

402

APPLICATION FOR TEMPORARY CLASS "B"/"CLASS B" RETAILER'S LICENSE

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

FEE \$ 10.00

Application Date: 6-13-13

Town Village City of HOWARD County of BROWN

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

- A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.
- A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning July 13 and ending July 14, 2013 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

1. ORGANIZATION (check appropriate box) Bona fide Club Church Lodge/Society Veteran's Organization Fair Association

(a) Name St. JOHN THE BAPTIST CATHOLIC CHURCH (HOWARD)

(b) Address 2597 GLENDALE AVE GREEN BAY WI 54313
(Street) Town Village City

(c) Date organized _____

(d) If corporation, give date of incorporation JAN 11, 1884

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

(f) Names and addresses of all officers:

President FR. JOHN BERGSTAAT 2597 GLENDALE AVE GREEN BAY WI 54313

Vice President DEACON MANNY TORRES 2597 GLENDALE AVE GREEN BAY WI 54313

Secretary _____

Treasurer _____

(g) Name and address of manager or person in charge of affair: LEU RIZZO
2597 GLENDALE AVE GREEN BAY WI 54313

2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:

(a) Street number 2597 GLENDALE AVE

(b) Lot LOT 1 OF 54 CSM 244 Block _____

(c) Do premises occupy all or part of building? ACTIVITY CENTER CHURCH COMMONS

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover: CHURCH COMMONS NORTH SIDE OF ACTIVITY CENTER WEST END OF SCHOOL AND WEST PARKING LOT.

3. NAME OF EVENT

(a) List name of the event ST JOHN'S PARISH PICNIC

(b) Dates of event JULY 13 + 14, 2013

DECLARATION

The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.

ST JOHN THE BAPTIST PARISH (HOWARD)
(Name of Organization)

Officer Rev. John P. Bergstaad
(Signature/date)

Officer _____
(Signature/date)

Officer Deacon Manny Torres 6/13/13
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk REC'D JUN 13 2013

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____