

51



**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 #
----------------------------	---------------

**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: Anderson		First Name: Lacey		Middle Name: Elizabeth			
Residence: Street Address: N 3934 Shamrock Cir		City: Freedom		State: WI		Zip: 54913	
Residence Phone: 920-660-3724		Birthdate: [REDACTED]		Birth Place (City, State): Green Bay, WI		Race: W	
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: Rock Garden		Contact Person & Phone Number: Dorothy Wolf			

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

Cities & States lived in the past 10 years:		From:	To:
Green Bay, WI		2003	2006
Wrightstown, WI		2006	2011

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 \_\_\_\_\_)

0497-4701 ex 401

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.

Jacey Anderson  
Applicant's Signature

12/26/13  
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  
Authorized signature performing background check

1/8/2014  
Date

Receipt # 25154 Dated: 1/2/2014 Mail or Pick Up Date: \_\_\_\_\_

**WISCONSIN**

**DRIVER LICENSE Regular**

**Class D** **Exemptible**

**Sex F Hair BRN Eyes BLU Height 5-04" Weight 120**

**Restrictions on Back** **Issued 12-14-2011**

**DOB 12-16-1984 Expires 12-16-2019**

**LACEY E ANDERSON**  
395 LONGWOOD LN  
WRIGHTSTOWN, WI 54180

*Lacey Anderson*

Thursday, 26 December 2013, 12:11 PM



**servinalcohol.com**  
**Certificates for Lacey Anderson**

<b>Date Received</b>	<b>Course</b>	<b>Grade</b>	<b>Code</b>
December 26, 2013	Wisconsin Alcohol Seller-Server	N/A	Rlwm9pUyJs



VALIDATE ONLINE AT SERVINGALCOHOL.COM

CODE: RLWM9PUYJS

ONLINE TRAINING

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



*Lacey Anderson*

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

December 26, 2013

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

**DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU****Request Date : 01/08/2014****Report Date : 01/08/2014****Order Number : 3886660****Request Reason : Government**

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

<b>Name</b>	<b>LACEY E ANDERSON</b>
<b>Date of Birth</b>	<b>[REDACTED]</b>
<b>Sex</b>	<b>F</b>
<b>Race</b>	<b>W</b>

---

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.**

---

---



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 #
------------------	-----------	---------------

**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: <i>Crabb</i>		First Name: <i>Soshua</i>		Middle Name: <i>Alan</i>				
Residence: Street Address: <i>616 1st St.</i>		City: <i>Kewaunee</i>		State: <i>WI</i>		Zip: <i>54216</i>		
Residence Phone: <i>920 536-0614</i>	Birthdate: [REDACTED]	Birth Place (City, State): <i>Green Bay, WI</i>	Race: <i>white</i>	Sex: <i>M</i>	Height: <i>6'1"</i>	Weight: <i>175</i>	Hair: <i>Brown</i>	Eyes: <i>Blue</i>
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: <i>Avenue Bar</i>			Contact Person & Phone Number:			

Other Names, Aliases or Birthdates ever used:

Cities & States lived in the past 10 years: <i>Kewaunee, WI</i> <i>Kadena Air Base, Okinawa, Japan</i>	From: <i>Jan 2006</i>	To: <i>July 2009</i>
--	--------------------------	-------------------------

Please check box below if you have lived at this address for 10 years or more: <input checked="" type="checkbox"/>	From: <i>1991</i> <i>2009</i>	To: <i>2006</i> <i>2013</i>
---	-------------------------------------	-----------------------------------

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

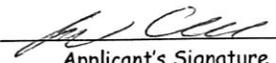
U.S. Citizen     Alien     Temporary Resident (Employment Number \_\_\_\_\_)

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: <i>Indecent liberties w/a minor</i> <i>OWF</i>	<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: <i>Indecent liberties w/a minor</i> <i>General under honorable</i>	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Are you currently subject to any pending charges? List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

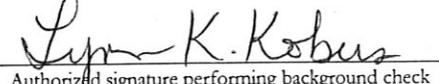
**List all convictions, citations, tickets and pending charges:**

MONTH/YEAR	LOCATION	CHARGE	DISPOSITION
May 2009	Kadena AB, Okinawa Japan	Indecent liberties w/a minor operating while suspended	Loss of rank, 45 days confinement, + discharge
March 2011	Sturgeon Bay, WI	Suspended	Fine
March 2012	Kewaunee, WI	OWF	Fine + loss of license + interlock
Dec 2010	Kewaunee, WI	Leaving scene of accident	Fine

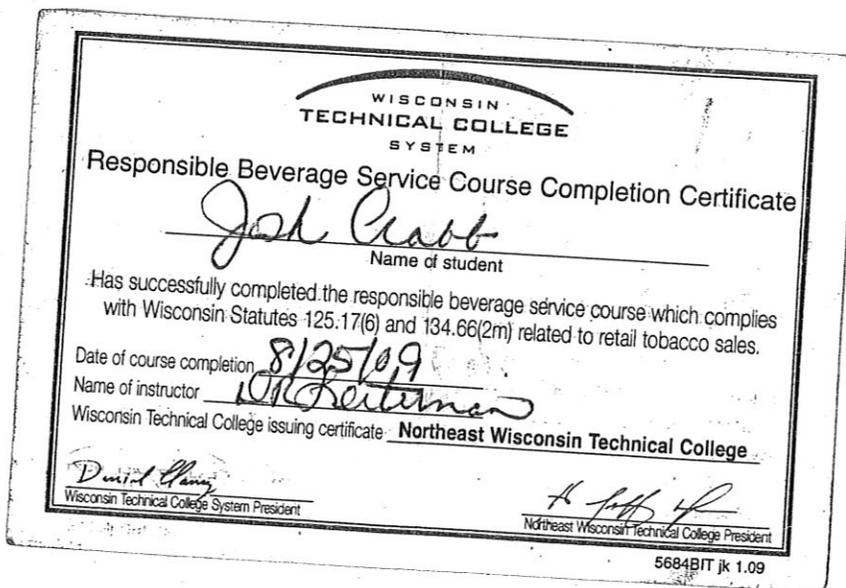
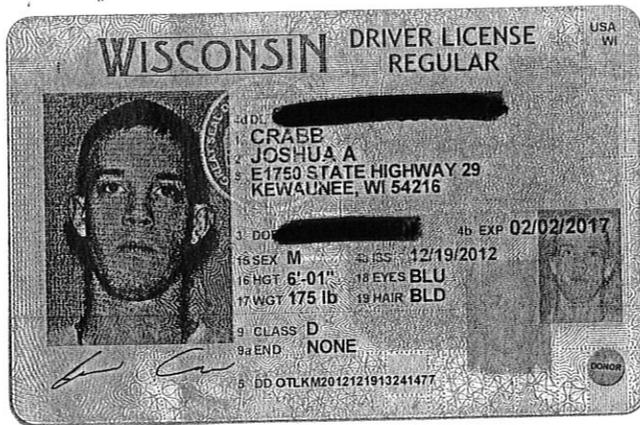
The undersigned affirms that he/she made complete and true answers to each question and understands that his/her past record will become part of this application and that the applicant applying for an Operator License is a Wisconsin resident.


6 Dec 2013  
 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 checked="" type="checkbox"/>	Files indicate that subject has the attached Criminal Arrest Record.
	<u>12/19/2013</u> Date
Authorized signature performing background check	

Receipt # 42036 Dated: 12/6/13 Mail or Pick Up Date: \_\_\_\_\_



**HOWARD, WI VILLAGE**  
 2456 Glendale Ave  
 PO Box 12207  
 Green Bay WI 54307--2207  
 920-434-4642  
 Transaction 42036.4707  
 06-Dec-13 02:33pm

Operators License \$40.00  
 Joshua Alan Crabb \$40.00  
 Subtotal \$40.00  
 Cash \$40.00

5684BIT jk 1.09

## DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

Request Date : 12/06/2013  
Report Date : 12/06/2013  
Order Number : 3862672  
Request Reason : Government

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

<b>Name</b>	<b>JOSHUA A CRABB</b>
<b>Date of Birth</b>	<b>[REDACTED]</b>
<b>Sex</b>	<b>M</b>
<b>Race</b>	<b>W</b>

---

**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:

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 applicant 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.

**Wisconsin Criminal History**  
**RECORD LAST UPDATED: 02/13/2013**

Identification      Criminal History      Contributing Agencies      Your Request

---

**IDENTIFICATION****JOSHUA ALAN CRABB**

Male / White

Born in Wisconsin ; Citizen of USA

██████████  
 6'01" 175lbs Blue Eyes ; Blonde Or Strawberry Hair  
 E1750 Sth 29, Kewaunee, WI 54216 as of 03/18/2012

**CAUTION: REGISTERED SEX OFFENDER****Registered Sex Offender reported by Wisconsin**

FBI: Unknown

STATE ID: WI1360669

EMPLOYER: Kewaunee Bowl

OCCUPATION: Unknown

Unknown, Unknown, XX

OFFENDER NOTICE: Registered Sex Offender

PHOTO INFORMATION:

WI013035Y WI CIB Identification Section

**CRIMINAL HISTORY****Cycle 1**

EARLIEST EVENT DATE: March 18, 2012

ARREST TRACKING NUMBER: 31001000033721

DATE OF OFFENSE: March 18, 2012

**ARREST DATA**

**SUBJECT NAME:** JOSHUA ALAN CRABB  
**TYPE:** Adult Only  
**DATE:** March 18, 2012  
**CASE NUMBER:** J12-0240  
**ARREST AGENCY:** WI0310000 KEWAUNEE COUNTY SHERIFF  
**LOCAL IDENTIFICATION NUMBER:** 33174

**BOOKING**

**AGENCY:** WI0310000 KEWAUNEE COUNTY SHERIFF

**CHARGE**

**SEQUENCE NUMBER:** 01  
**CASE NUMBER:** J12-0240  
**STATUTE NUMBER:** 346.63(1)(A)  
**LITERAL:** OPERATING WHILE INTOXICATED  
**NCIC CODE:** 5404  
**COUNTS:** 1  
**CLASSIFICATION:**  
**CHARGE SEVERITY:** Other

**COURT**

**SUBJECT NAME:** JOSHUA ALAN CRABB  
**DATE:** May 03, 2012  
**CASE NUMBER:** 312012TR000342  
**COURT:** Unknown  
**COMMENTS:** CCAP DISPOSITION

**CHARGE**

**SEQUENCE NUMBER:** 01  
**TRACKING NUMBER:** 31001000033721  
**STATUTE NUMBER:** 346.63(1)(A)  
**LITERAL:** OPERATING WHILE INTOXICATED  
**COUNTS:** 1  
**CLASSIFICATION:**  
**CHARGE SEVERITY:** Other

**COURT ACTION:**

**LITERAL:** Convicted  
**DISPOSITION DATE:** May 03, 2012  
**DISPOSITION:** CONVICTED

**SENTENCING**

**DATE:** May 03, 2012  
**CASE NUMBER:** 312012TR000342  
**CONVICTED OFFENSE:**  
**CHARGE SEQUENCE NUMBER:** 01  
**SENTENCE:**

**SENTENCE:** Fine

**COMMENTS:** PAYMENTS OF \$50 PER MONTH STARTING 05/07/12. FAILURE TO PAY,  
2 YEAR DRIVERS LICENSE SUSPENSION.

**SENTENCING**

**DATE:** May 03, 2012  
**CASE NUMBER:** 312012TR000342

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

## County of Kewaunee vs. Joshua A Crabb

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

### Kewaunee County Case Number 2011TR000009

What is RSS? 

Filing Date	Case Type	Case Status	<input type="button" value="Court Record Events"/>
01-03-2011	Traffic Forfeiture	Closed	<input type="radio"/> Ascending Date Order
Defendant Date of Birth	Address		<input checked="" type="radio"/> Descending Date Order
	E1750 State Highway 29, Kewaunee, WI 54216		
Branch Id	DA Case Number		
1			

### Charge(s)

Count No.	Statute	Description	Severity	Disposition
1	346.70(1)	Failure to Notify Police of Accident	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
Mleziva, Dennis J	District Attorney		

### Defendant

Defendant Name	Date of Birth	Sex	Race <sup>1</sup>
Crabb, Joshua A		Male	Caucasian
Address			Address Updated On
E1750 State Highway 29, Kewaunee, WI 54216			12-30-2010
JUSTIS ID	Finger Print ID		

### Citations

Citation K1408444			
Bond Amount	Deposit Type	Appearance Date and Time	Mandatory
\$ 263.50	None	03-03-2011 at 01:00 pm	No
Name	Date of Birth	Sex	
Crabb, Joshua A	02-1988	Male	
Address		Address Updated On	
E1750 State Highway 29, Kewaunee, WI 54216		12-30-2010	
Plate Number	State	Expiration	VIN
HD7970	WI	2011	1GCCS144XVK153605
Issuing Agency	Officer Name	Violation Date	MPH Over
Kewaunee Co Sheriff	Smidle, Dustin	12-30-2010	
Plaintiff Agency	Ordinance or Statute	Statute	Charge Description
County of Kewaunee	Statute	346.70(1)	Failure to Notify Police of Accident
Severity			
Forf. U			

### Total Receivables

**CONVICTED OFFENSE:**

**CHARGE SEQUENCE NUMBER:** 01

**SENTENCE:**

**SENTENCE:** License Revoked

**SENTENCE LENGTH:** 8 months

**COMMENTS:** CONCURRENT

**SENTENCING**

**DATE:** May 03, 2012

**CASE NUMBER:** 312012TR000342

**CONVICTED OFFENSE:**

**CHARGE SEQUENCE NUMBER:** 01

**SENTENCE:**

**SENTENCE:** Ignition Interlock

**SENTENCE LENGTH:** 1 year

**SENTENCING**

**DATE:** May 03, 2012

**CASE NUMBER:** 312012TR000342

**CONVICTED OFFENSE:**

**CHARGE SEQUENCE NUMBER:** 01

**SENTENCE:**

**SENTENCE:** Alcohol Assessment

**SENTENCE LENGTH:** Unknown

**CONTRIBUTING AGENCIES**

WI013035Y WI CIB Identification Section

WI0310000 Kewaunee County Sheriff

**YOUR REQUEST:**

User ID: 10562

Date & Time: 12/06/2013  
14:21:43

State Ident Number: WI1360669

Purpose Code: A

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

## Sturgeon Bay, City of vs. Joshua A Crabb

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

### Door County Case Number 2011TR000457

What is RSS? 

Filing Date	Case Type	Case Status	<input type="button" value="Court Record Events"/>
02-11-2011	Traffic Forfeiture	Closed	<input type="radio"/> Ascending Date Order
Defendant Date of Birth	Address		<input checked="" type="radio"/> Descending Date Order
	E1750 State Highway 29, Kewaunee, WI 54216		
Branch Id	DA Case Number		
2			

### Charge(s)

Count No.	Statute	Description	Severity	Disposition
1	343.44(1)(a)	Operating While Suspended	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
Diltz, Peter	Sturgeon Bay City Attorney		

### Defendant

Defendant Name	Date of Birth	Sex	Race <sup>1</sup>
Crabb, Joshua A		Male	Caucasian
Address			Address Updated On
E1750 State Highway 29, Kewaunee, WI 54216			02-10-2011
JUSTIS ID	Finger Print ID		

### Citations

Citation N8467270			
Bond Amount	Deposit Type	Appearance Date and Time	Mandatory
\$ 200.50	None	03-07-2011 at 09:00 am	No
Name	Date of Birth		Sex
Crabb, Joshua A			Male
Address			Address Updated On
E1750 State Highway 29, Kewaunee, WI 54216			02-10-2011
Plate Number	State	Expiration	VIN
HD7970	WI	2011	1GCCS144XVK153605
Issuing Agency	Officer Name	Violation Date	MPH Over
Sturgeon Bay Police Dept	Bilodeau, Joseph	02-10-2011	
Plaintiff Agency	Ordinance or Statute	Statute	Charge Description
Sturgeon Bay, City of	Statute	343.44(1)(a)	Operating While Suspended
Severity			
Forf. U			

### Total Receivables

Court Assessments	Adjustments <sup>3</sup>	Paid to the Court	Probation/Other Agency Amount <sup>4</sup>	Balance Due to Court	Due Date <sup>5</sup>
\$ 263.50	\$ 0.00	\$ 263.50	\$ 0.00	\$ 0.00	

<sup>1</sup> The designation listed in the Race field is subjective. It is provided to the court by the agency that filed the case.

<sup>2</sup> 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.

<sup>3</sup> 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.

<sup>4</sup> 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.

<sup>5</sup> For cases with multiple assessments, the due date represents the assessment with the latest date.

<sup>6</sup> Your payment may not be processed immediately.

[Previous](#) [Return to List](#) [Next](#)

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

Technical problems? [Contact us.](#)

[notice to employers](#) | [accuracy](#) | [public records on the internet](#) | [information on other sites](#) | [data extraction option](#) | [rss](#) | [court terms](#)

[search](#)  
 [calendar](#)  
 [pay fees online](#)  
 [reports](#)  
 [help](#)  
 [view cart \(0 items\)](#)

**County of Kewaunee vs. Joshua A Crabb**

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

**Kewaunee County Case Number 2012TR000342**

What is RSS? [RSS](#)

<b>Filing Date</b> 03-28-2012	<b>Case Type</b> Traffic Forfeiture	<b>Case Status</b> Closed	<b>Court Record Events</b> <input type="radio"/> Ascending Date Order <input checked="" type="radio"/> Descending Date Order
<b>Defendant Date of Birth</b> [REDACTED]	<b>Address</b> E1750 State Highway 29, Kewaunee, WI 54216		
<b>Branch Id</b> 1	<b>DA Case Number</b>		

**Charge(s)**

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

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

Defendant Owes the Court: \$ 154.50

<b>Responsible Official</b> Mleziva, Dennis J	<b>Prosecuting Agency</b> District Attorney	<b>Prosecuting Attorney</b>	<b>Defense Attorney</b>
--	--	-----------------------------	-------------------------

**Defendant**

<b>Defendant Name</b> Crabb, Joshua A	<b>Date of Birth</b> [REDACTED]	<b>Sex</b> Male	<b>Race <sup>1</sup></b> Caucasian
<b>Address</b> E1750 State Highway 29, Kewaunee, WI 54216			<b>Address Updated On</b> 03-18-2012
<b>JUSTIS ID</b>	<b>Finger Print ID</b>		

**Citations**

<b>Citation K1363202</b>			
<b>Bond Amount</b> \$ 817.50	<b>Deposit Type</b> None	<b>Appearance Date and Time</b> 05-03-2012 at 01:00 pm	<b>Mandatory</b> Yes
<b>Name</b> Crabb, Joshua A		<b>Date of Birth</b> [REDACTED]	<b>Sex</b> Male
<b>Address</b> E1750 State Highway 29, Kewaunee, WI 54216			<b>Address Updated On</b> 03-18-2012
<b>Plate Number</b> HD7970	<b>State</b> WI	<b>Expiration</b> 2013	<b>VIN</b> 1GCCS144XVK153605
<b>Issuing Agency</b> Kewaunee Co Sheriff	<b>Officer Name</b> Raduenz, William	<b>Violation Date</b> 03-18-2012	<b>MPH Over</b>
<b>Plaintiff Agency</b> County of Kewaunee	<b>Ordinance or Statute</b> Statute	<b>Statute</b> 346.63(1)(a)	<b>Charge Description</b> OWI (1st)
<b>Severity</b> Forf. U			

**Total Receivables**

Court Assessments	Adjustments <sup>3</sup>	Paid to the Court	Probation/Other Agency Amount <sup>4</sup>	Balance Due to Court	Due Date <sup>5</sup>
\$ 200.50	\$ 0.00	\$ 200.50	\$ 0.00	\$ 0.00	

<sup>1</sup> The designation listed in the Race field is subjective. It is provided to the court by the agency that filed the case.

<sup>2</sup> 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.

<sup>3</sup> 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.

<sup>4</sup> 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.

<sup>5</sup> For cases with multiple assessments, the due date represents the assessment with the latest date.

<sup>6</sup> Your payment may not be processed immediately.

[Previous](#) [Return to List](#) [Next](#)

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

Technical problems? [Contact us.](#)

[notice to employers](#) | [accuracy](#) | [public records on the internet](#) | [information on other sites](#) | [data extraction option](#) | [rss](#) | [court terms](#)

Court Assessments	Adjustments <sup>3</sup>	Paid to the Court	Probation/Other Agency Amount <sup>4</sup>	Balance Due to Court	Due Date <sup>5</sup>
\$ 804.50	\$ 0.00	\$ 650.00	\$ 0.00	\$ 154.50	08-07-2013

<sup>1</sup> The designation listed in the Race field is subjective. It is provided to the court by the agency that filed the case.

<sup>2</sup> 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.

<sup>3</sup> 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.

<sup>4</sup> 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.

<sup>5</sup> For cases with multiple assessments, the due date represents the assessment with the latest date.

<sup>6</sup> Your payment may not be processed immediately.

[Previous](#) [Return to List](#) [Next](#)

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

Technical problems? [Contact us.](#)

[notice to employers](#) | [accuracy](#) | [public records on the internet](#) | [information on other sites](#) | [data extraction option](#) | [rss](#) | [court terms](#)





**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"/>	<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 #
------------------	-----------	---------------

**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>Giles</b>		First Name: <b>Chelsea</b>		Middle Name: <b>Sherrri</b>				
Residence: Street Address: <b>109 William Ct.</b>		City: <b>Hortonville</b>		State: <b>WI</b>		Zip: <b>54944</b>		
Residence Phone: <b>(920) 740-0600</b>	Birthdate: <b>[REDACTED]</b>	Birth Place (City, State): <b>Appleton, WI</b>	Race: <b>white</b>	Sex: <b>F</b>	Height: <b>5'5"</b>	Weight: <b>140</b>	Hair: <b>Blk</b>	Eyes: <b>Blu</b>
Driver's License # (State & Number): <b>[REDACTED]</b>		Establishment Where Employed: <b>Shopko Express</b>			Contact Person & Phone Number: <b>Stacy Allaire (920) 662-9450</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):  <b>Hortonville, WI</b>	From:	To:	
		<b>1995</b>	<b>Present</b>
	From:	To:	
	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 <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.

Chelsea Giles  
Applicant's Signature

12/6/13  
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.

Lynn Kobus  
Authorized signature performing background check

12/17/2013  
Date

Receipt # 24599 Dated: 12/16/13 Mail or Pick Up Date: \_\_\_\_\_

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

Transaction 24599.4713  
12/16/2013 02:45pm  
Lynn @ POSREGISTER1

perators License	\$40.00
Chelsea Giles - Operator License Fee	
perators License	\$40.00
Amber Springer-Kinne - Operator License Fee	
perators License	\$40.00
Gary Wilson - Operator License Fee	

Receipt Total \$120.00

Check Payment \$120.00

**WISCONSIN**  
DRIVER LICENSE Probationary

[REDACTED]

**DONOR**



AP01 GHH GHH

Class **D**  
Endorsements  
Restrictions on Back  
Sex **F**  
Hair **BLD**  
Eyes **BLU**  
Height **5'05"**  
Weight **180**  
Issued **04-25-2011**  
Expires **04-23-2014**  
DOB [REDACTED]

*Chelsea Giles*

**CHELSEA SHERRI  
GILES**  
109 WILLIAM CT  
HORTONVILLE, WI 54944



**DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU****Request Date : 12/17/2013****Report Date : 12/17/2013****Order Number : 3871719****Request Reason : Government**

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

<b>Name</b>	<b>CHELSEA SHERRI GILES</b>
<b>Date of Birth</b>	<b>[REDACTED]</b>
<b>Sex</b>	<b>F</b>
<b>Race</b>	<b>W</b>

---

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.**

---

---

# Wisconsin Responsible Beverage Server Training

**Chelsea Giles**

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

Certification Number: 49795

Date of Completion: 09/01/2013

*Kelly Bailey*

Authorized Signature



**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 #
<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: <i>Gray</i>	First Name: <i>Rachel</i>	Middle Name: <i>Renee</i>
Residence: Street Address: <i>177W Burgome Ct #95</i>	City: <i>DePere</i>	State: <i>WI</i>
Residence Phone: <i>720-277-7809</i>	Birthdate: [REDACTED]	Zip: <i>54115</i>
Birthdate:	Birth Place (City, State): <i>Green Bay WI</i>	Race: <i>Blk</i>
Sex: <i>F</i>	Height: <i>5'5"</i>	Weight: <i>140</i>
Hair: <i>Brn</i>	Eyes: <i>Brn</i>	
Driver's License # (State & Number): [REDACTED]	Establishment Where Employed: <i>VG Golf Course</i>	Contact Person & Phone Number: <i>Chris Haltom</i>
Other Names, Aliases or Birthdates ever used:		
Cities & States lived in the past 10 years:		
<i>DePere, WI</i>	From: <i>2007</i>	To: <i>Current</i>
<i>Green Bay, WI</i>	<i>2004</i>	<i>2007</i>
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:		
<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
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
July 2013	De Pere	Expired License	Paid
March 2013	Green Bay	Parking ticket	Paid

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**

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

Files indicate that subject has the attached Criminal Arrest Record.

Authorized signature performing background check

Date

Receipt #

Dated

Mail or Pick Up Date:

## 2. The process for submitting a challenge.

The applicant 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.

**Wisconsin Criminal History**  
**RECORD LAST UPDATED: 07/06/2006**

Identification      Criminal History      Contributing Agencies      Your Request

---

**IDENTIFICATION****RACHEL RENEE GRAY**

Alias Names/Fraudulent Data

Female / Black

Born in Wisconsin ; Citizen of USA

5'05" 130lbs Brown Eyes ; Brown Hair

229 Crest View Ln, De Pere, WI as of 06/16/2006

408 S Erie St, Depere, WI as of 11/17/1995

FBI: Unknown

STATE ID: WI705654

EMPLOYER: Unknown

OCCUPATION: Unknown

**ALIAS NAMES/FRAUDULENT DATA:**

Alias Names: RACHEL R GRAY

**PHOTO INFORMATION:**

11/17/1995 WI0050200 Green Bay Pd

WI013035Y WI CIB Identification Section

**CRIMINAL HISTORY****Cycle 1**

EARLIEST EVENT DATE: June 16, 2006

ARREST TRACKING NUMBER: 1396200608208

DATE OF OFFENSE: June 16, 2006

**ARREST DATA**

SUBJECT NAME: RACHEL R GRAY  
TYPE: Adult Only  
DATE: June 16, 2006  
ARREST AGENCY: WI0050300 PULASKI PD  
LOCAL IDENTIFICATION NUMBER: 1247901

**BOOKING**

AGENCY: WI0050000 BROWN COUNTY SHERIFF

**CHARGE**

SEQUENCE NUMBER: 01  
STATUTE NUMBER: 347.48(2M)  
LITERAL: MANDATORY SEATBELTS REQUIREMENT  
NCIC CODE: 5499  
COUNTS: 1  
CLASSIFICATION:  
CHARGE SEVERITY: Misdemeanor

**CHARGE**

SEQUENCE NUMBER: 02  
STATUTE NUMBER: 346.57(4)(H)  
LITERAL: SPEEDING IN 55 MPH ZONE  
NCIC CODE: 5499  
COUNTS: 1  
CLASSIFICATION:  
CHARGE SEVERITY: Misdemeanor

**CHARGE**

SEQUENCE NUMBER: 03  
STATUTE NUMBER: 343.44(1)  
LITERAL: OPERATING AFTER SUSPENSION OR REVOCATION  
NCIC CODE: 5499  
COUNTS: 1  
CLASSIFICATION:  
CHARGE SEVERITY: Misdemeanor

---

**CONTRIBUTING AGENCIES**

WI013035Y WI CIB Identification Section  
WI0050200 Green Bay Pd  
WI0050000 Brown County Sheriff  
WI0050300 Pulaski Pd

---

**YOUR REQUEST:**

User ID: 10562 Date & Time: 12/17/2013 14:46:24  
State Ident Number: WI705654 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: _____		
Office Use Only: 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: <u>Ibsen</u>		First Name: <u>Michelle</u>
Middle Name: <u>Lynn</u>		
Residence: Street Address: <u>1200 Shadow Ridge Way</u>		City: <u>De Pere</u>
State: <u>WI</u>		Zip: <u>54115</u>
Residence Phone: <u>920-713-0286</u>	Birthdate: <u>[REDACTED]</u>	Birth Place (City, State): <u>Green Bay, 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>HAZ</u>
Driver's License # (State & Number): <u>[REDACTED]</u>	Establishment Where Employed: <u>The Watering Hole</u>	Contact Person & Phone Number: <u>Ben, 920-434-0805</u>
Other Names, Aliases or Birthdates ever used: <u>N/A</u>		
Cities & States lived in the past 10 years: <u>Green Bay, WI</u> <u>Appleton, WI</u>		From: <u>6/2004</u> <u>6/2003</u>
		To: <u>present</u> <u>6/2004</u>
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: <input checked="" type="checkbox"/> U.S. Citizen <input type="checkbox"/> Alien <input type="checkbox"/> Temporary Resident (Employment Number _____)		



**WISCONSIN DRIVER LICENSE** DUP USA WI  
REGULAR

10 DL [REDACTED]

1 **IBSEN**  
2 **MICHELLE L**  
3 **2088 GRARY ST**  
4 **GREEN BAY, WI 54304**

5 DOB [REDACTED] 6b EXP **05/10/2019**

15 SEX **F** 16 IRIS **08/23/2012**  
16 HGT **5'06"** 18 EYES **HAZ**  
17 WGT **130 lb** 19 HAIR **BRO**

9 CLASS **D**  
9a END **NONE**

5 **DD OTAKO2012082315480771**





 **City of Green Bay**  
**Operator's License**

**Michelle L Ibsen**

DOB: [REDACTED]  
Expires: 06/30

10 11 12 13 14 15 16

## 2. The process for submitting a challenge.

The applicant 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.

**Wisconsin Criminal History**  
**RECORD LAST UPDATED: 05/16/2006**

Identification      Criminal History      Contributing Agencies      Your Request

---

**IDENTIFICATION****MICHELLE LYNN IBSON**

Female / White

Born in Wisconsin ; Citizen of USA

5'06" 120lbs Hazel Eyes ; Brown Hair

251 N Baird St, Green Bay, WI 54301 as of 06/18/2001

FBI: Unknown

STATE ID: WI891185

EMPLOYER: Unknown

OCCUPATION: Unknown

**CRIMINAL HISTORY****Cycle 1**

EARLIEST EVENT DATE: June 18, 2001

ARREST TRACKING NUMBER: 13000106180362

DATE OF OFFENSE: June 18, 2001

**ARREST DATA**

SUBJECT NAME: MICHELLE LYNN IBSON

TYPE: Adult Only

DATE: June 18, 2001

CASE NUMBER: 01cf001249

ARREST AGENCY: WI0130000 DANE COUNTY SHERIFF

LOCAL IDENTIFICATION NUMBER: 88255

## BOOKING

AGENCY: WI0130000 DANE COUNTY SHERIFF

## CHARGE

SEQUENCE NUMBER: 01

CASE NUMBER: 01cf001249

STATUTE NUMBER: 961.41(3G)(A)1

LITERAL: POSSESSION OF NARCOTIC DRUGS

NCIC CODE: 3599

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Felony

## CHARGE

SEQUENCE NUMBER: 02

CASE NUMBER: 01cf001249

STATUTE NUMBER: 961.573(1)

LITERAL: POSSESS DRUG PARAPHERNALIA

NCIC CODE: 3550

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

## COURT

SUBJECT NAME: MICHELLE LYNN IBSON

DATE: October 18, 2001

CASE NUMBER: 132001CF001249

COURT: Unknown

COMMENTS: CCAP DISPOSITION - Court case has been expunged from official court record.

## CHARGE

SEQUENCE NUMBER: 01

TRACKING NUMBER: 13000106180362

STATUTE NUMBER: 961.41(3G)(A)1

LITERAL: POSSESSION OF NARCOTIC DRUGS

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Felony

## COURT ACTION:

LITERAL: Unknown

DISPOSITION DATE: October 18, 2001

DISPOSITION: AMENDED BY PROSECUTOR/COURT

## CHARGE

SEQUENCE NUMBER: 02

TRACKING NUMBER: 13000106180362

STATUTE NUMBER: 961.573(1)

LITERAL: POSSESS DRUG PARAPHERNALIA

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

## COURT ACTION:

LITERAL: Dismissed

**DISPOSITION DATE:** October 18, 2001

**DISPOSITION:** DISMISSED

**CHARGE**

**SEQUENCE NUMBER:** 03

**TRACKING NUMBER:** 13000106180362

**STATUTE NUMBER:** 961.41(3G)(B)

**LITERAL:** POSSESSION OF CONTROLLED SUBSTANCE

**COUNTS:** 1

**CLASSIFICATION:**

**CHARGE SEVERITY:** Misdemeanor

**COURT ACTION:**

**LITERAL:** Convicted

**DISPOSITION DATE:** October 18, 2001

**DISPOSITION:** CONVICTED

**SENTENCING**

**DATE:** October 18, 2001

**CASE NUMBER:** 132001CF001249

**CONVICTED OFFENSE:**

**CHARGE SEQUENCE NUMBER:** 03

**SENTENCE:**

**SENTENCE:** Probation

**SENTENCE LENGTH:** Unknown

**SENTENCING**

**DATE:** October 18, 2001

**CASE NUMBER:** 132001CF001249

**CONVICTED OFFENSE:**

**CHARGE SEQUENCE NUMBER:** 03

**SENTENCE:**

**SENTENCE:** Jail

**SENTENCE LENGTH:** 30 days

**SENTENCING**

**DATE:** October 18, 2001

**CASE NUMBER:** 132001CF001249

**CONVICTED OFFENSE:**

**CHARGE SEQUENCE NUMBER:** 03

**SENTENCE:**

**SENTENCE:** License Suspended

**SENTENCE BEGIN DATE:** 2001-11-01

**SENTENCE LENGTH:** 6 months

**SENTENCING**

**DATE:** October 18, 2001

**CASE NUMBER:** 132001CF001249

**CONVICTED OFFENSE:**

**CHARGE SEQUENCE NUMBER:** 03

**SENTENCE:**

**SENTENCE:** Probation

**SENTENCE BEGIN DATE:** 2001-10-18

**SENTENCE LENGTH:** 12 months

**SENTENCE INDICATOR:** Probation By Judgment

**SENTENCING**

DATE: October 18, 2001  
CASE NUMBER: 132001CF001249  
CONVICTED OFFENSE:  
CHARGE SEQUENCE NUMBER: 03  
SENTENCE:  
SENTENCE: Court Ordered Condition  
SENTENCE LENGTH: Unknown

SENTENCING

DATE: October 18, 2001  
CASE NUMBER: 132001CF001249  
CONVICTED OFFENSE:  
CHARGE SEQUENCE NUMBER: 03  
SENTENCE:  
SENTENCE: Court Ordered Condition  
SENTENCE LENGTH: Unknown

SENTENCING

DATE: October 18, 2001  
CASE NUMBER: 132001CF001249  
CONVICTED OFFENSE:  
CHARGE SEQUENCE NUMBER: 03  
SENTENCE:  
SENTENCE: Court Ordered Condition  
SENTENCE LENGTH: Unknown

SENTENCING

DATE: October 18, 2001  
CASE NUMBER: 132001CF001249  
CONVICTED OFFENSE:  
CHARGE SEQUENCE NUMBER: 03  
SENTENCE:  
SENTENCE: Court Ordered Condition  
SENTENCE LENGTH: Unknown

SENTENCING

DATE: October 18, 2001  
CASE NUMBER: 132001CF001249  
CONVICTED OFFENSE:  
CHARGE SEQUENCE NUMBER: 03  
SENTENCE:  
SENTENCE: Unknown Sentence Code

CONTRIBUTING AGENCIES

WI0130000 Dane County Sheriff

YOUR REQUEST:

User ID:	10562	Date & Time:	01/08/2014 14:44:52
----------	-------	--------------	------------------------

State Ident Number: WI891185

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: _____		
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: <i>Inker</i>		First Name: <i>Kimberly</i>		Middle Name: <i>Jean</i>							
Residence: Street Address: <i>1100 Memorial Dr.</i>		City: <i>Green Bay</i>		State: <i>WI</i>		Zip: <i>54313</i>					
Residence Phone: <i>920 4451476</i>		Birthdate: [REDACTED]		Birth Place (City, State): <i>Oshkosh, WI</i>		Race: <i>W</i>	Sex: <i>F</i>	Height: <i>5'5</i>	Weight: <i>185</i>	Hair: <i>Br</i>	Eyes: <i>Green</i>
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: <i>Kwik Trip</i>				Contact Person & Phone Number: <i>Andy Montag</i>					
Other Names, Aliases or Birthdates ever used: <i>Kimberly Niles</i>											
Cities & States lived in the past 10 years: <i>WI Green Bay</i>						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: <input checked="" type="checkbox"/> U.S. Citizen <input type="checkbox"/> Alien <input type="checkbox"/> Temporary Resident (Employment Number _____)											



# WISCONSIN

# SELLER / SERVER CERTIFICATION

Trainee Name: Kim J Ihler

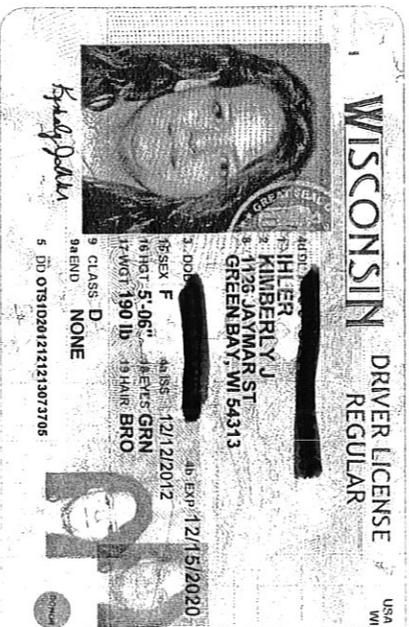
Date of Completion: 12/06/2013 20:42 CST

School Name: Learn2Serve

Certification #: WI 2174482

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



WISCONSIN DRIVER LICENSE REGULAR

1. DOB: [REDACTED] 4b exp: 12/15/2020  
2. SEX: F 4c ISS: 12/12/2012  
3. KIMBERLY J 4d EYES: GRN  
4. 1126 JAYMAR ST 4e HAIR: BRN  
GREEN BAY, WI 54313

5. DD OTS: 1020/2121213073705  
9. CLASS: D NONE  
9a. END: NONE

USA WI

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

**DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU**

**Request Date : 01/08/2014**  
**Report Date : 01/08/2014**  
**Order Number : 3886660**  
**Request Reason : Government**

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

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

---

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.**

---

---



**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"/>	<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 #
------------------	-----------	---------------

**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: Springer-Kinne		First Name: Amber		Middle Name: Sue				
Residence: Street Address: 203 N. Franklin St		City: Oconto Falls		State: WI		Zip: 54150		
Residence Phone: 920-205-3025	Birthdate: [REDACTED]	Birth Place (City, State): Ft. Stewart, Georgia	Race: W	Sex: F	Height: 5'5"	Weight: 140lbs	Hair: Blk	Eyes: Brown
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: Shopko Express			Contact Person & Phone Number: Stacy Allaire 920-662-9450			
Other Names, Aliases or Birthdates ever used:								

Cities & States lived in the past 10 years, including were you now reside (must reside in Wisconsin for at least the past 90 days to be eligible for this license):	From:	To:	
	Oconto Falls, WI	Aug 2013	Current
	Commerce City, CO	Feb 2013	Aug 2013
Arvada/Thornton, CO	From: June 1997	To: Feb 2013	

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**

USA WI

1 ID No. [REDACTED]  
 2 SPRINGER-KINNE  
 3 AMBER SUE  
 4 203 N FRANKLIN ST  
 5 OCONTO FALLS, WI 54154

DOB [REDACTED]  
 13 SEX F  
 14 ISS 09/03/2013  
 15 HGT 5'05"  
 16 EYES BRO  
 17 WGT 140 lb  
 18 HAIR BLD  
 19 CLASS D  
 20 END NONE

4b Exp 06/02/2017

6 DDOTSUS2013090315012050

Donna A. Kinne

Donna A. Kinne

Donna A. Kinne

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

Transaction 24599.4713  
 12/16/2013 02:45pm  
 Lynn @ POSREGISTER1

perators License \$40.00  
 Chelsea Giles - Operator License Fee  
 perators License \$40.00  
 Amber Springer-Kinne - Operator License Fee  
 perators License \$40.00  
 Gary Wilson - Operator License Fee

Receipt Total \$120.00  
 Check Payment \$120.00



**DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU****Request Date : 12/17/2013****Report Date : 12/17/2013****Order Number : 3871719****Request Reason : Government**

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

<b>Name</b>	<b>AMBER SUE SPRINGER KINNE</b>
<b>Date of Birth</b>	<b>[REDACTED]</b>
<b>Sex</b>	<b>F</b>
<b>Race</b>	<b>W</b>

---

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.**

---

---

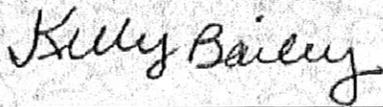
# Wisconsin Responsible Beverage Server Training

## Amber Springer-Kinne

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

Certification Number: 51000

Date of Completion: 11/08/2013



Authorized Signature



## 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 #	
<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>Vandreele</b>		First Name: <b>Yvonne</b>	Middle Name: <b>C</b>
Residence: Street Address: <b>1949 Reinhard dr #9</b>		City: <b>Green Bay</b>	State: <b>WI</b> Zip: <b>54303</b>
Residence Phone: <b>9206608647</b>	Birthdate: [REDACTED]	Birth Place (City, State): <b>Anaheim CA</b>	Race: <b>W</b> Sex: <b>F</b> Height: <b>5'8</b> Weight: <b>160</b> Hair: <b>Bn</b> Eyes: <b>HZ</b>
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: <b>Rock Garden</b>	Contact Person & Phone Number: <b>Dorothy Wdf 405 1951</b>
Other Names, Aliases or Birthdates ever used:			
Cities & States lived in the past 10 years:		From:	To:
<b>Green Bay WI</b>		<b>1988</b>	<b>present</b>
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:			
<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
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 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
2007	Green Bay	OWI 1	guilty
8/2002	Green Bay	OWI 2	guilty

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.

*Yusef Karimel*  
Applicant's Signature

1/7/14  
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 checked="" type="checkbox"/>	Files indicate that subject has the attached Criminal Arrest Record.

*Lynn K. Kobus* 1/8/14  
Authorized signature performing background check Date

Receipt # 25507 Dated: 1/9/14 Mail or Pick Up Date: \_\_\_\_\_

*M. M. M.*



**WISCONSIN IDENTIFICATION CARD**

USA WI

1. NAME: **YANDREEL YONNE C GREENBAY, WI 54303**

2. ADDRESS: **[REDACTED]**

3. SEX: **F**

4. EXP: **02/11/2018**

5. HT: **5'-08"**

6. EYES: **HAZ**

7. HAIR: **BRO**

8. WT: **155 LB**

9. ISS: **01/24/2013**

10. CLASS: **DR APT 9**

11. CLASSIFICATION: **NOT A DRIVER LICENSE**

12. ID: **011202013012413291236**



USA WI

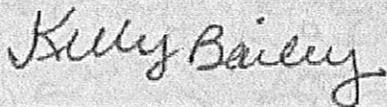
# Wisconsin Responsible Beverage Server Training

Yvonne Vandreeel

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

Certification Number: 51745

Date of Completion: 01/06/2014



Authorized Signature

## 2. The process for submitting a challenge.

The applicant 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.

**Wisconsin Criminal History**  
**RECORD LAST UPDATED: 11/13/2012**

Identification      Criminal History      Contributing Agencies      Your Request

---

**IDENTIFICATION****YVONNE CAROL VANDREEL**

Female / White

Born in California ; Citizen of USA

5'06" 165lbs Hazel Eyes ; Brown Hair

1949 Reinhard Dr #9, Green Bay, WI 54303 as of 11/12/2012

401 Porlier St, Green Bay, WI 54301 as of 05/04/2009

FBI: Unknown

STATE ID: WI1248119

PALM PRINT, ORI AND LITERAL: WI0050100-DEPERE POLICE DEPARTMENT

PALM PRINT, ORI AND LITERAL: WI0050000-BROWN COUNTY SHERIFF

EMPLOYER: 1951 West

OCCUPATION: Server

1951 W. Bond St, Green Bay, WI 54303

EMPLOYER: Caliente

OCCUPATION: Laborer

Depere, De Pere, WI 000000000

PHOTO INFORMATION:

WI013035Y WI CIB Identification Section

**CRIMINAL HISTORY**

**Cycle 1**

**EARLIEST EVENT DATE:** May 04, 2009  
**ARREST TRACKING NUMBER:** 5000905040056  
**DATE OF OFFENSE:** May 04, 2009

**ARREST DATA**

**SUBJECT NAME:** YVONNE CAROL VANDREEL  
**TYPE:** Adult Only  
**DATE:** May 04, 2009  
**ARREST AGENCY:** WI0050100 DEPERE POLICE DEPARTMENT  
**LOCAL IDENTIFICATION NUMBER:** 910000251923

**BOOKING**

**AGENCY:** WI0050000 BROWN COUNTY SHERIFF

**CHARGE**

**SEQUENCE NUMBER:** 01  
**LITERAL:** OPERATING WHILE INTOXICATED 1ST VIOLATION  
**NCIC CODE:** 5499  
**COUNTS:** 1  
**CLASSIFICATION:**  
**CHARGE SEVERITY:** Other

**COURT**

**SUBJECT NAME:** YVONNE CAROL VANDREEL  
**DATE:** June 17, 2009  
**CASE NUMBER:** M738408-6  
**COURT:** DEPERE MUNICIPAL COURTWI005021J

**CHARGE**

**SEQUENCE NUMBER:** 01  
**TRACKING NUMBER:** 5000905040056  
**LITERAL:** OPERATE MOTOR VEHICLE WHILE INTOXICATED  
**NCIC CODE:** 5499  
**COUNTS:** 1  
**CLASSIFICATION:**  
**CHARGE SEVERITY:** Other

**COURT ACTION:**

**LITERAL:** Convicted  
**DISPOSITION DATE:** June 17, 2009  
**DISPOSITION:** CONVICTED

**SENTENCING**

**DATE:** June 17, 2009  
**CASE NUMBER:** M738408-6  
**CONVICTED OFFENSE:**  
**CHARGE SEQUENCE NUMBER:** 01  
**SENTENCE:**

**SENTENCE:** Fine

**SENTENCING**

**DATE:** June 17, 2009  
**CASE NUMBER:** M738408-6  
**CONVICTED OFFENSE:**  
**CHARGE SEQUENCE NUMBER:** 01

**SENTENCE:****SENTENCE:** License Revoked**SENTENCE LENGTH:** 7 months**SENTENCING****DATE:** June 17, 2009**CASE NUMBER:** M738408-6**CONVICTED OFFENSE:****CHARGE SEQUENCE NUMBER:** 01**SENTENCE:****SENTENCE:** Alcohol Assessment**SENTENCE LENGTH:** Unknown**Cycle 2****EARLIEST EVENT DATE:** June 03, 2012**ARREST TRACKING NUMBER:** 5001211120277**DATE OF OFFENSE:** June 03, 2012**ARREST DATA****SUBJECT NAME:** YVONNE CAROL VANDREEL**TYPE:** Adult Only**DATE:** November 12, 2012**ARREST AGENCY:** WI0050000 BROWN COUNTY SHERIFF**BOOKING****AGENCY:** WI0050000 BROWN COUNTY SHERIFF**CHARGE****SEQUENCE NUMBER:** 01**STATUTE NUMBER:** 346.63(1)(A)**LITERAL:** OPERATING WHILE UNDER INFLUENCE**NCIC CODE:** 5404**COUNTS:** 1**CLASSIFICATION:****CHARGE SEVERITY:** Misdemeanor

---

**CONTRIBUTING AGENCIES**

WI0050100 Depere Police Department  
WI0050000 Brown County Sheriff  
WI013035Y WI CIB Identification Section  
WI005021J Depere Municipal Court

---

**YOUR REQUEST:**

User ID:	10562	Date & Time:	01/09/2014 14:48:07
State Ident Number:	WI1248119	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"/>	<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 #
<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: <i>Wilson</i>	First Name: <i>Gary</i>	Middle Name: <i>Lee</i>
Residence: Street Address: <i>1452 Langlade Ave.</i>	City: <i>Green Bay</i>	State: <i>WI</i>
Residence Phone: <i>920-406-1637</i>	Birthdate: [REDACTED]	Zip: <i>54304</i>
Birth Place (City, State): <i>SANTAROSA, CA</i>	Race: <i>M</i>	Sex: <i>5'9"</i>
Weight: <i>180</i>	Hair: <i>brn</i>	Eyes: <i>brn</i>
Driver's License # (State & Number): [REDACTED]	Establishment Where Employed: <i>Shopko Express #502</i>	Contact Person & Phone Number: <i>Stacy 920 662 9450</i>
Other Names, Aliases or Birthdates ever used:		
Cities & States lived in the past 10 years, including were you now reside (must reside in Wisconsin for at least the past 90 days to be eligible for this license):	From:	To:
<i>Green Bay, WI</i>	<i>2003</i>	<i>2006</i>
<i>Santa Rosa, CA</i>	<i>2006</i>	<i>2008</i>
<i>Green Bay, WI</i>	<i>2008</i>	<i>Current</i>
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
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.

*[Signature]*  
Applicant's Signature

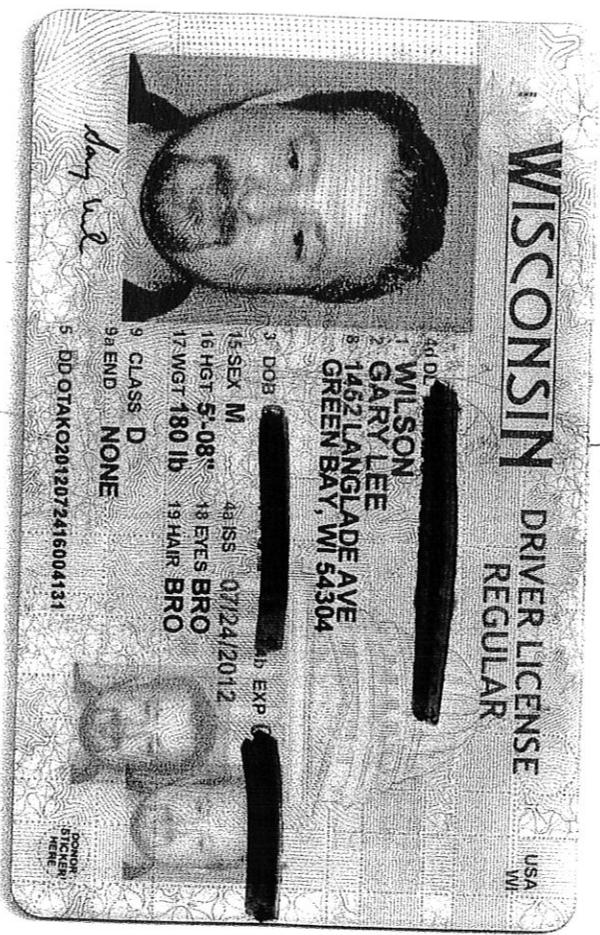
12-5-13  
Date

**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.

*Lynn Kobus*                      12/17/2013  
Authorized signature performing background check                      Date

Receipt # 24599 Dated: 12/16/13 Mail or Pick Up Date: \_\_\_\_\_



WISCONSIN

DRIVER LICENSE  
REGULAR

USA  
WI

40 DL  
1 WILSON  
2 GARY LEE  
3 [REDACTED]  
4 [REDACTED]  
5 DD OTAKO2012072416004131  
6 [REDACTED]  
7 [REDACTED]  
8 1462 LANGLADE AVE  
GREEN BAY, WI 54304  
9 CLASS D NONE  
10 [REDACTED]  
11 [REDACTED]  
12 [REDACTED]  
13 [REDACTED]  
14 [REDACTED]  
15 SEX M  
16 HGT 5'-08"  
17 WGT 180 lb  
18 EYES BRO  
19 HAIR BRO  
20 [REDACTED]  
21 [REDACTED]  
22 [REDACTED]  
23 [REDACTED]  
24 [REDACTED]  
25 [REDACTED]  
26 [REDACTED]  
27 [REDACTED]  
28 [REDACTED]  
29 [REDACTED]  
30 [REDACTED]  
31 [REDACTED]  
32 [REDACTED]  
33 [REDACTED]  
34 [REDACTED]  
35 [REDACTED]  
36 [REDACTED]  
37 [REDACTED]  
38 [REDACTED]  
39 [REDACTED]  
40 [REDACTED]

DONOR  
STICKER  
HERE

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

Transaction 24599.4713  
12/16/2013 02:45pm  
Lynn @ POSREGISTER1

operator's License \$40.00  
Chelsea Giles - Operator License Fee  
operator's License \$40.00  
Amber Springer-Kinne - Operator License Fee  
operator's License \$40.00  
Gary Wilson - Operator License Fee  
Receipt Total \$120.00  
Check Payment \$120.00



# Wisconsin Responsible Beverage Server Training

Gary Wilson

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

Certification Number: 51105

Date of Completion: 11/14/2013

*Kelly Bailey*

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

**DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU**

**Request Date : 12/17/2013**

**Report Date : 12/17/2013**

**Order Number : 3871719**

**Request Reason : Government**

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

<b>Name</b>	<b>GARY LEE WILSON</b>
<b>Date of Birth</b>	<b>[REDACTED]</b>
<b>Sex</b>	<b>M</b>
<b>Race</b>	<b>W</b>

---

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.**

---

---