

City of Portage
Legislative & Regulatory Committee Meeting
(This meeting will constitute a meeting of the Municipal Services and
Utilities Committee as a quorum of members will be present; but no
business of that committee will be taken up.)
Tuesday, May 28, 2013, 6:00 p.m.
City Municipal Building, 115 West Pleasant Street
Conference Room One
Agenda

Members: Michael G. Oszman, Chairperson; Kenneth A. Ebnetter, Carolyn Hamre, Martin Havlovic, Frank Miller

1. Roll call
2. Approval of minutes from previous meeting
3. Discussion and possible action on appeal from Becki Wachendorf on dangerous dog declaration
4. Discussion and possible recommendation on Reserve Class B Combination License for The Ball Room LLC, Mike Ganz, Agent, 112 East Cook Street, Portage, WI 53901
5. Discussion and possible recommendation on alcohol license applications (Class B Combination Licenses, Class B Fermented Malt Beverage Licenses, Class C Wine Licenses, Class A Combination Licenses, Class A Fermented Malt Beverage Licenses)
6. Discussion and possible recommendation on taxicab license application
7. Adjournment

Michael G. Oszman, Chairperson

**City of Portage
Legislative & Regulatory Committee Meeting
Thursday, May 16, 2013, 6:30 p.m.
City Municipal Building, 115 West Pleasant Street
Conference Room One
Agenda**

Members: Michael G. Oszman, Chairperson; Carolyn Hamre, Frank Miller

Excused: Kenneth A. Ebnetter, Martin Havlovic

Also present: Police Chief Manthey, City Clerk Moe, Tricia Mumm from 205 Vno, Deputy Clerk Ness, Craig Sauer from Portage Daily Register, City Attorney Spankowski, and Bill Welsh from Cable TV

1. **Roll call**
The meeting was called to order at 6:30 pm by Chairperson Oszman.
2. **Approval of minutes from previous meeting**
Motion by Miller, second by Hamre to approve the minutes from the committee meeting of April 15, 2013. Passed 3-0.
3. **Discussion and possible action on Class B Combination License application for 205 Vno LLC, 205 DeWitt Street, Tricia Mumm, agent**
Clerk Moe explained the current license held by 205 Vno, Class "B" Fermented Malt Beverage and Class "C" Wine will return to the city. Motion by Hamre, second by Miller to recommend to Council Class B Combination License for 205 Vno, LLC, 205 DeWitt Street, Tricia Mumm, agent. Passed 3-0.
4. **Discussion and possible action on ordinance regarding harassing or obscene telephone calls**
Attorney Spankowski gave update. The new ordinance would cover electronic means of communication and include cyberbullying. The original ordinance only covers 911 calls. Motion by Miller, second by Hamre to recommend to Council Ordinance regarding harassing or obscene telephone calls. Passed 3-0.
5. **Discussion and possible action on ordinance regarding illegal dumping**
Attorney Spankowski explained this update would prohibit dumping in private receptacles; this includes the current receptacles used for garbage pick-up. The brush dump and public works area are also included. Motion by Miller, second by Hamre to recommend Ordinance regarding illegal dumping to Council. Passed 3-0.

6. Police Department review of licensed alcohol premises

Chief Manthey gave an update on the alcohol demerit points. For 2013 there has only been one incident with demerit points.

Next meeting will be May 28, 2013, 6:00 pm, to review Alcohol License Applications.

7. Adjournment

Motion by Hamre, second by Miller to adjourn at 6:45 pm. Passed 3-0.

Rebecca C. Ness
Deputy Clerk

Portage Police Department

117 W Pleasant St., Portage, WI 53901

Press Report

| | | | |
|----------------------------------|--|----------------------------------|-----------------------------------|
| Report Date 04/16/2013 | Type of Incident ANIMAL COMPLAINTS | Complaint No. 13-02764 | Case Status ACTIVE/OPEN |
|----------------------------------|--|----------------------------------|-----------------------------------|

Occurred on **04/16/2013 1533** to **04/16/2013 1605**

Incident Location

| | | | | | |
|--|--------------------------------|--------------------|--------------------------|----------|-------------|
| Street Address 117 E FRANKLIN ST | City PORTAGE | State WI | Zip Code 53901 | | |
| Sector SOUTH | Precinct | Geo | Ward | Latitude | Common Name |
| Neighborhood | Jurisdiction PORTAGE | Longitude | Secondary Location | | |

Dispatch Information

| | | | | | |
|----------------------|-------------------------------------|------------------------|--------------------|---------------------|----------------------|
| Received Date / Time | Call Received Via CITIZEN | Dispatched Date / Time | Call Dispatched As | Arrived Date / Time | Departed Date / Time |
|----------------------|-------------------------------------|------------------------|--------------------|---------------------|----------------------|

Press Report

On 4/16/13 at approximately 1530 hrs, I was dispatched to 117 East Franklin Street for a dog bit complaint. I was informed by dispatch that the reporting person's 6 year old daughter had been bitten.

Upon arrival I met with a female subject who verbally identified herself as Melissa J. Virgin. Melissa brought her daughter in from outside who was identified BLACKENED. I was told BLACKENED was outside playing with a stick and a brown a white dog. Melissa told me that she observed the dog from her apartment window. Melissa said that she told BLACKENED to put the stick down and to stop playing with the dog.

A short time later, Melissa stated that BLACKENED came into the apartment and said that she was bit by the dog. Melissa stated that the dog which had bit her was the person who resided at the apartment next door.

I observed a scratch on BLACKENED right upper arm, which was approximately 2 1/2 inches in length as well as a small puncture wound and bruise on the underside of her arm. BLACKENED stated that after she had put the stick down, the dog approached her and bit her for no reason. I was shown a purple sweater which BLACKENED was wearing which was still damp with what I was told was dog saliva from the bite.

Speaking with the people next door, they stated that it was not their dog that bit BLACKENED. I was told their dog was outside only to go to the bathroom and this was over an hour prior to the incident. I brought BLACKENED into the apartment to identify the dog and BLACKENED said that this was not the dog that bit her.

Reporting Officer **7 POMEROY, DENNIS**

Approving Officer (I) **7 POMEROY, DENNIS**

(Cover Pages Only)

Portage Police Department

117 W Pleasant St., Portage, WI 53901

Press Report

| | | | |
|-------------------|--------------------------|-----------------|--------------------|
| Report Date | Type of Incident | Complaint No. | Case Status |
| 04/16/2013 | ANIMAL COMPLAINTS | 13-02764 | ACTIVE/OPEN |

I spoke with several children who were outside playing who told me that the dog that bit BLACKENED was more white than it was brown and it was a lighter color brown. I was told that the dog has been running around the neighborhood and has even been seen at Rusch Elementary School at least two times.

Speaking with Melissa, she was unhappy stating that the dog that bit her daughter was the dog from next door. I advised Melissa that even her daughter had said that this was not the dog that bit her. I advised Melissa that even though it was a small scratch and puncture, she should bring BLACKENED to Divine Savior Hospital to have the injury checked and for possible rabies vaccination. I told Melissa that all the children who were outside playing said that the neighbor's dog was not the dog who bit BLACKENED and it's better to error on the side of caution rather than wait and have BLACKENED possibly become very ill or worse. Melissa stated that she will bring BLACKENED into Divine Savior Hospital.

PHOTOGRAPHS

I took photographs of BLACKENED injuries on her upper right arm. I attached the photographs to this report.

At this time I have no further information.

End of Report
Officer Pomeroy #7
typed 4/17/13; da

Reporting Officer 7 **POMEROY, DENNIS**

Approving Officer (I) 7 **POMEROY, DENNIS**

(Cover Pages Only)

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning August 1 20 13 ;
ending June 30 20 14

TO THE GOVERNING BODY of the: Town of } Portage
 Village of }
 City of }

County of Columbia Aldermanic Dist. No. _____ (if required by ordinance)

1. The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY
 CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): The Ball Room LLC
Mike Ganz, William Spahn II, Carlyn LeBeau, William Chadwick

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.

| | Title | Name | Home Address | Post Office & Zip Code |
|-----------------------|---------|------------------|------------------------------------|------------------------|
| President/Member | Partner | Mike Ganz | N4085 Erdman Rd, Rio WI | 53960 |
| Vice President/Member | Partner | William Spahn II | 3624 Sky High Rd, Poynette, WI | 53955 |
| Secretary/Member | Partner | Carlyn LeBeau | 1288 Grandview Ct, Sun Prairie, WI | 53590 |
| Treasurer/Member | Partner | William Chadwick | N6847 Hillside Rd, Portage, WI | 53901 |
| Agent | | Mike Ganz | N4085 Erdman Rd, Rio, WI | 53960 |
| Directors/Managers | | Mike Ganz | | |

3. Trade Name The Ball Room Business Phone Number 608.219.5423
4. Address of Premises 112 E Cook St, Portage, WI Post Office & Zip Code 53901

5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
8. (a) **Corporate/limited liability company applicants only:** Insert state WI and date 03/18/12 of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? Yes No
(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? Yes No
(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 beverages may be sold and stored only on the premises described.) 14,200 sq ft building on two levels.

10. Legal description (omit if street address is given above): _____
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
(b) If yes, under what name was license issued? _____

12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] Yes No
13. 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]. Yes No
14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes 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.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME

this 17 day of May 20 13
Cvetelina Beltmeyer (Clerk/Notary Public)
William Spahn II (Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)
Carlyn LeBeau (Officer of Corporation/Member/Manager of Limited Liability Company/Partner)
Mike Ganz (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

| | | | |
|---|--------------------------------|---------------------------------|-----------------------------------|
| Date received and filed with municipal clerk <u>5-20-13</u> | Date reported to council/board | Date provisional license issued | Signature of Clerk / Deputy Clerk |
| Date license granted | Date license issued | License number issued | |

9-C130520

| | |
|--|---------------------|
| Applicant's Wisconsin Seller's Permit # | |
| Federal Employer Number (FEIN): | |
| LICEN | |
| <input type="checkbox"/> Class A | |
| <input checked="" type="checkbox"/> Class B | |
| <input type="checkbox"/> Class C | |
| <input type="checkbox"/> Class A | |
| <input type="checkbox"/> Class B | |
| <input checked="" type="checkbox"/> Reserve Class B liquor | \$ <u>10,000</u> |
| Publication fee | \$ <u>25.00</u> |
| TOTAL FEE | \$ <u>10,116.63</u> |

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

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Portage, WI County of Columbia
 City

The undersigned duly authorized officer(s)/members/managers of The Ball Room LLC
(registered name of corporation/organization or limited liability company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as The Ball Room LLC
(trade name)

located at 112 E Cook St, Portage, WI 53901

appoints Michael C Ganz
(name of appointed agent)
N4085 Erdman Rd, Rio, WI 53960
(home address of appointed agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 29 Years

Place of residence last year N4085 Erdman Rd, Rio, WI 53960

For: The Ball Room LLC
(name of corporation/organization/limited liability company)

By:  - Mike Ganz, Partner
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Michael C Ganz, hereby accept this appointment as agent for the
(print/type agent's name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

 5/14/13 Agent's age 29
(signature of agent) (date)

N4085 Erdman Rd, Rio, WI 53960 Date of birth 08/02/1983
(home address of agent)

**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on _____ by _____ Title _____
(date) (signature of proper local official) (town chair, village president, police chief)

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

| | | | | | |
|---|--|--------------|------|---------------|----------|
| Individual's Full Name (please print) (last name) | | (first name) | | (middle name) | |
| CHADWICK | | WILLIAM | | H | |
| Home Address (street/route) | | Post Office | City | State | Zip Code |
| | | | | WI | 53901 |
| Place of Birth | | | | | |

es the following inform:
ge license as an **indivi**
nich is making applicati
of
ager/Agent)

ity Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 44 Years
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
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.)
DUI First Offense- 2005 + 1989 (KM)
- 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? Yes No
If yes, describe status of charges pending.
- 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? Yes No
If yes, identify.
(Name, Location and Type of License/Permit)
- 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? Yes No
If yes, identify.
(Name of Wholesale Licensee or Permittee) *(Address By City and County)*

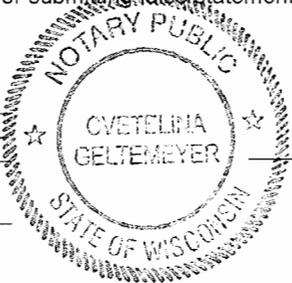
6. Named individual must list in chronological order last two employers.

| Employer's Name | Employer's Address | Employed From | To |
|------------------------|------------------------------------|---------------|------------|
| M.E.R.I. | 1310 W. Badger Rd Madison WI 53710 | 10/01/1999 | 05/16/2013 |
| Iron Workers Local 383 | 1602 S Park St Madison WI 53715 | 06/01/2005 | 12/31/2005 |

The undersigned, being first duly sworn on oath, deposes and says 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.

Subscribed and sworn to before me

this 17 day of May, 2013
Cvetelina Geltemeyer
(Clerk/Notary Public)



[Signature]
(Signature of Named Individual)

My commission expires 04/09/2017



AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

| | | | | | |
|---|--|--------------|------|----------------|----------|
| Individual's Full Name (please print) (last name) | | (first name) | | (middle name) | |
| LEBEAU | | CARLYN | | M | |
| Home Address (street/route) | | Post Office | City | State | Zip Code |
| | | | | WI | 53590 |
| | | | | Place of Birth | |
| | | | | Madison, WI | |

I, the following informati
 license as an **individu**
 ch is making application
 of **Th**
 ger/Agent)

Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

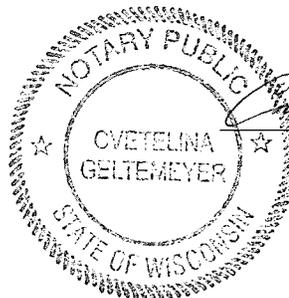
- How long have you continuously resided in Wisconsin prior to this date? 62 Years
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
 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.)
- 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? Yes No
 If yes, describe status of charges pending.
- 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? Yes No
 If yes, identify. _____
(Name, Location and Type of License/Permit)
- 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? Yes No
 If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)
- Named individual must list in chronological order last two employers.

| Employer's Name | Employer's Address | Employed From | To |
|-------------------------|--------------------------------------|---------------|------------|
| Sacred Hearts School | 219 Columbus St Sun Prairie WI 53590 | 09/01/1989 | 05/17/2013 |
| Eagle School of Madison | 5454 Gunflint Tr Madison WI 53711 | 09/01/1986 | 09/01/1989 |

The undersigned, being first duly sworn on oath, deposes and says 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.

Subscribed and sworn to before me

this 17th day of May, 2013
Cvetelina Geltmeyer
(Clerk/Notary Public)



Carly M. LeBeau
(Signature of Named Individual)

My commission expires 04/09/2017



Printed on Recycled Paper

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

| | | | | |
|---|--|--------------|----------------|----------|
| Individual's Full Name (please print) (last name) | | (first name) | (middle name) | |
| SPAHN, II | | WILLIAM | H | |
| Home Address (street/route) | | Post Office | City | State |
| | | | | WI |
| | | | | Zip Code |
| | | | | 53955 |
| | | | Place of Birth | |
| | | | MARISON WI | |

Provides the following information for an alcohol beverage license as an individual which is making application

of []

(Name of Corporation/Agent)

(Name of Corporation)

(Name of Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 49 50
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
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.)
- 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? Yes No
If yes, describe status of charges pending.
- 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? Yes No
If yes, identify. _____
(Name, Location and Type of License/Permit)
- 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? Yes No
If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)
- Named individual must list in chronological order last two employers.

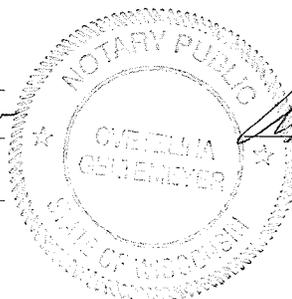
| | | | |
|--------------------------------|-----------------------------------|------------------------------|----|
| Employer's Name <u>SBLF</u> | Employer's Address <u>same</u> | Employed From <u>same</u> | To |
| Employer's Name | Employer's Address | Employed From | To |

The undersigned, being first duly sworn on oath, deposes and says 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.

Subscribed and sworn to before me

this 17 day of May, 2013

Cristelina Gutierrez
(Clerk/Notary Public)



[Signature]
(Signature of Named Individual)

My commission expires 04/09/2017



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NOTICE OF LICENSE APPLICATION

Applications for Class "B" Combination Licenses have been made at the Office of the City clerk by the following:

205 Vino LLC, 205 DeWitt Street, Tricia Mumm, Agent (205 Vino)
4 R Future Inc., 322 West Wisconsin Street, Jeremy S Rusch, Agent (Portage Theatres)
Angulo, Reynaldo G., 1505 New Pinery Road, (El Caballo Bayo Mexican Restaurant)
Bellmore & Associates LLC, 301 DeWitt Street, Mark A. Bellmore, Agent (The Corner Pocket Sports Bar & Grill)
Billie's Place, LLC, 220 West Cook Street, Lacey Thomas, Agent (Billie's Place)
B.P.O. Elks Lodge #675, 201 West Conant Street, Myron T Shannon Jr, Agent (Benevolent & Protective Order of Elks #675)
Cactus Club Bar & Grill, LLC, 102 East Cook Street, Dean Jeffery Audiss, Agent (Cactus Club)
Cleary Krech Post 1707 of Veterans of Foreign Wars of the United States, 215 West Collins Street, Jeremy Duffy, Agent (Cleary Krech VFW Post 1707)
Cottonwood Bar & Grill Inc, 312 DeWitt Street, Randal Leigh Heinzl, Agent (Cottonwood Bar & Grill Inc.)
Douglas' Big Dog Saloon LLC, 218 West Cook Street, Bradley John Douglas, Agent (Douglas' Big Dog Saloon)
Good Stuff LLC, 2520 West Wisconsin Street, Catherine C. Mael, Agent (Good Stuff)
Green Enterprises LLC, 316 DeWitt Street, Timothy A. Green, Agent (Shamrock Bar and Grill)
House of Booze LLC, 220 West Wisconsin Street, Kevin Michael Malone, Agent (Blarney Stone)
Knights of Columbus, 918 Silver Lake Drive, Ken Graves, Agent (Knights of Columbus)
La Tolteca Fuentes, Inc., 2653 New Pinery Rd, Reyes Aranda, Agent (La Tolteca)
Lane's Full Throttle LLC, 1101 DeWitt Street, Robert J. Lane, Agent (Lane's Full Throttle)
New Pinery Enterprises LLC, 1402 West Wisconsin Street, Lyman O. Kaiser, Agent (Sarbacker's Bar)
Noll, William N., 412 East Wisconsin Street, (Tamarack Pizza)
B & B Hitching Post LLC, 2503 West Wisconsin Street, Michael S. Bergman, Agent (B & B Hitching Post)
Rileys Bar LLC, 1314 West Wisconsin Street, Lisa Thompson, Agent (Rileys Bar LLC)
Lord, Robert & Jon Krueger, The Friendly Bar & Grill, 223 Oneida Street, (The Friendly Tavern)
Schehr, Sherry Lee, 1207 Dunn Street, (The Caboose BBQ Co.)
Shutova, LLC, 2900 New Pinery Road, Beadin Mehmedi, Agent (Dino's Restaurant & Bar)
Sombreros LLC, 235 W. Pleasant Street, Neil Shortreed, Agent (Sombreros Burrito House)
Stover Enterprises Inc., 2711 Hwy CX, Dana Lee Stover, Agent (Suzy's Steak & Seafood House)
Threadz Fashion LLC, 214 West Wisconsin Street, Jake Stolte, Agent (Liquid)
Tolly's Alleys LLC, 817 East Wisconsin Street, Brian R. Tollison, Agent (Tolly's Alleys)
TRT Corporation, 125 Wauona Trail, Patricia Madani, Agent (Trail's Lounge Restaurant)
Vinayaka, Inc., 2701 South CX, Dawn Schneller, Agent (Best Western Resort Hotel & Conference Center)

Applications for Class “B” Beer Licenses have been made at the Office of the City Clerk by the following:

Milz, Norman E., 300 East Cook Street, Norman E Milz, (Norm’s Pitstop)
Peng, Huan Qing, 238 West Cook Street, (Cathay Garden)
Pizza Hut of Southern Wisconsin, Inc., 401 East Wisconsin Street, Jon W. Kreklow,
Agent (Pizza Hut)
PR Partners LLC, 2905 New Pinery Road, James H. Firari, Agent (Pizza Ranch)

Applications for Class “C” Wine Licenses have been made at the Office of the City Clerk by the following:

Milz, Norman E., 300 East Cook Street, Norman E Milz, (Norm’s Pitstop)
Peng, Huan Qing, 238 West Cook Street, (Cathay Garden)
Pizza Hut of Southern Wisconsin, Inc., 401 East Wisconsin Street, Jon W. Kreklow,
Agent (Pizza Hut)
PR Partners LLC, 2905 New Pinery Road, James H. Firari, Agent (Pizza Ranch)

Applications for Class “A” Combination Licenses have been made at the Office of the City Clerk by the following:

Crawford Oil Co. Inc., 1901 East Highway 33, Steven D. Madsen, Agent (Fort BP)
Crawford Oil Co. Inc., 2211 West Wisconsin Street, Steven D. Madsen, Agent (Jim’s
BP)
Daley, James D., 1623 New Pinery Road, (Daley’s Beverage Mart)
Mathieus, Kevin Edward, 211 East Wisconsin Street (Discount Liquor)
Pierce’s Supermarket Inc., 2915 New Pinery Road, Angela K Pierce, Agent
(Pierce’s Marketplace)
Wilz Drug, Inc., 140 East Cook Street, Larry R Wilz, Agent (Wilz Drug & Home
Health Care)
Express Laundry, LLC, 2725 New Pinery Road, John D. Bennett, Agent
(Mobil Travel Plaza)

Applications for Class “A” Beer Licenses have been made at the Office of the City Clerk by the following:

Kwik Trip, Inc., 1223 East Wisconsin Street, Jeffery Kenneth Pfeiffer, Agent
(Kwik Trip #653)
Kwik Trip, Inc., 2970 New Pinery Road, Nona May Hartman, Agent, (Kwik Trip #683)
Pal and Simran LLC, 403 DeWitt Street, Sharam Singh, Agent (Market Basket)

All licenses in the City of Portage, Columbia County, Wisconsin.
All licenses run from July 1, 2013 to June 30, 2014.

Marie A. Moe, WCPC, MMC, City Clerk

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07-01-13 ending: 06-30-14
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Portage

County of Columbia Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

| | |
|--|-------------------|
| Applicant's Wisc Seller's Permit No. | |
| Federal Employer Number (FEIN): | |
| LICENSE RE | |
| <input type="checkbox"/> Class A b | |
| <input checked="" type="checkbox"/> Class B b | |
| <input type="checkbox"/> Class C v | |
| <input type="checkbox"/> Class A liquor | \$ |
| <input checked="" type="checkbox"/> Class B liquor | \$ <u>500.00</u> |
| <input type="checkbox"/> Reserve Class B liquor | \$ |
| Publication fee | \$ <u>25.00</u> |
| TOTAL FEE | \$ <u>1025.00</u> |

Complete A or B. All must complete C.

A. Individual or Partnership:
Full Name(s) (Last, First and Middle Name) Reyes Aranda **Home Address** 440 Union St **Post Office & Zip Code** 53590

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company La Tolteca Fronts, Inc
 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 | <u>Reyes Aranda</u> | <u>440 Union St</u> | <u>53590</u> |
| Vice President/Member | <u>[Signature]</u> | | |
| Secretary/Member | | | |
| Treasurer/Member | | | |
| Agent | <u>Reyes Aranda</u> | <u>440 Union St</u> | <u>53590</u> |
| Directors/Managers | <u>Alonso Aranda</u> | <u>909 W President St</u> | <u>Portage WI 53901</u> |

C. 1. Trade Name La Tolteca Business Phone Number 745-6776
 2. Address of Premises 2653 New Pinery Rd Post Office & Zip Code 53901

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) interior dining and bar of restaurant building and exterior patio
5. Legal description (omit if street address is given above): 03x30 patio in front of restaurant
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** Yes 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 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.** addition of patio to premise Yes 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. Yes No
9. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown under Section A or B above? [phone (608) 266-2776] Yes No
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? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes 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.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 10th day of May, 2013
Marcel A. Moe
(Clerk/Notary Public)
 My commission expires term of office

Reyes Aranda
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
[Signature]
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

| | | |
|---|--------------------------------|-----------------------------------|
| Date received and filed with municipal clerk <u>05-10-13</u> | Date reported to council/board | Date license granted |
| License number issued | Date license issued | Signature of Clerk / Deputy Clerk |

C130509#18

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 7-1-2013 ending: 6-30-2014
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Portage

County of COLUMBIA Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company BPO ELKS #675
 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 | MARILYN GEORGE | 786 SOODLE RIDGE | PORTAGE WI 53901 |
| Vice President/Member | NIKKIL SHANNON | 526 W FRANKLIN ST #6 | PORTAGE WI 53901 |
| Secretary/Member | THOMAS E. TRESSMAN | W10244 NWY16 | PORTAGE WI 53901 |
| Treasurer/Member | ROBERT A GOODMAN | 302 LARK ST | PORTAGE WI 53901 |
| Agent | MYRON T SHANNON JR | 526 W. FRANKLIN ST #6 | PORTAGE WI 53901 |

C. 1. Trade Name PORTAGE ELKS LODGE 675 Business Phone Number 608 742-6040
 2. Address of Premises 201 W CONANT ST Post Office & Zip Code PORTAGE WI 53901

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) BAR 1ST FLOOR + BASEMENT LQRRM (coolers)

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 Yes 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 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. Yes 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. Yes No

9. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown under Section A or B above? [phone (608) 266-2776] Yes No

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? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes 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.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 10th day of May, 2013

Maria R. Moe
(Clerk/Notary Public)

My commission expires term of office

Marilyn George
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
Nikki L Shannon
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
Nikki L Shannon
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

| | | |
|---|--------------------------------|-----------------------------------|
| Date received and filed with municipal clerk <u>05-10-13</u> | Date reported to council/board | Date license granted |
| License number issued | Date license issued | Signature of Clerk / Deputy Clerk |

C130509 # 35 - SHOWERS \$6000

| | |
|--|----------------------|
| Applicant's Wisconsin Seller's Permit No. | |
| Federal Employer Number (FEIN) | |
| LICENSE RE | |
| <input type="checkbox"/> Class A b | |
| <input checked="" type="checkbox"/> Class B b | |
| <input type="checkbox"/> Class C v | |
| <input type="checkbox"/> Class A li | |
| <input checked="" type="checkbox"/> Class B liquor | \$ <u>500.00</u> |
| <input type="checkbox"/> Reserve Class B liquor | \$ |
| Publication fee | \$ <u>25.00</u> - pd |
| TOTAL FEE | \$ <u>1025.00</u> |

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

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town
Village of PORTAGE County of COLUMBIA
 City

The undersigned duly authorized officer(s)/members/managers of PORTAGE ELKS LODGE 675
(registered name of corporation/organization or limited liability company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as
PORTAGE ELKS LODGE 675
(trade name)

located at 201 W CONANT ST PORTAGE WI 53901

appoints MYRON T SHANNON JR.
(name of appointed agent)
526 W FRANKLIN ST APT 6 PORTAGE WI 53901
(home address of appointed agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 20 YRS

Place of residence last year 526 W. FRANKLIN ST APT 6 PORTAGE, WI 53901

For: PORTAGE ELKS LODGE 675
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, MYRON T SHANNON JR. "RED", hereby accept this appointment as agent for the
(print/type agent's name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

MTS 5-10-13 Agent's age 57
(signature of agent) (date)
526 W. FRANKLIN ST APT 6 PORTAGE WI Date of birth 12-01-55
(home address of agent)

**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
 (Clerk cannot sign on behalf of Municipal Official)**

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on _____ by _____ Title _____
(date) (signature of proper local official) (town chair, village president, police chief)

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

| | | | | |
|---|-------------|----------------|---------------|--|
| Individual's Full Name (please print) (last name) | | (first name) | (middle name) | |
| Shannon | | Nikki | Lynn | |
| Home Address (street/route) | Post Office | State | Zip Code | |
| S: | | WI | 53901 | |
| Home | | Place of Birth | | |
| | | Stealing, IL. | | |

The following information is provided by the individual making application of _____ of _____ which is making application for an alcohol beverage license.

(Officer/Director/Member/Manager/Agent) of _____ (Name of Corporation, Limited Liability Company or Nonprofit Organization)

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 20 yrs
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
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.)
- 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? Yes No
If yes, describe status of charges pending.
- 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? Yes No
If yes, identify. _____
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employee 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? Yes No
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 | Employer's Address | Employed From | To |
| Dean Portage Clinic | 2825 Hunters Trail Portage WI. | 1995 | Present |
| HHU | Portage | 1994 | 1995 |

The undersigned, being first duly sworn on oath, deposes and says 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.

Subscribed and sworn to before me

this 10th day of May, 2013
Marie A. Mor
(Clerk/Notary Public)

Nikki Shannon
(Signature of Named Individual)

My commission expires term of office



Printed on Recycled Paper

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

| | | | | |
|---------------------------------------|--|-------------|--------------|---------------|
| Individual's Full Name (please print) | | (last name) | (first name) | (middle name) |
| SHANNON JR | | MYRON | THOMAS | |
| Home Address (street/route) | | Post Office | State | Zip Code |
| APT 6 F | | | WI | 53901 |
| Place of Birth | | | | |
| STERLING IL. | | | | |

I, Myron Thomas Shannon Jr of 062675 (Name of Corporation, Limited Liability Company or Nonprofit Organization) which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 20 yrs
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
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.)
- 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? Yes No
If yes, describe status of charges pending.
- 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? Yes No
If yes, identify. _____
(Name, Location and Type of License/Permit)
- 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? Yes No
If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)
- Named individual must list in chronological order last two employers.

| Employer's Name | Employer's Address | Employed From | To |
|------------------|---------------------|---------------|------|
| CONTECK CONST PC | W. WISST PORTAGE WI | 97-2010 | 2010 |
| ACE HARDWARE | PORTAGE WI | 95 | 97 |

The undersigned, being first duly sworn on oath, deposes and says 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.

Subscribed and sworn to before me

this 10th day of May, 2013
Mavis A. Moe
(Clerk/Notary Public)

Myron Thomas Shannon Jr
(Signature of Named Individual)

My commission expires term of office



Printed on Recycled Paper

