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REC'D SEP 28 2012



**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 checked="" 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 #

**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: <b>Krajewski</b>		First Name: <b>Kortney</b>		Middle Name: <b>Anne</b>	
Residence: Street Address: <b>8913 McLaughlin Ave</b>		City: <b>Little Sycamore</b>	State: <b>WI</b>	Zip: <b>54141</b>	
Residence Phone: <b>920 606 6088</b>	Birthdate: [REDACTED]	Birth Place (City, State): <b>Milwaukee, WI</b>	Race: <b>W</b>	Sex: <b>F</b>	Height: <b>5'1"</b>
Driver's License # (State & Number): [REDACTED]	Establishment Where Employed: <b>Shedko Express</b>		Contact Person & Phone Number: <b>BUD LOREN</b>		

Other Names, Aliases or Birthdates ever used:

Cities & States lived in the past 10 years, including where you now reside (must reside in Wisconsin for at least the past 90 days to be eligible for this license):	From:	To:
<b>Little Sycamore, WI</b>	<b>August 2005</b>	<b>Present</b>
<b>Maple, WI</b>	<b>August 1999</b>	<b>August 2005</b>
<b>Milwaukee, WI</b>	<b>May 1992</b>	<b>August 1999</b>

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

U.S. Citizen     Alien     Temporary Resident (Employment Number \_\_\_\_\_)



**SERVER**license.com

# Wisconsin Responsible Beverage Server Training

## Kortney Krajewski

has met all training requirements and successfully completed the above course and/or exam.

Certification Number: 34933

Date of Completion: 06/30/2011

  
Authorized Signature

ServerLicense.com is approved by the Wisconsin Department of Revenue and fully complies with statutes 125.04 and 125.17. Present this certificate to your local municipal clerk's office to receive your Operator's or Retail license.

Diversys Learning, Inc.  
1101 Arrow Point Drive, Suite 302  
Cedar Park, TX 78613

No. 2011-148

Issued to: Kortney Anne  
Krajewski

(Village - Town - City) of

Howard

7/22/11  
MAILED  
TO SHOPS  
TO EXPRESS

For the period ending:

Date June 30, 2012

LK

ABT-8 WS

Clerk

**WISCONSIN**  
**DRIVER LICENSE - Probationary**



**Class: D**  
**Endorsements:**  
**Sex: F**  
**Hair: BLD**  
**Eyes: HAZ**  
**Height: 5'01"**  
**Weight: 134**  
**Issued: 06-29-2011**  
**Expires: 05-05-2014**  
**DOB: [REDACTED]**

**KORTNEY ANNE  
 KRAJEWSKI**  
 893 MOURNING DOVE RD  
 LITTLE SUAMICO, WI 54141

**DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU****10/05/2012****Order Number : 3377131**

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

<b>Name</b>	<b>KORTNEY ANNE KRAJEWSKI</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 type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$5.00
<input checked="" 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:**

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- If you have any doubt as to whether to include the facts of a specific incident, it is recommended that you disclose the information.
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- 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>Muska</u>		First Name: <u>Melissa</u>		Middle Name: <u>Marie</u>				
Residence: Street Address: <u>1620 St Agnes St</u>		City: <u>Green Bay</u>		State: <u>WI</u>		Zip: <u>54304</u>		
Residence Phone: <u>920-660-9577</u>	Birthdate: _____	Birth Place (City, State): <u>WI</u>	Race: <u>W</u>	Sex: <u>R</u>	Height: <u>5'1"</u>	Weight: <u>130</u>	Hair: <u>BR</u>	Eyes: <u>BR</u>
Driver's License # (State & Number): <u>[REDACTED]</u>		Establishment Where Employed: <u>Chasers Bar &amp; Grill</u>			Contact Person & Phone Number: <u>DAVE 920-661-4060</u>			

Other Names, Aliases or Birthdates ever used: \_\_\_\_\_

Cities & States lived in the past 10 years:	From:	To:
<u>Green Bay</u>		

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 <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
NONE			

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.

Mel M. Munn  
Applicant's Signature

9-21-12  
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. Kobsue 10/5/12  
Authorized signature performing background check Date

Receipt # 22788 Dated: 9/10/12 Mail or Pick Up Date: \_\_\_\_\_

OPERATOR'S LICENSE

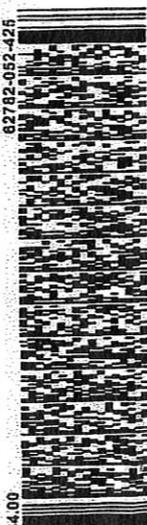
No. 2010-172 \$ 40-

WHEREAS, The local governing body of the [Village - ~~Town~~ City] of Howard, County of Suwon, Wisconsin, has upon application duly made, granted and authorized the issuance of an "Operator's License" to Melissa Marie Muska

AND WHEREAS, the said applicant has paid to the treasurer the sum of \$ 40- as required by local ordinances and has complied with all requirements necessary for obtaining a license. Now therefore, an Operator's License, pursuant to Section 125.32(2) and 125.68(2) of the Wisconsin Statutes, and local ordinances, is hereby issued to said applicant.

For the period ending June 30, 2012 Date  
Annelle L. Dury deputy Clerk  
ABT-S WS

82782-052-425



\$4.00

CLASS: D - Non-Commercial Vehicles  
RESTRICTIONS: Corrective lenses

001434064

001434064

Anatomical Gift Statement - Upon my death, I wish to donate:  
 All organs, tissues or eyes.  I refuse to make an anatomical gift.  
 Except: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

WISCONSIN DRIVER LICENSE Regular

Melissa M Muska

Class D  
 Endorsements  
 Restrictions on Back  
 Sex F  
 Hair BRO  
 Eyes BRO  
 Height 5'02"  
 Weight 130  
 Issued 08-30-2006  
 Expires 11-02-2013

DUPLICATE  
**MELISSA M MUSKA**  
 15716 COUNTY HWY EE  
 CORNELL, WI 54732

**DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU**

10/05/2012

Order Number : 3377131

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

Name	MELISSA M MUSKA
Date of Birth	[REDACTED]
Sex	F
Race	W

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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 type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$5.00
<input checked="" 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 # <u>2012-055</u>

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**Review Of Your Application:**

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Last Name: <u>Rabideau</u>		First Name: <u>Susan</u>		Middle Name: <u>Mae</u>	
Residence: Street Address: <u>3094 Open Gate Trl</u>		City: <u>Green Bay</u>		State: <u>WI</u>	Zip: <u>54313</u>
Residence Phone: <u>920-362-5404</u>	Birthdate: <u>[REDACTED]</u>	Birth Place (City, State): <u>Marinette WI</u>	Race: <u>W</u>	Sex: <u>F</u>	Height: <u>5'6</u>
		Weight: <u>125</u>	Hair: <u>Brn</u>	Eyes: <u>Brn</u>	
Driver's License # (State & Number): <u>[REDACTED]</u>		Establishment Where Employed: <u>CVS Pharmacy</u>		Contact Person & Phone Number: <u>Cheryl Allen 920-434-3954</u>	

Other Names, Aliases or Birthdates ever used: NA

Cities & States lived in the past 10 years: <u>Green Bay WI</u>	From: <u>1959</u>	To: <u>present</u>
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Please check box below if you have lived at this address for 10 years or more: <input checked="" type="checkbox"/>	From: <u>5-1988</u>	To: <u>present</u>
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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 \_\_\_\_\_)



**WISCONSIN DRIVER LICENSE**  
REGULAR

DID: [REDACTED]

Issued: 10-19-04 Expires: 12-02-12

Class	Endorsements	Restrictions
D	None	None

Sex: F Hair: BRO Eyes: BRO Height: 5'06" Weight: 125

SUSAN M RABIDEAU  
3094 OPEN GATE TRL  
GREEN BAY WI 54313

*Susan M Rabideau*

DONOR



**OPERATOR'S LICENSE**

No. 2010-232 \$ 40.00

WHEREAS, The local governing body of the [Village - Town - City] of Howard, County of Brown, Wisconsin, has upon application duly made, granted and authorized the issuance of an "Operator's License" to Susan M. Rabideau

AND WHEREAS, the said applicant has paid to the treasurer the sum of \$ 40.00 as required by local ordinances and has complied with all requirements necessary for obtaining a license. Now therefore, an Operator's License, pursuant to Section 125.32(2) and 125.68(2) of the Wisconsin Statutes, and local ordinances, is hereby issued to said applicant.

For the period ending June 30, 2012  
Date

Lynn K. Kobus Deputy Clerk  
ABT-8 WS

## DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

10/05/2012

Order Number : 3377131

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

Name	SUSAN M RABIDEAU
Date of Birth	[REDACTED]
Sex	F
Race	W

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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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# PROVISIONAL OPERATORS LICENSE

NO. 2012-055

\$ 15.00

**WHEREAS**, The local governing body of the         Village         of         Howard         County of         Brown        , Wisconsin, has, upon application duly made and authorized the issuance of a Provisional Operators License to         Susan M Rabideau         AND WHEREAS, the said applicant has paid to the treasurer the sum of \$ 15.00 as required by local ordinance and has complied with all requirements necessary for obtaining a license:

**NOW THEREFORE**, A Provisional Operators License, pursuant to Section 125.17(5) of the Wisconsin Statutes, and local ordinances, is hereby issued to said applicant.

For the period ending November 28, 2012 or when an Operators License is issued to the holder.



Given under my hand and the corporate seal of the  
        Village         of         Howard          
County of         Brown        , State of Wisconsin  
This 28<sup>th</sup> day of September, 2012

Deputy Clerk

*Lynn K. Kobus*





**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 checked="" type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00	
<input checked="" type="checkbox"/> 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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- 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:**

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Last Name: Wanner	First Name: Debra	Middle Name: A.
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Residence: Street Address: 3866 Shawano Ave	City: Green Bay	State: WI	Zip: 54313
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Residence Phone: 920-434-3557	Birthdate: [REDACTED]	Birth Place (City, State): Green Bay, WI	Race: W	Sex: F	Height: 5'2"	Weight: 195 lbs	Hair: B	Eyes: Brown
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Driver's License # (State & Number): [REDACTED]	Establishment Where Employed: Boehmer's Bar	Contact Person & Phone Number: Eric Boehm 265-6395
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Other Names, Aliases or Birthdates ever used:  
N/A

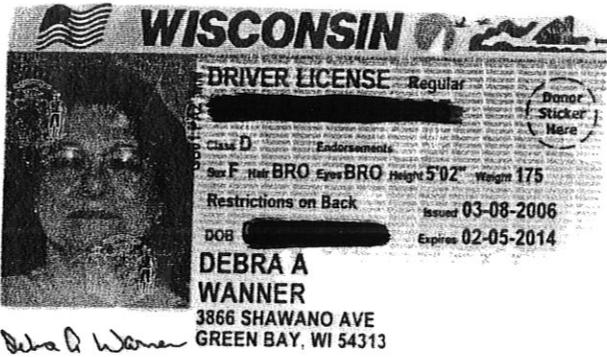
Cities & States lived in the past 10 years: Green Bay, WI	From: All my life	To:
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Please check box below if you have lived at this address for 10 years or more: <input checked="" type="checkbox"/>	From:	To:
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Indicate whether you are a U.S. Citizen, U.S. Alien or Temporary Resident:

U.S. Citizen     Alien     Temporary Resident (Employment Number \_\_\_\_\_)





**OPERATOR'S LICENSE**

No. 210-178 \$ 40-

WHEREAS, The local governing body of the [Village - Town - City] of Howard, County of Brown, Wisconsin, has upon application duly made, granted and authorized the issuance of an "Operator's License" to Debra Ann Wanner

AND WHEREAS, the said applicant has paid to the treasurer the sum of \$ 40- as required by local ordinances and has complied with all requirements necessary for obtaining a license. Now therefore, an Operator's License, pursuant to Section 125.32(2) and 125.68(2) of the Wisconsin Statutes, and local ordinances, is hereby issued to said applicant.

For the period ending June 30, 2012 Date

Shirley L. Daily Clerk  
ABT-8 WS

**HOWARD, WI VILLAGE**  
2456 Glendale Ave  
PO Box 12207  
Green Bay WI 4307--2207  
920-434-4642  
Transaction 23714.4410  
27-Sep-12 02:19pm

Operators License \$40.00  
Debra A Wanner - Operator License Renewal

Subtotal \$40.00  
CC \$40.00

**DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU**

10/05/2012

Order Number : 3377131

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

Name	DEBRA A WANNER
Date of Birth	[REDACTED]
Sex	F
Race	W

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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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