

5g

Aug 13

REC'D AUG 07 2012

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.-

Application Date: 7-19-12

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 8-25-12 ^{Noon} and ending 8-25-12 ^{9pm} 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 Ben Syres
- (b) Address 1545 Meadow Wood Ct Green Bay WI 54313
(Street) Town Village City
- (c) Date organized Aug 25
- (d) If corporation, give date of incorporation _____
- (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 Ben Syres 1545 Meadow Wood Ct - GB WI 54313
 Vice President Brad Deernbach 2704 Sunray Ln. GB 54313
 Secretary _____
 Treasurer _____
- (g) Name and address of manager or person in charge of affair: President

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

- (a) Street number 2317 Glendale Ave
- (b) Lot _____ Block 2300
- (c) Do premises occupy all or part of building? All
- (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: All grass covered areas on 2317 Glendale Ave

3. NAME OF EVENT

- (a) List name of the event Milk Bottle Shoot Out
- (b) Dates of event Aug 26

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.

Officer [Signature]
(Signature/date)

National Softball Club
(Name of Organization)
Officer _____
(Signature/date)

Officer _____
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____