

4f



Operator License Application
Village of Howard

<input checked="" type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$5.00
<input type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00	
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

Office Use Only:	License #	Provisional #
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Filling Out Your Application:

- An Operator License is a privilege, not a right. Any false answers or omissions may result in the denial of your application. This application must be filled out accurately and completely.
- If you have any doubt as to whether to include the facts of a specific incident, it is recommended that you disclose the information.
- If you are unsure about how to respond to any questions on this form, check with the Village Clerk for clarification. Your application will not be processed until you deal with any outstanding warrants.
- You can obtain information regarding your criminal history from the police department, the court with which you interacted, or the Wisconsin Circuit Court Access website at: www.wcca.wicourts.gov.

Review Of Your Application:

- The Howard Police Department (Brown County Sheriff) or our clerical staff will perform a background check to verify that the information you have provided is complete and accurate.
- You may be called to appear before the Village Board if there are concerns about your criminal history as it relates to your application, or if it appears that you falsified or omitted information from your application. If you are asked to appear but choose not to do so, your application may be denied.

Last Name: Buboltz		First Name: Halli		Middle Name: Jean				
Residence: Street Address: 2428 S. 18th St		City: Manitowoc		State: WI		Zip: 54220		
Residence Phone: 414 379 7787	Birthdate: [REDACTED]	Birth Place (City, State): Green Bay, WI	Race: Wh	Sex: F	Height: 5'3"	Weight: 160	Hair: Blk	Eyes: Haz
Driver's License # (State & Number): [REDACTED] WI		Establishment Where Employed: The Watering Hole			Contact Person & Phone Number: Ben Brunette 920 434 0815			

Other Names, Aliases or Birthdates ever used:

Cities & States lived in the past 10 years:	From:	To:
Manitowoc WI Milwaukee WI Manitowoc WI	2013 2012	Present 2013 2012

Please check box below if you have lived at this address for 10 years or more:	From:	To:
<input type="checkbox"/>		

Indicate whether you are a U.S. Citizen, U.S. Alien or Temporary Resident:

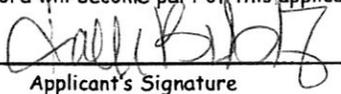
U.S. Citizen Alien Temporary Resident (Employment Number _____)

Have you ever been convicted of a crime of manufacturing, distributing or delivering a controlled substance or controlled substance; possessing, with intent to manufacture, distribute or deliver, a controlled substance or under federal or any state law? (See Wis. Stats. 111.335(1)(cs).) List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Since your 17 th birthday, have you ever been convicted of a felony or misdemeanor (including criminal traffic offenses)? List below: OWI 1st $\frac{1}{2}$ 2nd	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
As a juvenile, were you ever waived into adult court and convicted of a felony or misdemeanor? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Have you even been convicted by military court-martial? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Are you currently subject to any pending charges? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

List all convictions, citations, tickets and pending charges:

MONTH/YEAR	LOCATION	CHARGE	DISPOSITION
9/2010	Deaubeke, WI	MISC	paid fine
11/2010	Milwaukee, WI	MISC	paid fine

The undersigned affirms that he/she made complete and true answers to each question and understands that his/her past record will become part of this application and that the applicant applying for an Operator License is a Wisconsin resident.


1/23/14

 Applicant's Signature Date

To be filled out by the Howard Police Department or Clerical Staff

<input type="checkbox"/>	Subject has no Criminal Arrest Record with either the Wisconsin State Crime Bureau
<input type="checkbox"/>	Files indicate that subject has the attached Criminal Arrest Record.

 Authorized signature performing background check Date

Receipt # _____ Dated: _____ Mail or Pick Up Date: _____



HOWARD, WI VILLAGE
2456 Glendale Ave
PO Box 12207
Green Bay WI 4307--2207
(920)434-4640

Transaction 26326.4737
01/23/2014 03:37pm
Annette @ POSREGISTER1

perators License \$40.00
Halli Jean Bubloz

Receipt Total \$40.00

CC Payment \$40.00

WISCONSIN

SELLER / SERVER CERTIFICATION

Trainee Name: Halli Bubolz

School Name: Learn2Serve

Date of Completion: 07/31/2013 14:06 CST

Certification #: WI 2122001

I, 

certify that the above named person
successfully completed an approved
Learn2Serve Seller/Server course.

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66

Corporate Headquarters

13801 N. Mopac, Suite 100
Austin, Texas 78727
P: 800-442-1149

search calendar pay fees online reports help view cart (0 items)

Ozaukee County vs. Halli J Bubolz

[Printable Version \(PDF\)](#)

Ozaukee County Case Number 2010TR005256

[What is RSS?](#) 

Filing Date	Case Type	Case Status
09-07-2010	Traffic Forfeiture	Closed
Defendant Date of Birth	Address	
05-1986	4122 Custer St, Manitowoc, WI 54220	

Court Record Events

- Ascending Date Order
- Descending Date Order

Charge(s)

Count No.	Statute	Description	Severity	Disposition
1	346.63(1)(a)	OWI (1st)	Forf. U	Guilty Due to No Contest Plea

[View history and details of Charge\(s\)/Sentence\(s\)](#)

Defendant Owes the Court: \$ 0.00

Responsible Official	Prosecuting Agency	Prosecuting Attorney	Defense Attorney
McManus, Darcy E.	District Attorney		

Defendant

Defendant Name	Date of Birth	Sex	Race ¹
Bubolz, Halli J		Female	Caucasian
Address			Address Updated On
4122 Custer St, Manitowoc, WI 54220			09-07-2010
JUSTIS ID	Finger Print ID		

Citations

Citation J8197420

Bond Amount	Deposit Type	Appearance Date and Time	Mandatory
\$ 817.50	None	09-15-2010 at 08:30 am	Yes
Name		Date of Birth	Sex
Bubolz, Halli J			Female
Address			Address Updated On
4122 Custer St, Manitowoc, WI 54220			09-07-2010
Plate Number	State	Expiration	VIN
257MUS	WI	2011	
Issuing Agency	Officer Name	Violation Date	MPH Over
Ozaukee County Sheriff's Dept	Last, Gary	08-23-2010	
Plaintiff Agency	Ordinance or Statute	Statute	Charge Description
Ozaukee County	Statute	346.63(1)(a)	OWI (1st)
Severity			
Forf. U			

Total Receivables

Court Assessments Adjustments ³ Paid to the Court Probation/Other Agency Amount ⁴ Balance Due to Court Due Date ⁵

\$ 945.50 \$ 0.00 \$ 945.50 \$ 0.00 \$ 0.00

- ¹ The designation listed in the Race field is subjective. It is provided to the court by the agency that filed the case.
- ² Non-Court activities do not require personal court appearances. For questions regarding which court type activities require court appearances, please contact the Clerk of Circuit Court in the county where the case originated.
- ³ Includes collection agency fees; bankruptcy discharge of debt; Department of Revenue collection fees; and forgiven debts due to indigence, death, time served, or community service.
- ⁴ Some amounts assessed by the courts are collected by the Department of Corrections or other agencies. This column is rarely updated by the courts and may be less than the actual amount owed.
- ⁵ For cases with multiple assessments, the due date represents the assessment with the latest date.
- ⁶ Your payment may not be processed immediately.

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DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

Request Date : 01/23/2014
Report Date : 01/23/2014
Order Number : 3904144
Request Reason : Government

This criminal background check was performed by searching the following data submitted to the Crime Information Bureau.

Name	HALLI J BUBOLZ
Date of Birth	[REDACTED]
Sex	F
Race	W

CIB
CRIME INFORMATION BUREAU

Wisconsin Criminal History

IMPORTANT EXPLANATION ABOUT HOW TO UNDERSTAND THIS RESPONSE

This response reports the results of a criminal history search conducted with the name, date of birth, and any other identifying data you provided. The identifying data you provided is printed above. If you submitted fingerprints with your search request see the statement below.

Read this entire explanation, the "How to Read the Following Criminal History Report" section and the "Notice to Employers" section. Read these sections carefully to understand how this response relates to the identifying data you provided.

Printed below these explanations is a Wisconsin criminal history record that has been identified as a possible match to the identifying data you provided.

A criminal history search based only on a name, date of birth, and other identifying data that is not unique to a particular person (like "sex" or "race") may result in:

1. Identification of criminal history records for multiple persons as potential matches for the identifying data submitted, or

2. Identification of a criminal history record belonging to a person whose identifying information is similar in some way to the identifying data that was submitted to be searched, but is not the same person whose identifying data was submitted for searching.

The Crime Information Bureau (CIB) therefore cannot guarantee that the criminal history record below pertains to the person in whom you are interested.

You must carefully read the entire Wisconsin criminal history record below in order to determine whether the record pertains to the person in whom you are interested.

Do not just assume that the criminal history record below pertains to the person in whom you are interested.

Additional information about finger-based search submissions: Fingerprint-based background checks generally provide a more reliable result and are prone to fewer false matches due to the specific identifying features of fingerprints.

HOW TO READ THE FOLLOWING CRIMINAL HISTORY REPORT

The criminal history reported below is linked by fingerprints to the name appearing directly after these explanatory sections, following the label "IDENTIFICATION." That name is the name that was provided by the fingerprinted person the first time his or her fingerprints were submitted to CIB; it may or may not be the real name of the fingerprinted person. That name is called the "Master Name" in these explanatory sections.

It is not uncommon for criminal offenders to use alias or fraudulent names and false dates of birth, sometimes known as "identity theft."

If the name you submitted to be searched is **DIFFERENT** from the "Master Name" below, the Wisconsin criminal history record below may belong to someone other than the person whose name and other identifying data you submitted for searching. If an alias or fraudulent name used by the person who is the "Master Name" is similar to the name you submitted for searching, that does not mean that the person whose name you submitted for searching has a criminal history. It means that the person associated by fingerprints with the Wisconsin criminal history below has used a name similar to the name you submitted for searching.

If the name you submitted to be searched is **THE SAME** as the "Master Name" below, the Wisconsin criminal history record below may belong to someone other than the person whose name and other identifying data you submitted for searching. That is because the "Master Name" is the name attached to the initial fingerprint submission to CIB that is associated with the reported criminal history, may have been an alias name or a name similar to the name you submitted for searching.

To determine whether the Wisconsin criminal history below actually belongs to the person whose name and other identifying information you submitted for searching, compare the

information reported below to the other information you have obtained about that person. Inconsistencies may indicate that the criminal history reported below does not belong to the person whose name and other identifying information you submitted for searching. You may need to ask for clarification from the person whose name and other identifying information you submitted for searching.

Before you make a final decision adverse to a person based on the following criminal history record, in addition to any other opportunity you offer the applicant to explain the following criminal history record, please notify the applicant of:

1. His or her right to challenge the accuracy and completeness of any information contained in a criminal history record, and
2. The process for submitting a challenge.

The person should submit his or her challenge to CIB on Form DJ-LE-247. Form DJ-LE-247 is available free of charge on the Department of Justice website at <http://www.doj.state.wi.us/dles/cib/background-check-criminal-history-information> or by calling (608) 266-7314. A challenge may include a request for comparison of the fingerprints of the person submitting the challenge to the fingerprints on file that are associated with the Wisconsin criminal history record below.

The Wisconsin criminal history report below may not show all arrests for the person whose fingerprints are associated with the reported criminal history. However, the criminal history report contains all information that has been provided to the state criminal history database that may be released in response to your request.

The results of this search are effective and current for the date of this search only. A new search request should be submitted at a later time if an updated response is needed.

NOTICE TO EMPLOYERS

It may be a violation of state law to discriminate against a job applicant because of an arrest or conviction record. Generally speaking, an employer may refuse to hire an applicant on the basis of a conviction record only if the circumstances of the offense for which the applicant was convicted substantially relate to the circumstances of the particular job. For more information, see <http://docs.legis.wisconsin.gov/statutes/statutes/111/II/335> and the Department of Workforce Development's publication, Arrest and Conviction Records Under the Law.

Before you make a final decision adverse to an applicant based on the following criminal history record, in addition to any other opportunity you offer the applicant to explain the following criminal history record, please notify the applicant of:

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Wisconsin Criminal History
RECORD LAST UPDATED: 03/16/2011

Identification Criminal History Contributing Agencies Your Request

IDENTIFICATION**HALLI JEAN BUBOLZ**

Female / White

Born in Wisconsin ; Citizen of USA


 5'03" 125lbs Hazel Eyes ; Blonde Or Strawberry Hair
 1819 N Cambridge Ave #227, Milwaukee, WI as of 09/10/2010

FBI: Unknown

STATE ID: WI1305948

EMPLOYER: Sein

OCCUPATION: Bartender

Unknown, Unknown, XX

PHOTO INFORMATION:

WI013035Y WI CIB Identification Section

CRIMINAL HISTORY**Cycle 1**

EARLIEST EVENT DATE: September 10, 2010

ARREST TRACKING NUMBER: 1391201003952

DATE OF OFFENSE: September 10, 2010

ARREST DATA

SUBJECT NAME: HALLI JEAN BUBOLZ

TYPE: Adult Only

DATE: September 10, 2010

ARREST AGENCY: WI0410100 BAYSIDE POLICE DEPARTMENT

LOCAL IDENTIFICATION NUMBER: 20100064

BOOKING

AGENCY: WI0410100 BAYSIDE POLICE DEPARTMENT

CHARGE

SEQUENCE NUMBER: 01

LITERAL: OPERATE WHILE INTOXICATED

NCIC CODE: 5404

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Other

CHARGE

SEQUENCE NUMBER: 02

LITERAL: PROHIBITED ALCOHOL CONCENTRATION

NCIC CODE: 5404

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Other

PROSECUTION

CASE NUMBER: 2010ML025919

PROSECUTOR: WI0416100 MILWAUKEE CO DISTRICT ATTORNEY

CHARGE

SEQUENCE NUMBER: 03

TRACKING NUMBER: 1391201003952

STATUTE NUMBER: 346.63(1)(A)

LITERAL: OPERATING WHILE INTOXICATED

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

PROSECUTION ACTION:

LITERAL: Other

DISPOSITION DATE: October 21, 2010

DISPOSITION: CHARGE ISSUED

CHARGE

SEQUENCE NUMBER: 04

TRACKING NUMBER: 1391201003952

STATUTE NUMBER: 346.63(1)(B)

LITERAL: PROHIBITED ALCOHOL CONCENTRATION

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

PROSECUTION ACTION:

LITERAL: Other

DISPOSITION DATE: October 21, 2010

DISPOSITION: CHARGE ISSUED

COURT

SUBJECT NAME: HALLI JEAN BUBOLZ

DATE: March 16, 2011
CASE NUMBER: 402010CT002598
COURT: Unknown
COMMENTS: CCAP DISPOSITION

CHARGE

SEQUENCE NUMBER: 01
TRACKING NUMBER: 1391201003952
LITERAL: OPERATE WHILE INTOXICATED
NCIC CODE: 5404
COUNTS: 1
CLASSIFICATION:

CHARGE SEVERITY: Other

COURT ACTION:

LITERAL: Other
DISPOSITION DATE: March 16, 2011
DISPOSITION: DISPOSITION NOT REPORTED

CHARGE

SEQUENCE NUMBER: 02
TRACKING NUMBER: 1391201003952
LITERAL: PROHIBITED ALCOHOL CONCENTRATION
NCIC CODE: 5404
COUNTS: 1
CLASSIFICATION:

CHARGE SEVERITY: Other

COURT ACTION:

LITERAL: Other
DISPOSITION DATE: March 16, 2011
DISPOSITION: DISPOSITION NOT REPORTED

CHARGE

SEQUENCE NUMBER: 03
TRACKING NUMBER: 1391201003952
STATUTE NUMBER: 346.63(1)(A)
LITERAL: OPERATING WHILE INTOXICATED
COUNTS: 1
CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Convicted
DISPOSITION DATE: February 23, 2011
DISPOSITION: CONVICTED

CHARGE

SEQUENCE NUMBER: 04
TRACKING NUMBER: 1391201003952
STATUTE NUMBER: 346.63(1)(B)
LITERAL: PROHIBITED ALCOHOL CONCENTRATION
COUNTS: 1
CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Dismissed

DISPOSITION DATE: February 23, 2011

DISPOSITION: DISMISSED

SENTENCING

DATE: February 23, 2011

CASE NUMBER: 402010CT002598

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 03

SENTENCE:

SENTENCE: Fine

COMMENTS: PAY \$350 FINE PLUS COSTS BY 05-25-13, PAYABLE AT \$50 PER MONTH COMMENCING BY 07-25-11. NON-PAY PENALTY IS 25 DAYS IN HOC.

SENTENCING

DATE: February 23, 2011

CASE NUMBER: 402010CT002598

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 03

SENTENCE:

SENTENCE: Jail

SENTENCE LENGTH: 65 days

SENTENCING

DATE: February 23, 2011

CASE NUMBER: 402010CT002598

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 03

SENTENCE:

SENTENCE: License Revoked

SENTENCE LENGTH: 15 months

SENTENCING

DATE: February 23, 2011

CASE NUMBER: 402010CT002598

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 03

SENTENCE:

SENTENCE: Ignition Interlock

SENTENCE LENGTH: 15 months

SENTENCING

DATE: February 23, 2011

CASE NUMBER: 402010CT002598

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 03

SENTENCE:

SENTENCE: Alcohol Assessment

SENTENCE LENGTH: Unknown

CONTRIBUTING AGENCIES

WI013035Y WI CIB Identification Section

WI0410100 Bayside Police Department

WI0416100 Milwaukee Co District Attorney

YOUR REQUEST:

User ID: 10562

Date & Time:

01/23/2014

15:31:33

State Ident Number: WI1305948

Purpose Code:

A



**Operator License Application
Village of Howard**

<input checked="" type="checkbox"/> New <input type="checkbox"/> Renewal	<input checked="" type="checkbox"/> Operator \$ 40.00 <input type="checkbox"/> Provisional \$ 15.00	<input type="checkbox"/> Duplicate License \$5.00
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

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- You may be called to appear before the Village Board if there are concerns about your criminal history as it relates to your application, or if it appears that you falsified or omitted information from your application. If you are asked to appear but choose not to do so, your application may be denied.

Last Name: <u>JOHNSON</u>		First Name: <u>ROXANNE</u>		Middle Name: <u>MARIE</u>				
Residence: Street Address: <u>1373 SHOREVIEW CT</u>		City: <u>HOWARD</u>		State: <u>WI</u>		Zip: <u>54313</u>		
Residence Phone: <u>920-217-8168</u>	Birthdate: [REDACTED]	Birth Place (City, State): <u>CRYSTAL FALLS ME</u>	Race: <u>W</u>	Sex: <u>F</u>	Height: <u>5'4"</u>	Weight: <u>140</u>	Hair: <u>BR</u>	Eyes: <u>BR</u>
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: <u>G.C.S. LINEVILLE</u>			Contact Person & Phone Number:			

Other Names, Aliases or Birthdates ever used: N/A

Cities & States lived in the past 10 years: <u>N/A</u>	From:	To:
--	-------	-----

Please check box below if you have lived at this address for 10 years or more: <input type="checkbox"/>	From:	To:
---	-------	-----

Indicate whether you are a U.S. Citizen, U.S. Alien or Temporary Resident:

U.S. Citizen Alien Temporary Resident (Employment Number _____)

Have you ever been convicted of a crime of manufacturing, distributing or delivering a controlled substance or controlled substance; possessing, with intent to manufacture, distribute or deliver, a controlled substance or under federal or any state law? (See Wis. Stats. 111.335(1)(cs).)List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Since your 17 th birthday, have you ever been convicted of a felony or misdemeanor (including criminal traffic offenses)? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
As a juvenile, were you ever waived into adult court and convicted of a felony or misdemeanor? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Have you even been convicted by military court-martial? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Are you currently subject to any pending charges? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

List all convictions, citations, tickets and pending charges:

MONTH/YEAR	LOCATION	CHARGE	DISPOSITION

The undersigned affirms that he/she made complete and true answers to each question and understands that his/her past record will become part of this application and that the applicant applying for an Operator License is a Wisconsin resident.

Roxanne Johnson
Applicant's Signature

1-23-14
Date

To be filled out by the Howard Police Department or Clerical Staff

Subject has no Criminal Arrest Record with either the Wisconsin State Crime Bureau

Files indicate that subject has the attached Criminal Arrest Record.

Lynn K. Kobus 1/23/2014
Authorized signature performing background check Date

HOWARD, WI VILLAGE
2456 Glendale Ave
PO Box 12207
Green Bay WI 4307--2207
(920)434-4640

Receipt # 26320 Dated: 1/23/14 Mail or Pick Up Date: _____

Transaction 26320.4737
01/23/2014 03:02pm
Lynn @ POSREGISTER1

perators License \$40.00
Roxanne Johnson - Operator License Fee

Receipt Total \$40.00

CC Payment \$40.00

VALIDATE ONLINE AT SERVINGALCOHOL.COM
CODE: 9CWVVB8XQMB



ONLINE TRAINING

SERVING ALCOHOL INC
UNITED STATES OF AMERICA
team@servingalcohol.com

CERTIFICATION

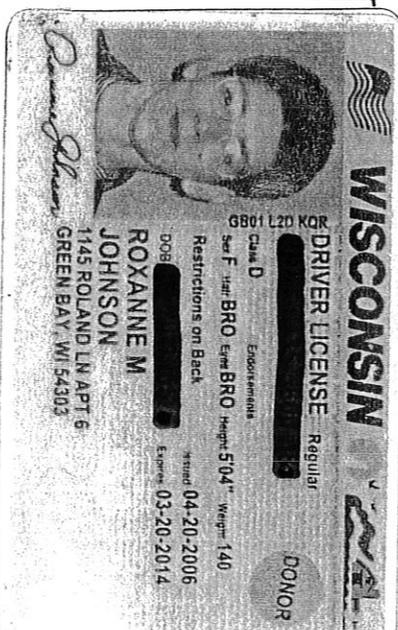
This certifies that

Roxanne Johnson

has completed the Serving Alcohol Inc. approved course
Wisconsin Alcohol Seller-Server

June 4, 2012

APPROVED BY THE STATE OF WISCONSIN SS-125.04
PROVIDER TRAINING IN COMPLIANCE WITH SS-134.66
STUDENT ACKNOWLEDGED UNDERSTANDING OF SS-134.88.
Restrictions on sale or gift of cigarettes or tobacco products; that state law prohibits selling tobacco products to any person under the age of 18; and failure to comply with these restrictions may result in a citation.



PERSONS COMPLETING THIS COURSE HAVE AGREED TO EXECUTE THE FOLLOWING POLICIES TO THE BEST OF THEIR ABILITIES:

- * CARD ANY PERSON 35 YEARS OF AGE OR YOUNGER
- * OBSERVE AND REPORT ANY CUSTOMER SHOWING SIGNS OF POSSIBLE IMPAIRED BEHAVIOR
- * RESPOND IMMEDIATELY TO ANY POSSIBLE PROBLEM SITUATIONS
- * DETERMINE THAT PEOPLE ENTERING THE PREMISES TO CONSUME ALCOHOL ARE OF LEGAL ALCOHOL DRINKING AGE AND RECORD THEM IF THERE IS ANY QUESTION AS TO THEIR AGE
- * ENSURE A PERSON MATCHES THEIR VALID LEGAL IDENTIFICATION

Order Number **3904092**

Click on a Type of Return link to view an individual's result. Manual Intervention results are normally available by the next business day.

Name	DOB	Type of Return
JOHNSON, ROXANNE M	02/10/1975	Manual Intervention

The response is based on a search using identification data supplied. Searches based solely on name and non-unique identifiers are not fully reliable. The CIB cannot guarantee that the information furnished pertains to the individual you are interested in.

Subject to 111.33 to 111.36, section 111.321 of the Wisconsin statutes prohibits acts of employment discrimination based on arrest and conviction records. Applicants should be notified of their right to challenge the accuracy and completeness of any information contained in a criminal record before any final determination is made. Challenges should be submitted to the Crime Information Bureau on form DJ-LE-247 and may include a request for fingerprint comparison.



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Village of Howard

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Last Name: KOEHLER		First Name: JUSTIN		Middle Name: MICHAEL				
Residence: Street Address: 2330 CEDAR RIDGE		City: GREEN BAY		State: WI		Zip: 54313		
Residence Phone: 920-544-2689	Birthdate: [REDACTED]	Birth Place (City, State): Appleton, WI	Race: W	Sex: M	Height: 6'0"	Weight: 200	Hair: Br.	Eyes: Br.
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: 1951/ROCK GARDEN			Contact Person & Phone Number: Marie Pankratz 405-1951			

Other Names, Aliases or Birthdates ever used: _____

Cities & States lived in the past 10 years: Appleton, WI Denver, CO	From: Born '07	To: Present '08
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Please check box below if you have lived at this address for 10 years or more:

Indicate whether you are a U.S. Citizen, U.S. Alien or Temporary Resident:

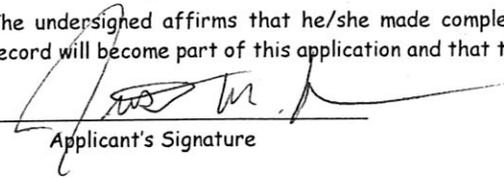
U.S. Citizen Alien Temporary Resident (Employment Number _____)

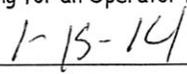
Have you ever been convicted of a crime of manufacturing, distributing or delivering a controlled substance or controlled substance; possessing, with intent to manufacture, distribute or deliver, a controlled substance or under federal or any state law? (See Wis. Stats. 111.335(1)(cs).) List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Since your 17 th birthday, have you ever been convicted of a felony or misdemeanor (including criminal traffic offenses)? List below: DUI Nov. 2007	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
As a juvenile, were you ever waived into adult court and convicted of a felony or misdemeanor? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Have you even been convicted by military court-martial? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Are you currently subject to any pending charges? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

List all convictions, citations, tickets and pending charges:

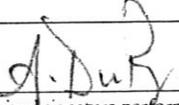
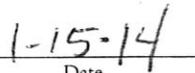
MONTH/YEAR	LOCATION	CHARGE	DISPOSITION
Nov 2007	outagamie County	DUI	

The undersigned affirms that he/she made complete and true answers to each question and understands that his/her past record will become part of this application and that the applicant applying for an Operator License is a Wisconsin resident.


 Applicant's Signature


 Date

To be filled out by the Howard Police Department or Clerical Staff

<input checked="" type="checkbox"/>	Subject has no Criminal Arrest Record with either the Wisconsin State Crime Bureau
<input type="checkbox"/>	Files indicate that subject has the attached Criminal Arrest Record.
 Authorized signature performing background check	 Date

Receipt # 25718 Dated: 1/15/14 Mail or Pick Up Date: _____



City of Green Bay Operator's License

Justin M Koehler

DOB: [REDACTED]

Expires: 6/30

13 14 15 16 17 18 19

WISCONSIN DRIVER LICENSE Regular

[REDACTED] DONOR

Class D Endorsements

Sex M Hair BRO Eyes BRO Height 6'-00" Weight 185

ISSUED [REDACTED] EXPIRES [REDACTED]

JUSTIN M KOEHLER
2332 CEDAR RDG
GREEN BAY, WI 54313-5772

0801 TOR DMP



Order Number **3893866**

Click on a Type of Return link to view an individual's result. Manual Intervention results are normally available by the next business day.

Name	DOB	Type of Return
KOEHLER, JUSTIN MICHAEL	[REDACTED]	No Criminal History

The response is based on a search using identification data supplied. Searches based solely on name and non-unique identifiers are not fully reliable. The CIB cannot guarantee that the information furnished pertains to the individual you are interested in.

Subject to 111.33 to 111.36, section 111.321 of the Wisconsin statutes prohibits acts of employment discrimination based on arrest and conviction records. Applicants should be notified of their right to challenge the accuracy and completeness of any information contained in a criminal record before any final determination is made. Challenges should be submitted to the Crime Information Bureau on form DJ-LE-247 and may include a request for fingerprint comparison.



Operator License Application
Village of Howard

<input checked="" type="checkbox"/> New <input type="checkbox"/> Renewal	<input checked="" type="checkbox"/> Operator \$ 40.00 <input type="checkbox"/> Provisional \$ 15.00	<input type="checkbox"/> Duplicate License \$5.00
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

Office Use Only:	License #	Provisional #
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Filling Out Your Application:

- An Operator License is a privilege, not a right. Any false answers or omissions may result in the denial of your application. This application must be filled out accurately and completely.
- If you have any doubt as to whether to include the facts of a specific incident, it is recommended that you disclose the information.
- If you are unsure about how to respond to any questions on this form, check with the Village Clerk for clarification. Your application will not be processed until you deal with any outstanding warrants.
- You can obtain information regarding your criminal history from the police department, the court with which you interacted, or the Wisconsin Circuit Court Access website at: www.wcca.wicourts.gov.

Review Of Your Application:

- The Howard Police Department (Brown County Sheriff) or our clerical staff will perform a background check to verify that the information you have provided is complete and accurate.
- You may be called to appear before the Village Board if there are concerns about your criminal history as it relates to your application, or if it appears that you falsified or omitted information from your application. If you are asked to appear but choose not to do so, your application may be denied.

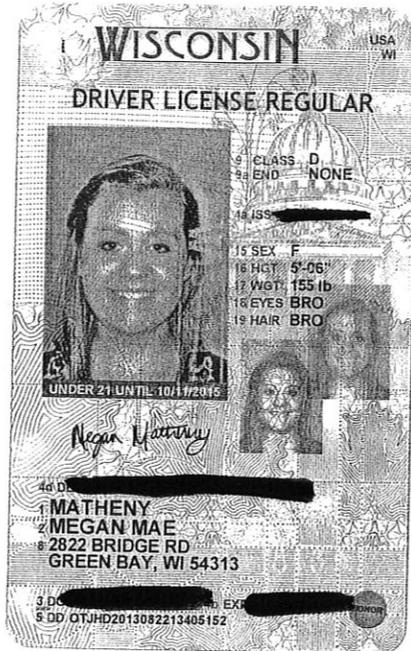
Last Name: <i>Matheny</i>		First Name: <i>Megan</i>		Middle Name: <i>Mae</i>	
Residence: Street Address: <i>2022 Bridge Rd</i>		City: <i>Green Bay</i>		State: <i>WI</i>	Zip: <i>54313</i>
Residence Phone: <i>920-619-7476</i>	Birthdate: [REDACTED]	Birth Place (City, State): <i>Kenosha WI</i>	Race: <i>W</i>	Sex: <i>F</i>	Height: <i>5'6"</i>
Weight: <i>150</i>	Hair: <i>B</i>	Eyes: <i>B</i>	Driver's License # (State & Number): [REDACTED]		
Establishment Where Employed: <i>Kwik Trip</i>			Contact Person & Phone Number: <i>Andy Mittag 920-434-2041</i>		

Cities & States lived in the past 10 years:	From:	To:

Please check box below if you have lived at this address for 10 years or more:	From:	To:
<input checked="" type="checkbox"/>		

Indicate whether you are a U.S. Citizen, U.S. Alien or Temporary Resident:

U.S. Citizen Alien Temporary Resident (Employment Number _____)



HOWARD, WI VILLAGE
2456 Glendale Ave
PO Box 12207
Green Bay WI 4307--2207
(920)434-4640

Transaction 26268.4735
01/22/2014 02:36pm
Annette @ POSREGISTER1

perators License \$40.00
Megan Mae Mahteny

Receipt Total \$40.00

Cash Payment \$40.00

WISCONSIN

SELLER / SERVER CERTIFICATION

Trainee Name: Megan Matheny

Date of Completion: 11/18/2012 14:59 CST

School Name: Learn2Serve

Certification #: WI 1991005

I, 

certify that the above named person
successfully completed an approved
Learn2Serve Seller/Server course.

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66

Corporate Headquarters
13801 N. Mopac, Suite 100
Austin, Texas 78727
P: 800-442-1149

Order Number **3902309**

Click on a Type of Return link to view an individual's result. Manual Intervention results are normally available by the next business day.

Name	DOB	Type of Return
MATHENY, MEGAN MAE	[REDACTED]	No Criminal History

The response is based on a search using identification data supplied. Searches based solely on name and non-unique identifiers are not fully reliable. The CIB cannot guarantee that the information furnished pertains to the individual you are interested in.

Subject to 111.33 to 111.36, section 111.321 of the Wisconsin statutes prohibits acts of employment discrimination based on arrest and conviction records. Applicants should be notified of their right to challenge the accuracy and completeness of any information contained in a criminal record before any final determination is made. Challenges should be submitted to the Crime Information Bureau on form DJ-LE-247 and may include a request for fingerprint comparison.



Operator License Application
Village of Howard

<input checked="" type="checkbox"/> New <input type="checkbox"/> Renewal	<input checked="" type="checkbox"/> Operator \$ 40.00 <input checked="" type="checkbox"/> Provisional \$ 15.00	<input type="checkbox"/> Duplicate License \$5.00
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

Office Use Only:	License #	Provisional #
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Filling Out Your Application:

- An Operator License is a privilege, not a right. Any false answers or omissions may result in the denial of your application. This application must be filled out accurately and completely.
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- If you are unsure about how to respond to any questions on this form, check with the Village Clerk for clarification. Your application will not be processed until you deal with any outstanding warrants.
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- You may be called to appear before the Village Board if there are concerns about your criminal history as it relates to your application, or if it appears that you falsified or omitted information from your application. If you are asked to appear but choose not to do so, your application may be denied.

Last Name: Rabitoy	First Name: Jami	Middle Name: Jo
---------------------------	-------------------------	------------------------

Residence: Street Address: 1119 Riverside Drive	City: Swamico	State: WI	Zip: 54173
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Residence Phone: (920) 445-9698	Birthdate: [REDACTED]	Birth Place (City, State): Escambia, MI	Race: W	Sex: F	Height: 4'11"	Weight: 90	Hair: Brown	Eyes: Brown
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Driver's License # (State & Number)	Establishment Where Employed: Grand Central Station	Contact Person & Phone Number: Susan Helbein-920-583-7900
-------------------------------------	--	--

Other Names, Aliases or Birthdates ever used:

Cities & States lived in the past 10 years:	From:	To:
Oconto WI	2002	2012
Swamico WI	2012	2014

Please check box below if you have lived at this address for 10 years or more:	From:	To:
<input type="checkbox"/>		

Indicate whether you are a U.S. Citizen, U.S. Alien or Temporary Resident:

U.S. Citizen Alien Temporary Resident (Employment Number _____)

Have you ever been convicted of a crime of manufacturing, distributing or delivering a controlled substance or controlled substance; possessing, with intent to manufacture, distribute or deliver, a controlled substance or under federal or any state law? (See Wis. Stats. 111.335(1)(cs).)List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Since your 17 th birthday, have you ever been convicted of a felony or misdemeanor (including criminal traffic offenses)? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
As a juvenile, were you ever waived into adult court and convicted of a felony or misdemeanor? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Have you even been convicted by military court-martial? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Are you currently subject to any pending charges? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

List all convictions, citations, tickets and pending charges:

MONTH/YEAR	LOCATION	CHARGE	DISPOSITION

The undersigned affirms that he/she made complete and true answers to each question and understands that his/her past record will become part of this application and that the applicant applying for an Operator License is a Wisconsin resident.

Jami Lettler
Applicant's Signature

1/15/14
Date

To be filled out by the Howard Police Department or Clerical Staff

<input checked="" type="checkbox"/>	Subject has no Criminal Arrest Record with either the Wisconsin State Crime Bureau
<input type="checkbox"/>	Files indicate that subject has the attached Criminal Arrest Record.

A. Dury
Authorized signature performing background check

1/22/14
Date

Receipt # 25754 Dated: 1/15/14 Mail or Pick Up Date: _____

WISCONSIN

SELLER / SERVER CERTIFICATION

Trainee Name: jami rabitoy

Date of Completion: 01/08/2014

School Name: 360training.com, Inc.

Certification #

I, 

certify that the above named person
successfully completed an approved
Learn2Serve Seller/Server course.

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66



Corporate Headquarters

13901 Burnet Rd., Suite 100

Austin, Texas 78727

P: 800-442-1149

