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**Operator License Application**  
**Village of Howard**

<input type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$ 5.00
<input type="checkbox"/> Renewal	<input checked="" 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](http://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: <u>Deno</u>		First Name: <u>Michaela</u>		Middle Name: <u>Jo</u>	
Residence: Street/Address: <u>2523 Telluride Trail</u>		City: <u>Green Bay</u>		State: <u>WI</u>	
Residence Phone: <u>920-327-1257</u>		Birthdate: <u>B</u>		Zip: <u>54313</u>	
Birthdate: <u>B</u>		Birth Place (City, State): <u>Green Bay WI</u>		Race: <u>W</u>	
Driver's License # (State & Number): <u>[REDACTED]</u>		Establishment Where Employed: <u>Hideout</u>		Sex: <u>F</u>	
				Height: <u>5'4"</u>	
				Weight: <u>170</u>	
				Hair: <u>B</u>	
				Eyes: <u>B</u>	
				Contact Person & Phone Number: <u>isa miller 920-265-8673</u>	

Other Names, Aliases or Birthdates ever used:

Cities & States lived in the past 10 years: <u>Fond du lac, WI</u>	From: <u>2003</u>	To: <u>2007</u>
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Please check box below if you have lived at this address for 10 years or more: <input type="checkbox"/>	From:	To:
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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 <sup>th</sup> 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.

Michaela J.P.  
Applicant's Signature

1-16-2013  
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.

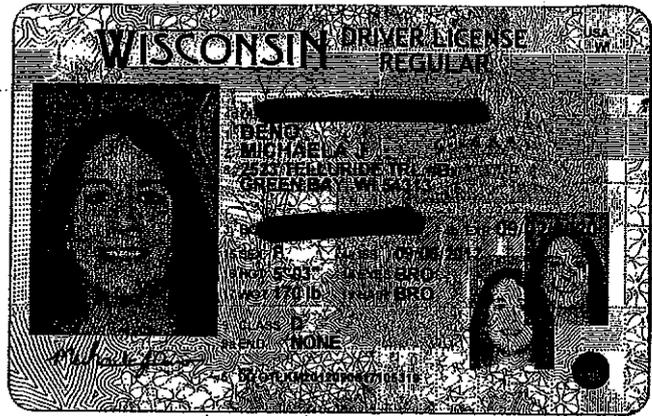
Lynn K. Kobus

1/24/2013

Authorized signature performing background check

Date

Receipt # 28139 Dated: 1/16/13 Mail or Pick Up Date: \_\_\_\_\_



**WISCONSIN  
TECHNICAL COLLEGE  
SYSTEM**

**Responsible Beverage Service Course Completion Certificate**

Michaela Deno  
Name of student

Has successfully completed the responsible beverage service course which complies with Wisconsin Statutes 125.17(6) and 134.66(2m) related to retail tobacco sales.

Date of course completion 12-24-12  
Name of instructor Doug Heitman  
Wisconsin Technical College issuing certificate Northeast Wisconsin Technical College

Daniel Wang  
Wisconsin Technical College System President

[Signature]  
Northeast Wisconsin Technical College President

5684BIT jk 1.09

**HOWARD, WI VILLAGE**

2456 Glendale Ave  
PO Box 12207  
Green Bay WI 4307--2207  
920-434-4642  
Transaction 28139.4480  
16-Jan-13 01:25pm

Operators License \$40.00  
Michaela Jo Deno

Subtotal \$40.00  
CC \$40.00

**DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU**

**Request Date : 01/23/2013**  
**Report Date : 01/23/2013**  
**Order Number : 3482896**  
**Request Reason : Government**

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

<b>Name</b>	<b>MICHAELA J DENO</b>
<b>Date of Birth</b>	<b>[REDACTED]</b>
<b>Sex</b>	<b>F</b>
<b>Race</b>	<b>W</b>

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The response is based on a search using the 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.

**NO CRIMINAL HISTORY FOUND.**

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## 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: _____		
<b>Office Use Only:</b> License # _____		Provisional # _____
<b>Filling Out Your Application:</b> <ul style="list-style-type: none"> <li>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.</li> <li>If you have any doubt as to whether to include the facts of a specific incident, it is recommended that you disclose the information.</li> <li>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.</li> <li>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: <a href="http://www.wcca.wicourts.gov">www.wcca.wicourts.gov</a>.</li> </ul>		
<b>Review Of Your Application:</b> <ul style="list-style-type: none"> <li>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.</li> <li>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.</li> </ul>		
Last Name: <b>Riendl</b>		First Name: <b>Michael</b>
		Middle Name: <b>Thomas</b>
Residence: Street Address: <b>1545 Hillcrest Hts</b>		City: <b>Green Bay</b>
		State: <b>WI</b>
		Zip: <b>54313</b>
Residence Phone: <b>920 544 5433</b>	Birthdate: [REDACTED]	Birth Place (City, State): <b>Vernon WI</b>
		Race: <b>W</b>
		Sex: <b>M</b>
		Height: <b>6'2"</b>
		Weight: <b>240</b>
		Hair: <b>Br</b>
		Eyes: <b>Bl</b>
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: <b>Kwik Trip</b>
		Contact Person & Phone Number: <b>Andy 4134-2041</b>
Other Names, Aliases or Birthdates ever used:		
Cities & States lived in the past 10 years:		
<b>ONalaska WI</b>		From: <b>2004</b>
<b>West Salem WI</b>		To: <b>2006</b>
		<b>1990</b>
		<b>2004</b>
Please check box below if you have lived at this address for 10 years or more:		From:
<input type="checkbox"/>		To:
Indicate whether you are a U.S. Citizen, U.S. Alien or Temporary Resident:		
<input checked="" type="checkbox"/> U.S. Citizen <input type="checkbox"/> Alien <input type="checkbox"/> 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
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**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.

Michael Rendell  
Applicant's Signature

1/18/13  
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
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Lynn K. Kobus  
Authorized signature performing background check

1/24/2013  
Date

Receipt # 28289 Dated: 1/18/13 Mail or Pick Up Date: \_\_\_\_\_

# WISCONSIN

# SELLER / SERVER CERTIFICATION

Trainee Name: Michael T Riendl

Date of Completion: 01/18/2013 11:58 CST

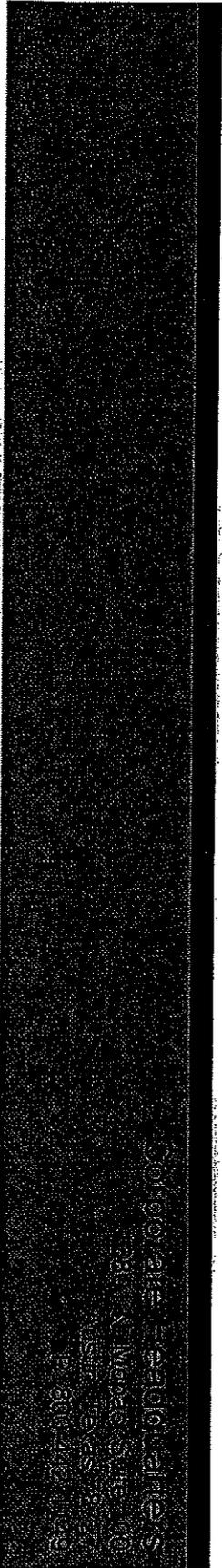
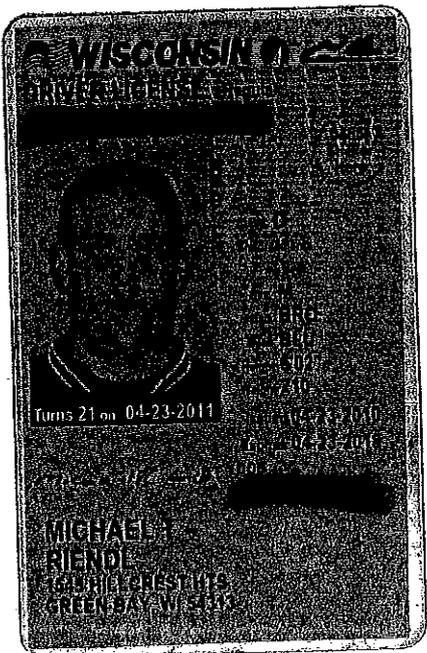
School Name: Learn2Serve

Certification #: WI 2021215

I, Michael T Riendl

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

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66



**DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU**

Request Date : 01/23/2013

Report Date : 01/23/2013

Order Number : 3482896

Request Reason : Government

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

<b>Name</b>	<b>MICHAEL T RIENDL</b>
<b>Date of Birth</b>	<b>[REDACTED]</b>
<b>Sex</b>	<b>M</b>
<b>Race</b>	<b>W</b>

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**NO CRIMINAL HISTORY FOUND.**

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Last Name: <b>RINN</b>		First Name: <b>AURIEL</b>		Middle Name: <b>Lee Ann</b>				
Residence: Street Address: <b>1470 Redstone Trl</b>		City: <b>Green Bay</b>		State: <b>WI</b>		Zip: <b>54304</b>		
Residence Phone: <b>920 660 4416</b>	Birthdate: [REDACTED]	Birth Place (City, State): <b>Green Bay WI</b>	Race: <b>W</b>	Sex: <b>F</b>	Height: <b>5'7"</b>	Weight: <b>145</b>	Hair: <b>BR</b>	Eyes: <b>BR</b>
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: <b>KWIK TRIP</b>			Contact Person & Phone Number: <b>Andy 434 2041</b>			

Other Names, Aliases or Birthdates ever used:  
—

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 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
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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.

[Signature]  
Applicant's Signature

1/11/13  
Date

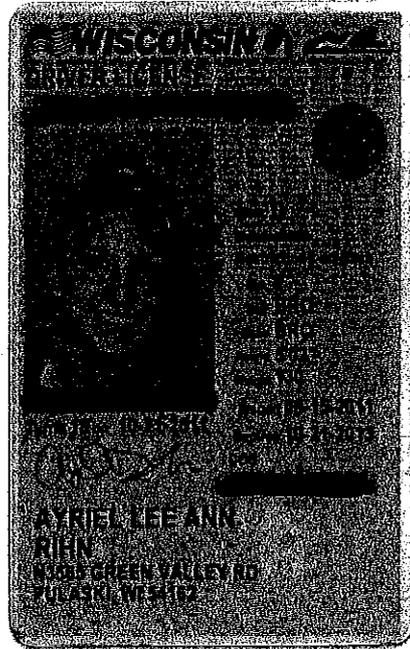
**To be filled out by the Howard Police Department or Clerical Staff**

<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.

[Signature]  
Authorized signature performing background check

1/24/2013  
Date

Receipt # 27941 Dated: 1/11/13 Mail or Pick Up Date: \_\_\_\_\_



**WISCONSIN  
TECHNICAL COLLEGE  
SYSTEM**

**Responsible Beverage Service Course Completion Certificate**

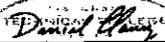
Ayriel Rihm  
Name of student

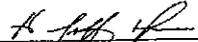
Has successfully completed the responsible beverage service course which complies with Wisconsin Statutes 129.17(6) and 134.66(2m) related to retail tobacco sales.

Date of course completion 6-14-14

Name of instructor Doug Petersen

Wisconsin Technical College issuing certificate Northeast Wisconsin Technical College

  
Wisconsin Technical College System President

  
Northeast Wisconsin Technical College President

906081T be 01\_2012

**DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU****Request Date : 01/23/2013****Report Date : 01/23/2013****Order Number : 3482896****Request Reason : Government**

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

<b>Name</b>	<b>AYRIEL LEE ANN RIHN</b>
<b>Date of Birth</b>	<b>[REDACTED]</b>
<b>Sex</b>	<b>F</b>
<b>Race</b>	<b>W</b>

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The response is based on a search using the 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.

**NO CRIMINAL HISTORY FOUND.**

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