in Charge of Event:			Name: Last Flees		First Dorothy	Middle Initial A.	Date of Birth ●●●●●●	
Address 9522 County Road T			City Marshfield	State WI	Zip 54449	Person in charge phone number: ●●●●-●●●●		
President		Last Mullins	First Pamela	Middle Initial L.		Date of Birth ●●●●●●	Male <input type="checkbox"/>	Female <input checked="" type="checkbox"/>
Address N2873 Driftwood Beach Road				City Chilton		State WI	Zip 53014	
Vice President		Last Kropidowski	First Thomas	Middle Initial J.		Date of Birth ●●●●●●	Male <input checked="" type="checkbox"/>	Female <input type="checkbox"/>
Address 508 W. North Water Street				City Neenah		State WI	Zip 54956	
Secretary		Last Maederer	First Barbara	Middle Initial M.		Date of Birth ●●●●●●	Male <input type="checkbox"/>	Female <input checked="" type="checkbox"/>
Address 6919 County Road E				City Abrams		State WI	Zip 54101	
Treasurer		Last Elmer	First Gary	Middle Initial E.		Date of Birth ●●●●●●	Male <input checked="" type="checkbox"/>	Female <input type="checkbox"/>
Address 799 Harvard Drive				City Neenah		State WI	Zip 54956	
SECTION 2 – EVENT INFORMATION SECTION								
Date(s) of Event: Beginning 02 / 08 / 2020 Ending: 02 / 08 / 2020 Hours 4:00PM AM PM 8:00PM AM PM								
Please describe the type of event you are going to have: Scholarship Fund Raiser w/ Buffet, Cash Bar, Exchange Student Entertainment, Silent Auction for future Global Outreach Exchange Students								
Do you plan to serve food at this event?			No	<input checked="" type="checkbox"/> Yes	If yes, contact the Appleton Health Department. (920.832.6429)			
Location where beer or wine will be sold: St. Bernard Catholic Church								
Address 1617 W. Pine Street				City Appleton		State WI	Zip 54914	
Are you requesting an "open concept" license?			No	<input checked="" type="checkbox"/> Yes	Will minors be present?			
					No			<input checked="" type="checkbox"/> Yes
Describe actual location and dimensions of area to be licensed – Be precise! Restricted to the Church's Parish Hall				If yes, how will you prevent minors from obtaining alcoholic beverages? Checking IDs				
SECTION 3 – PENALTY SECTION								
This application must be on file in the Office of the City Clerk for at least ten (10) business days prior to granting the license. If the event will last more than four (4) days, the application shall be filed 15 days prior to the granting of the license. This organization also agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages if the license is granted. 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.								
Signature of Officer		Pamela L. Mullins						
<small>Digitally signed by Pamela L. Mullins DN: cn=Pamela L. Mullins, o=Global Outreach Catholic Exchange Program, ou=global-outreach@goep.com, c=US Date: 2020.01.03 17:25:29 -0500</small>								
FOR OFFICE USE ONLY								
Dept.	Approve	Deny	By	Reason				
Police								
Fire								
Health								
Inspection								
S&L		Council		Date Issued		Exp. Date	License Number	

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Spoke with Steve 12/31/2020 LF