SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT ORGANIZATION OR LIMITED LIABILITY COMPANY

Submit to municipal clerk.

All corporations/organizatio liquor must appoint an agen of the corporation/organiza local official:	t. The following	questions must be an	swered by the ager	nt. The appointme	ent must be si	gned by the officer(s)
	Town	$\mathcal{A}\mathcal{A}$	laca		0 -	La cinio
To the governing body of:	☐ Village City	of //pple	MO	County of	0 0	1/2 Jule
The undersigned duly author	orized officer(s))/members/managers	of <u>M& &</u> (registered na	red r 5 me of corporation/org	anization or limite	ed liability company)
a corporation/organization of	r limited liability	company making app	lication for an alcol	hol beverage licer	nse for a pren	nises known as
- / ND '	Mr ry	Legreme	de name)	· 1	,	
located at	43 4	1. College	e Ave.	FIRDLE	ton 12	A 94911
appoints		Jon K	LE M	•		
	3 N.	Main 5+	appointed agent) s of appointed agent	Creek,	WI	54106
to act for the corporation/or to alcohol beverages condu- organization/limited liability	icted therein. Is	applicant agent prese	ently acting in that o	capacity or reque	sting approva	I for any corporation/
Yes You If so	o, indicate the o	corporate name(s)/limit	ed liability compan	y(ies) and munici	pality(ies).	
Is applicant agent subject to	completion of	the responsible bevers	age server training	course? \(\tag{Y}	es 📉	0
How long immediately prior	•	•			.,,	POLLDANG
Place of residence last yea		N Main =	0.	Casek	1.77	SUL DIO
•		11 6-	St. Dace	110		3-110-6
For By		(hame	of corrioration/organizat	ion/limited liability con	npany)	a to the state of
Бу		f bill	(signature of Officer/l	Member/Manager)	CONTRACTOR CONTRACTOR CONTRACTOR OF THE CONTRACTOR CONT	
And			(signature of Officer/l	Member/Manager)		
· ,	1/	ACCEPTA	NCE BY AGENT			
1,	KUE (print/type	agent's name)		, hereby accep	ot this a⊯point	ment as agent for the
corporation/organization/linbeverages conducted on the	nited liability co	ompany and assume the corporation/organ	full responsibility i ization/limited liabi	for the conduct o	of all b sines	s relative to alcohol
19:40	ignature of agent)		1. F	: 21	Age k's ag	le
263 N. Mais	n 64. 16	Luck Crush to address of agent)	Just 50	Hol-	Dat∈ of bir	th
		PROVAL OF AGENT lerk cannot sign on				
I hereby certify that I have of the character, record and re	checked munici	pal and state criminal	records. To the be	st of my knowled		vailable information,
Approved on	by	(signature of prop	-	Title		e president, police chief)
AT-104 (R. 4-09)			•			sin Department of Revenue

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Ind	ividual's Full Name (please print) (last name) (first name) (middle name),						
	If I I I at Educable						
Ho	me Address (street/route) Post Office City State Zip Code						
d	me Address (street/route) Post Office City State Zip Code Date of Birth Chicayo, Ith						
Но	me Phone Number Age Date of Birth Place of Birth						
	CHICAGO, ITS						
The	e above named individual provides the following information as a person who is (check one):						
	Applying for an alcohol beverage license as an individual.						
	A member of a partnership which is making application for an alcohol beverage license.						
	(Office) / Director / Member / Manager / Agent) of (Name of Corporation, Limited Liability Company or Nonprofit Organization)						
	which is making application for an alcohol beverage license.						
	e above named individual provides the following information to the licensing authority:						
1. 2	How long have you continuously resided in Wisconsin prior to this date? Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for						
۷.	violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county						
	or municipality?						
	If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)						
	status of charges pending. (If more room is necessary, continue on revision and of the room)						
3.	Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages)						
	for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality?						
	If ves. describe status of charges pending.						
4.	Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit						
	organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit?						
	If yes, identify.						
	(Name, Location and Type of License/Permit)						
5.	Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit,						
	brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin?						
	If yes, identify.						
_	(Name of Wholesale Licensee or Permittee) (Address By City and County)						
6.	Named individual must list in chronological order last two employers. Employer's Name						
	Mc Greaty 5/h						
	Employer's Name Employer's Address Employer's Address						

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

(Signature of Named Individual)