

### Application for Temporary Class "B" / "Class B" Retailer's License

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$ 10 per event + \$7 (applicant background investigation fee)

Application Date: 04/15/2024

Town  Village  City of Appleton

County of Outagamie

The named organization applies for: (check appropriate box(es).)

- A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.
- 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 05/03/2024 and ending 05/03/2024 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) →
- Bona fide Club
  - Church
  - Lodge/Society
  - Veteran's Organization
  - Fair Association or Agricultural Society
  - Chamber of Commerce or similar Civic or Trade Organization organized under ch. 181, Wis. Stats.

(a) Name Thompson Center On Lourdes

(b) Address 2331 East Lourdes Drive, Appleton 54915  
(Street)  Town  Village  City

(c) Date organized 05/03/2024

(d) If corporation, give date of incorporation \_\_\_\_\_

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box:

(f) Names and addresses of all officers:

President Aboibh Greene

Vice President Ray Zuelke

Secretary \_\_\_\_\_

Treasurer Colny Gretzinger

(g) Name and address of manager or person in charge of affair: Margret Mann

(g)1. Date of Birth: \_\_\_\_\_ (g)2. Drivers License #: \_\_\_\_\_ (g)3. Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### 2. 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 2331 East Lourdes Drive

(b) Lot \_\_\_\_\_ Block \_\_\_\_\_

(c) Do premises occupy all or part of building? ONLY part

(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: Fellowship Hall - Main floor

### 3. Name of Event

(a) List name of the event Senior Prom

(b) Dates of event 05/03/2024 7-9pm

### DECLARATION

An officer of the organization, declares under penalties of law that the information provided in this application is true and correct to the best of his/her knowledge and belief. Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

Officer Margret Mann  
(Signature / Date)

Thompson Center on Lourdes  
(Name of Organization)

Date Filed with Clerk 4-15-2024

Date Reported to Committee \_\_\_\_\_

Date Granted \_\_\_\_\_

License No. \_\_\_\_\_