

WK

Provisional
2012-019



**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 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 #	2012-019
Filling Out Your Application: <ul style="list-style-type: none"> 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. Review Of Your Application: <ul style="list-style-type: none"> 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: Fairchild		First Name: Tyler	
		Middle Name: James	
Residence: Street Address: 1010 Coggins Court		City: Green Bay	
		State: WI	
		Zip: 54313	
Residence Phone: 920-660-8323	Birthdate: [REDACTED]	Birth Place (City, State): Green Bay, WI	Race: White
		Sex: M	Height: 60
		Weight: 230	Hair: Brown
			Eyes: Blue
Driver's License # (State & Number) WISCONSIN [REDACTED]		Establishment Where Employed: Grand Central BP Welp	
		Contact Person & Phone Number: Lucy 920-434-0400	
Other Names, Aliases or Birthdates ever used:			
Cities & States lived in the past 10 years: Pulaski, WI		From: 1993	To: 2010
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 _____)			

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

04/04/2012

Order Number : 3153051

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

Name	TYLER J FAIRCHILD
Date of Birth	[REDACTED]
Sex	M
Race	W

**Wisconsin Criminal History**

Report Date: 04/04/2012

Government

WISCONSIN IDENTIFICATION DATA

THE RESPONSE IS BASED ON A SEARCH USING THE FINGERPRINTS AND/OR 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.

SUBJECT TO 111.33 TO 111.36, SECTION 111.321 OF THE WISCONSIN STATUTES PROHIBITS ACTS OF EMPLOYMENT DISCRIMINATION BASED ON ARREST AND CONVICTION RECORDS. APPLICANTS SHOULD BE NOTIFIED OF THEIR RIGHT TO CHALLENGE THE ACCURACY AND COMPLETENESS OF ANY INFORMATION CONTAINED IN A CRIMINAL RECORD BEFORE ANY FINAL DETERMINATION IS MADE. CHALLENGES SHOULD BE SUBMITTED TO THE CRIME INFORMATION BUREAU ON FORM DJ-LE-247 AND MAY INCLUDE A REQUEST FOR FINGERPRINT COMPARISON.

THIS RESPONSE MAY NOT SHOW ALL ARRESTS FOR THIS INDIVIDUAL HOWEVER ALL INFORMATION PROVIDED TO THE STATE REPOSITORY IS INCLUDED IN THIS RESPONSE.

Identification Criminal History Contributing Agencies Your Request

IDENTIFICATION**TYLER JAMES FAIRCHILD**

Male / White

Born in Wisconsin ; Citizen of USA

6'00" 230lbs Blue Eyes ; Brown Hair

1010 Coggins Court, Green Bay, WI 54313 as of 09/04/2011

1187 Cty. C, Pulaski, WI 54162 as of 04/06/2009

FBI: Unknown

STATE ID: WI1245440

EMPLOYER: Bayport High

OCCUPATION: 10th Grade Student

Main St, Green Bay, WI 00000

PHOTO INFORMATION:

WI013035Y WI CIB Identification Section

CRIMINAL HISTORY**Cycle 1**

EARLIEST EVENT DATE: September 04, 2011

ARREST TRACKING NUMBER: 5001109040033

DATE OF OFFENSE: September 04, 2011

ARREST DATA

SUBJECT NAME: TYLER JAMES FAIRCHILD

TYPE: Adult Only

DATE: September 04, 2011

ARREST AGENCY: WI0050000 BROWN COUNTY SHERIFF

BOOKING

AGENCY: WI0050000 BROWN COUNTY SHERIFF

CHARGE

SEQUENCE NUMBER: 01

STATUTE NUMBER: 961.41(3G)(E)

LITERAL: POSSESSION OF THC

NCIC CODE: 3562

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

CHARGE

SEQUENCE NUMBER: 02

STATUTE NUMBER: 961.573(1)

LITERAL: POSSESS DRUG PARAPHERNALIA
NCIC CODE: 3562
COUNTS: 1
CLASSIFICATION:
CHARGE SEVERITY: Misdemeanor

PROSECUTION

CASE NUMBER: 2011BR006209
PROSECUTOR: WI005013A BROWN CO DISTRICT ATTORNEY

CHARGE

SEQUENCE NUMBER: 01
TRACKING NUMBER: 5001109040033
STATUTE NUMBER: 961.41(3G)(E)
STATUTE NUMBER: 939.05 PARTY TO
LITERAL: POSSESSION OF THC
COUNTS: 1
CLASSIFICATION:
INCHOATE CHARGE: Accomplice
CHARGE SEVERITY: Misdemeanor

PROSECUTION ACTION:

LITERAL: Other
DISPOSITION DATE: September 06, 2011
DISPOSITION: CHARGE ISSUED

CHARGE

SEQUENCE NUMBER: 02
TRACKING NUMBER: 5001109040033
STATUTE NUMBER: 961.573(1)
STATUTE NUMBER: 939.05 PARTY TO
LITERAL: POSSESS DRUG PARAPHERNALIA
COUNTS: 1
CLASSIFICATION:
INCHOATE CHARGE: Accomplice
CHARGE SEVERITY: Misdemeanor

PROSECUTION ACTION:

LITERAL: Other
DISPOSITION DATE: September 06, 2011
DISPOSITION: CHARGE ISSUED

COURT

SUBJECT NAME: TYLER JAMES FAIRCHILD
DATE: December 16, 2011
CASE NUMBER: 052011CM001518
COURT: Unknown
COMMENTS: CCAP DISPOSITION

CHARGE

SEQUENCE NUMBER: 01
TRACKING NUMBER: 5001109040033
STATUTE NUMBER: 961.41(3G)(E)
STATUTE NUMBER: 939.05 PARTY TO
LITERAL: POSSESSION OF THC
COUNTS: 1

CLASSIFICATION:

INCHOATE CHARGE: Accomplice
CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Convicted
DISPOSITION DATE: December 16, 2011
DISPOSITION: CONVICTED

CHARGE

SEQUENCE NUMBER: 02
TRACKING NUMBER: 5001109040033
STATUTE NUMBER: 961.573(1)
STATUTE NUMBER: 939.05 PARTY TO
LITERAL: POSSESS DRUG PARAPHERNALIA
COUNTS: 1

CLASSIFICATION:

INCHOATE CHARGE: Accomplice
CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Dismissed
DISPOSITION DATE: December 16, 2011
DISPOSITION: DISMISSED READ IN

SENTENCING

DATE: December 16, 2011
CASE NUMBER: 052011CM001518
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 01

SENTENCE:

SENTENCE: Probation
SENTENCE LENGTH: Unknown

SENTENCING

DATE: December 16, 2011
CASE NUMBER: 052011CM001518
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 01

SENTENCE:

SENTENCE: Probation
SENTENCE BEGIN DATE: 2011-12-16
SENTENCE LENGTH: 1 year
FINE: 243.00
SENTENCE INDICATOR: Probation By Judgment
COMMENTS: CREDIT FOR 1 DAY SERVED

SENTENCING

DATE: December 16, 2011
CASE NUMBER: 052011CM001518
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 01

SENTENCE:

SENTENCE: Fine

SENTENCING

DATE: December 16, 2011
CASE NUMBER: 052011CM001518

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 01

SENTENCE:

SENTENCE: Court Ordered Condition

SENTENCE LENGTH: Unknown

COMMENTS: MAINTAIN/OBTAIN FULL-TIME EMPLOYMENT/SCHOOL

SENTENCING

DATE: December 16, 2011

CASE NUMBER: 052011CM001518

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 01

SENTENCE:

SENTENCE: Court Ordered Condition

SENTENCE LENGTH: Unknown

**COMMENTS: NO CONTACT WITH ANYONE WHO USES, SELLS OR POSSESSES
ILLEGAL DRUGS NO CONTACT WITH CODEFENDANTS**

SENTENCING

DATE: December 16, 2011

CASE NUMBER: 052011CM001518

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 01

SENTENCE:

SENTENCE: Court Ordered Condition

SENTENCE LENGTH: Unknown

COMMENTS: COURT WILL TAKE EXPUNGEMENT UNDER ADVISEMENT

CONTRIBUTING AGENCIES

WI013035Y WI CIB Identification Section

WI0050000 Brown County Sheriff

WI005013A Brown Co District Attorney

YOUR REQUEST:

User ID: 10562

Date & Time: 04/04/2012
15:55:20

State Ident
Number: WI1245440

Purpose Code: A

Wisconsin Circuit Court Access (WCCA)

State of Wisconsin vs. Tyler J Fairchild

Brown County Case Number 2011CM001518

Filing Date	Case Type	Case Status
10-11-2011	Criminal	Closed
Defendant Date of Birth	Address	
[REDACTED]	1010 Coggins Ct, Green Bay, WI 54313	
Branch Id	DA Case Number	
8	2011BR006209	

Charge(s)

Count No.	Statute	Description	Severity	Disposition
1	961.573(1)	Possess Drug Paraphernalia	Misd. U	Charge Dismissed but Read In
2	961.41(3g)(e)	Possession of THC	Misd. U	Guilty Due to Guilty Plea

Defendant Owes the Court: \$ 0.00

Responsible Official	Prosecuting Agency	Prosecuting Attorney	Defense Attorney
Atkinson, William	District Attorney	Pautzke, Amy RG	Lampley, Robert

Defendant

Defendant Name	Date of Birth	Sex	Race¹
Fairchild, Tyler J	[REDACTED]	Male	Caucasian
Address			Address Updated On
1010 Coggins Ct, Green Bay, WI 54313			10-11-2011
JUSTIS ID	Finger Print ID		

Defendant Attorney(s)

Attorney Name	Entered
Lampley, Robert	11-14-2011

Charge(s)/Sentence(s)

Charge Detail

The Defendant was charged with the following offense:

Count No.	Statute Cite	Description	Severity	Offense Date	Plea
1	961.573(1)	Possess Drug Paraphernalia	Misd. U	09-03-2011	

Charge Modifier(s)

Statute Cite Description

939.05 PTAC, as a Party to a Crime

On 12-16-2011 there was a finding of:

Action	Court Official
Charge Dismissed but Read In	Atkinson, William

The Defendant was charged with the following offense:

Count No.	Statute Cite	Description	Severity	Offense Date	Plea
2	961.41(3g)(e)	Possession of THC	Misd. U	09-03-2011	Guilty on 12-16-2011

Charge Modifier(s)

Statute Cite Description

939.05 PTAC, as a Party to a Crime

On 12-16-2011 there was a finding of:

Action	Court Official
Guilty Due to Guilty Plea	Atkinson, William

On 12-16-2011 the following was ordered:

Sentence	Time	Begin Date	Notes
Probation, Sent Withheld	1 Years		Credit for 1 day served

Condition Time Notes

Fine

Employment / School Maintain/obtain full-time employment/school

Prohibitions No contact with anyone who uses, sells or possesses illegal drugs
No contact with codefendants

Expunction Court will take expungement under advisement

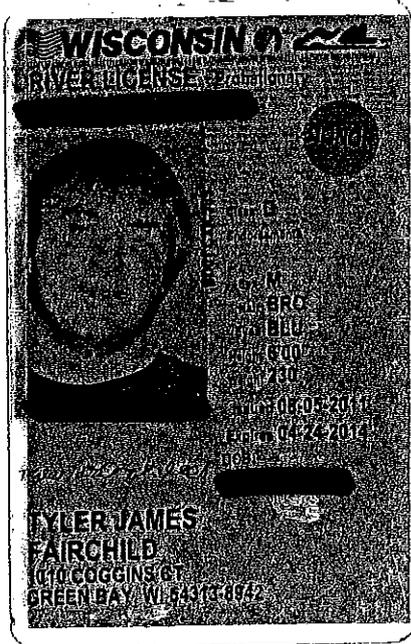
Total Receivables

Court Assessments	Adjustments ³	Paid to the Court	Probation/Other Agency Amount ⁴	Balance Due to Court	Due Date ⁵
\$ 243.00	\$ 0.00	\$ 176.00	\$ 67.00	\$ 0.00	

¹ The designation listed in the Race field is subjective. It is provided to the court by the agency that filed the

case.

- 2 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.
- 3 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.
- 4 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.
- 5 For cases with multiple assessments, the due date represents the assessment with the latest date.
- 6 Your payment may not be processed immediately.



PROVISIONAL OPERATORS LICENSE

NO. 2012-019

\$ 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 Tyler James Fairchild 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 June 4th, 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 4th day of April, 2012

Deputy Clerk

WISCONSIN

SELLER / SERVER CERTIFICATION

Trainee Name: Tyler J Fairchild

School Name: Learn2Serve

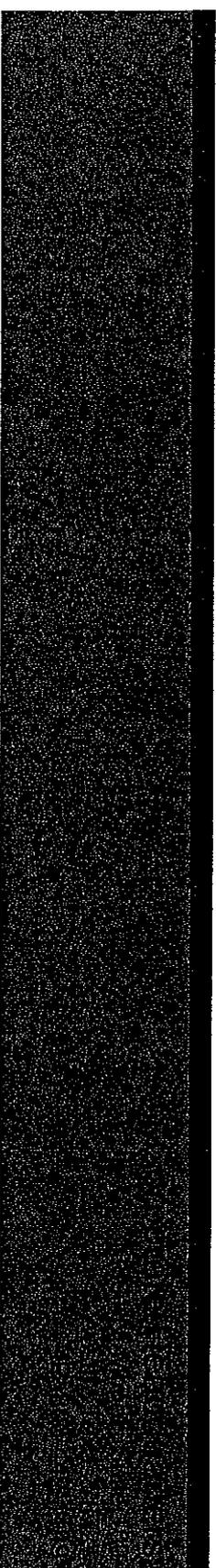
Date of Completion: 05/06/2012 23:19 CST

Certification #: WI 1843702

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





**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.

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: Hazaert		First Name: Jared		Middle Name: Alan				
Residence: Street Address: 2404 Sycamore Dr Apt 12		City: Green Bay		State: Wi		Zip: 54311		
Residence Phone: 920-562-6224	Birthdate: [REDACTED]	Birth Place (City, State): Green Bay, Wi	Race: Cauc.	Sex: Male	Height: 5'10"	Weight: 145	Hair: Br	Eyes: Br
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: The Hideout Bar			Contact Person & Phone Number: Christine Christian 920-366-6870			

Other Names, Aliases or Birthdates ever used:

Cities & States lived in the past 10 years:	From:	To:

Please check box below if you have lived at this address for 10 years or more:	From:	To:
<input type="checkbox"/>		

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

U.S. Citizen Alien Temporary Resident (Employment Number _____)

Have you ever been convicted of a crime of manufacturing, distributing or delivering a controlled substance or controlled substance; possessing, with intent to manufacture, distribute or deliver, a controlled substance or under federal or any state law? (See Wis. Stats. 111.335(1)(cs).) List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Since your 17 th 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

5/8/12
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. Kobus
Authorized signature performing background check

5/10/2012
Date

Receipt # 17640 Dated: 5/8/12 Mail or Pick Up Date: _____

WISCONSIN

SELLER / SERVER CERTIFICATION

Trainee Name: Jared A Hazaert

Date of Completion: 05/08/2012 13:57 CST

School Name: Learn2Serve

Certification #: WI 1844913

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



Corporate Headquarters

13801 N. Mopac Suite 100

Austin, Texas 78727

IP: 800-442-4149

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

05/10/2012

Order Number : 3195964

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

Name	JARED A HAZAERT
Date of Birth	[REDACTED]
Sex	M
Race	W

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.

REC'D APR 20 2012



**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 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>2012-20</u>
Filling Out Your Application: <ul style="list-style-type: none"> 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. Review Of Your Application: <ul style="list-style-type: none"> 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>Hull</u>	First Name: <u>Emily</u>	Middle Name: <u>Alice</u>
Residence: Street Address: <u>2405 Farlin Avenue #1</u>	City: <u>Green Bay</u>	State: <u>WI</u>
Residence Phone: <u>906 396 2881</u>	Birthdate: [REDACTED]	Zip: <u>54302</u>
Birth Place (City, State): <u>Iron Mountain MI</u>	Race: <u>White</u>	Sex: <u>F</u>
Height: <u>5'9</u>	Weight: <u>170</u>	Hair: <u>Blonde</u>
Driver's License # (State & Number): [REDACTED]	Establishment Where Employed: <u>VFW- Howard</u>	Eyes: <u>Green</u>
Contact Person & Phone Number: <u>JACKI</u>		
Other Names, Aliases or Birthdates ever used:		
Cities & States lived in the past 10 years: <u>Norway MI</u>	From: <u>1988</u>	To: <u>2011</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

SELLER / SERVER CERTIFICATION

Trainee Name: Emily A Hull

Date of Completion: 04/18/2012 00:22 CST

School Name: Learn2Serve

Certification #: WI 1829046



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

Corporate Headquarters
13601 N. Venetia Suite 100
Austin, Texas 78727
P: 800-442-1149

MICHIGAN

OPERATOR LICENSE



EMILY ALICE HULL
2110 5TH AVE
NORWAY, MI 49870-1612

EXPIRES
12-13-2013

Date of birth	Sex	Height	Eyes	Lic Type	Endorsements
[REDACTED]	F	510	GRN O		NONE

Restrictions: NONE

See back for medical information anatomical gift

Emily Hull

Y230383D

PROVISIONAL OPERATORS LICENSE

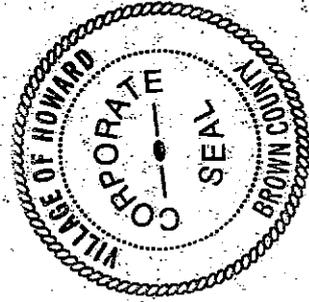
NO. 2012-020

\$ 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 Emily A. Hull 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 June 20th, 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 20th day of April, 2012

[Signature]
Deputy Clerk

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU**05/03/2012****Order Number : 3186035**

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

Name	EMILY A HULL
Date of Birth	[REDACTED]
Sex	F
Race	W

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 checked="" 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 # <u>2012-022</u>
------------------	-----------	-------------------------------

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.

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>Goffard</u>		First Name: <u>Lina</u>		Middle Name: <u>Marie</u>				
Residence: Street Address: <u>1591 Harbor Lights Rd</u>		City: <u>Swamico</u>		State: <u>WI</u>		Zip: <u>54173</u>		
Residence Phone: <u>920621-7856</u>	Birthdate: [REDACTED]	Birth Place (City, State): <u>Green Bay, WI</u>	Race: <u>Caucasian</u>	Sex: <u>F</u>	Height: <u>5'3"</u>	Weight: <u>115</u>	Hair: <u>Blonde</u>	Eyes: <u>blue</u>
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: <u>Woodman's</u>			Contact Person & Phone Number: <u>John Tote 4991480</u>			
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): <u>Green Bay, WI</u> <u>Swamico, WI</u>	From:	To:	
		<u>1991</u>	<u>1993</u>
		<u>1993</u>	<u>present</u>
	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 th 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.

Lina S. Zard
Applicant's Signature

4-30-2012
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

5/10/12
Date

Receipt # 17251 Dated: 4/30/12 Mail or Pick Up Date: _____

You have successfully completed the ServSafe Alcohol® Responsible Alcohol Service Training and Certification Program. This is your official ServSafe Alcohol Certification Card and provides confirmation that you have studied, and are knowledgeable about, how to serve alcohol responsibly.

Thank you for participating in the ServSafe Alcohol program. Responsible alcohol service begins with the choices you make, and ServSafe Alcohol training will help you make the right decision when the moment arises.

By completing the ServSafe Alcohol program, you show your dedication to safe and responsible alcohol service. The ServSafe Alcohol program and the National Restaurant Association are dedicated to helping you continue to raise the bar on alcohol safety.

To learn more about our full suite of responsible alcohol service training products, contact your State Restaurant Association, your distributor or visit us at www.ServSafe.com.

We value your dedication to responsible alcohol service and applaud you for making the commitment to keep your operation, your customers and your community safe.

Sincerely,



Paul Hineman

Executive Director, National Restaurant Association Solutions

In Alaska you must laminate your card for it to be valid.



ID NO. 7798197

CARD NO. 8995820

ServSafe Alcohol® CERTIFICATE

LINA GOFFARD

Card expires three years from the date of the examination. Local laws apply.

DATE OF EXAMINATION

4/23/2012

Complies with WI State Stats. s.125.04(5)(a)5
& s.125.17(6) & s.134.66

NATIONAL
RESTAURANT
ASSOCIATION®

Student Name	LINA GOFFARD
Class Number	518823
Exam Date	4/23/2012
Expiration Date	4/23/2015

Overall Point Score	49
Overall % Score	81
Passing % Score	75
Status	PASSED

NOTE: You can access your score and certification information anytime at www.ServSafe.com with the class number provided on this form.

Please make a copy of your ServSafe Alcohol Certificate Card for your records. Replacement copies can be obtained for a fee by completing the Certificate and Score Release Request Form available at www.ServSafe.com.

Please feel free to address any questions regarding your certification to the National Restaurant Association Service Center Department at servicecenter@restaurant.org or 800.765.2122, ext. 6703.



175 West Jackson Boulevard, Suite 1500
Chicago, IL 60604-2814
1.800.SERV-SAFE
312.715.1010 In Chicagoland

www.ServSafe.com

©2009 National Restaurant Association Educational Foundation. All rights reserved. ServSafe Alcohol and the ServSafe Alcohol logo are registered trademarks of the National Restaurant Association Educational Foundation and used under license by National Restaurant Association Solutions, LLC, a wholly owned subsidiary of the National Restaurant Association. 10060302 v.1.112



PROVISIONAL OPERATORS LICENSE

NO. 2012-022

\$ 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 Lina Marie Goffard 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:

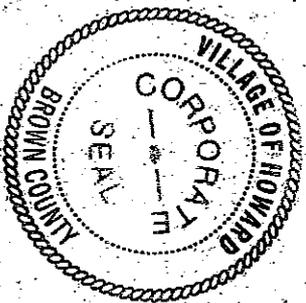
NOW THEREFORE, A Provisional Operators License, pursuant to Section 125.17(5) of the Wisconsin Statutes, and local ordinances, is hereby issued to said applicant.

For the period ending June 30th, 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 30th day of April, 2012

[Signature]
Deputy Clerk



DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

05/03/2012

Order Number : 3186035

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

Name	LINA MARIE GOFFARD
Date of Birth	[REDACTED]
Sex	F
Race	W

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.

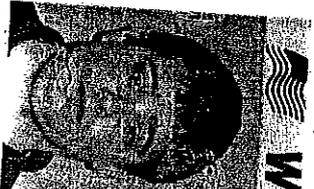
#29 MAY 04 2011
29 MAY 10 2010



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 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 # 2012-021
Filling Out Your Application: <ul style="list-style-type: none"> 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. Review Of Your Application: <ul style="list-style-type: none"> 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: GOULDER		Middle Name: PATRICK
First Name: MICHAEL		
Residence: Street Address: 539 W BREWSTER ST		City: APPLETON
Residence Phone: 920-209-2635		State: WI Zip: 54911
Birthdate: [REDACTED]	Birth Place (City, State): GREEN BAY, WI	Race: W
Sex: M	Height: 5'11"	Weight: 197
Hair: BROWN	Eyes: BROWN	
Driver's License # (State & Number): [REDACTED]	Establishment Where Employed: WOODMANS	Contact Person & Phone Number: JOHN LOTTE 499-1480
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:
539 W BREWSTER ST APPLETON WI 54911		MAY 2009 PRESENT
4839 POTTERS CROSSING AULASKI WI 54162		From: AUG 2004 To: MAY 2009
1633 CAROLE LN GREEN BAY WI 54313		From: JUNE 1992 To: AUG 2004
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 _____)		

Michael P. Gould



WISCONSIN DRIVER LICENSE

MICHAEL P GOULDER
DOB: [REDACTED]
SEX: M HGT: 5'11" WGT: 219
EYES: [REDACTED] HAIR: [REDACTED]
ISSUED: 05-14-2009
EXPIRES: 03-30-2014

539 W BREWSTER ST
APPLETON, WI 54911

You have successfully completed the ServSafe Alcohol® Responsible Alcohol Service Training and Certification Program. This is your official ServSafe Alcohol Certification Card and provides confirmation that you have studied, and are knowledgeable about, how to serve alcohol responsibly.

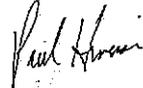
Thank you for participating in the ServSafe Alcohol program. Responsible alcohol service begins with the choices you make, and ServSafe Alcohol training will help you make the right decision when the moment arises.

By completing the ServSafe Alcohol program, you show your dedication to safe and responsible alcohol service. The ServSafe Alcohol program and the National Restaurant Association are dedicated to helping you continue to raise the bar on alcohol safety.

To learn more about our full suite of responsible alcohol service training products, contact your State Restaurant Association, your distributor or visit us at www.ServSafe.com.

We value your dedication to responsible alcohol service and applaud you for making the commitment to keep your operation, your customers and your community safe.

Sincerely,



Paul Hineman

Executive Director, National Restaurant Association Solutions

In Alaska you must laminate your card for it to be valid.



ID NO. 7772822

CARD NO. 8977926

ServSafe Alcohol® CERTIFICATE

MIKE GOULDER

Card expires three years from the date of the examination. Local laws apply.

DATE OF EXAMINATION

4/16/2012

Complies with WI State Stats. s.125.04(5)(a)5
& s.125.17(6) & s.134.66

NATIONAL
RESTAURANT
ASSOCIATION®

Student Name	MIKE GOULDER
Class Number	518823
Exam Date	4/16/2012
Expiration Date	4/16/2015

Overall Point Score	45
Overall % Score	75
Passing % Score	75
Status	PASSED

NOTE: You can access your score and certification information anytime at www.ServSafe.com with the class number provided on this form.

Please make a copy of your ServSafe Alcohol Certificate Card for your records. Replacement copies can be obtained for a fee by completing the Certificate and Score Release Request Form available at www.ServSafe.com.

Please feel free to address any questions regarding your certification to the National Restaurant Association Service Center Department at servicecenter@restaurant.org or 800.765.2122, ext. 6703.

NATIONAL
RESTAURANT
ASSOCIATION®

175 West Jackson Boulevard, Suite 1500
Chicago, IL 60604-2814
1.800.SERV-SAFE
312.715.1010 In Chicagoland

www.ServSafe.com

©2009 National Restaurant Association Educational Foundation. All rights reserved. ServSafe Alcohol and the ServSafe Alcohol logo are registered trademarks of the National Restaurant Association Educational Foundation, and used under license by National Restaurant Association Solutions, LLC, a wholly owned subsidiary of the National Restaurant Association. 10060302 v.1112

 ServSafe

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU**05/03/2012****Order Number : 3186035**

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

Name	MICHAEL P GOULDER
Date of Birth	[REDACTED]
Sex	M
Race	W

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.

PROVISIONAL OPERATORS LICENSE

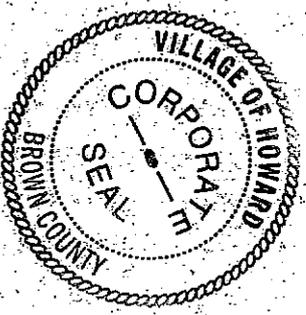
NO. 2012-021

\$ 15.00

WHEREAS, The local governing body of the Village of Howard County of Wisconsin, has, upon application duly made and authorized the issuance of a Provisional Operators License to Michael Patrick Goulder 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 June 26th, 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 26th day of April, 2012
Shirley L. Smith
Deputy Clerk



**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.

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>Russell</u>		First Name: <u>Tracy</u>		Middle Name: <u>Lynn</u>				
Residence: Street Address: <u>974 Hickory Hill</u>		City: <u>Green Bay</u>		State: <u>WI</u>		Zip: <u>54304</u>		
Residence Phone: <u>(920) 544-3313</u>	Birthdate: <u>[REDACTED]</u>	Birth Place (City, State): <u>Green Bay, WI</u>	Race: <u>white</u>	Sex: <u>F</u>	Height: <u>5'6"</u>	Weight: <u>130</u>	Hair: <u>Brown</u>	Eyes: <u>Hazel</u>
Driver's License # (State & Number): <u>[REDACTED]</u>		Establishment Where Employed: <u>Anduzzi's Howard</u>			Contact Person & Phone Number: <u>MIKA TOMASIK</u> <u>(920) 544-8268</u>			
Other Names, Aliases or Birthdates ever used:								

Cities & States lived in the past 10 years:	From:	To:

Please check box below if you have lived at this address for 10 years or more:	From:	To:
<input type="checkbox"/>		

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

U.S. Citizen Alien Temporary Resident (Employment Number _____)

Have you ever been convicted of a crime of manufacturing, distributing or delivering a controlled substance or controlled substance; possessing, with intent to manufacture, distribute or deliver, a controlled substance or under federal or any state law? (See Wis. Stats. 111.335(1)(cs).) List below:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Since your 17 th 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.

Tracy Russell
Applicant's Signature

5/3/2012
Date

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

<input checked="" type="checkbox"/>	Subject has no Criminal Arrest Record with either the Wisconsin State Crime Bureau
<input type="checkbox"/>	Files indicate that subject has the attached Criminal Arrest Record.

Lynn K. Kobus
Authorized signature performing background check

5/10/2012
Date

Receipt # 17426 Dated: 5/3/12 Mail or Pick Up Date: _____

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

05/10/2012

Order Number : 3195964

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

Name	TRACY L RUSSELL
Date of Birth	[REDACTED]
Sex	F
Race	W

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

SELLER / SERVER CERTIFICATION

Trainee Name: Tracy L Russell

Date of Completion: 04/27/2012 14:13 CST

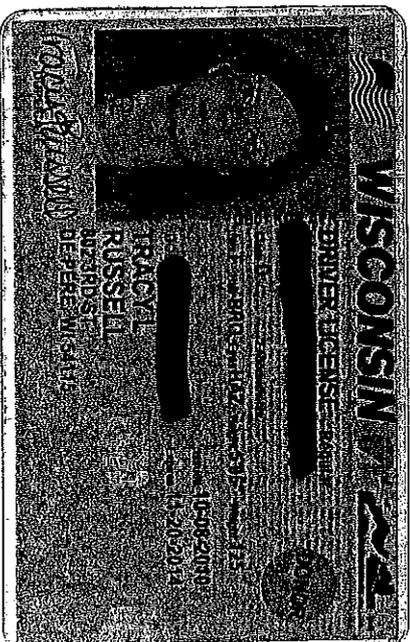
School Name: Learn2Serve

Certification #: WI 1836710

I, Tracy L Russell

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

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66



Corporate Headquarters

15801 N. Mopac, Suite 109

Austin, Texas 78727

P. 800-442-1429



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.

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: Temple			First Name: Betty			Middle Name: Jean					
Residence: Street Address: 2366 Manitowoc Rd.			City: Green Bay			State: WI		Zip: 54311			
Residence Phone: (920) 445-16504		Birthdate: [REDACTED]		Birth Place (City, State): Green Bay, WI		Race: W	Sex: F	Height: 5'4"	Weight: 130	Hair: Blonde	Eyes: Blue
Driver's License # (State & Number): [REDACTED]				Establishment Where Employed: Anduzzis				Contact Person & Phone Number: Mike [REDACTED] Tomasik (920) 544-8268			

Other Names, Aliases or Birthdates ever used: none

Cities & States lived in the past 10 years:		From:		To:	
Manitowoc, WI.		Green Bay, WI		Birth 1982	
Maribel, WI.				2007	
Cato, WI.					

Please check box below if you have lived at this address for 10 years or more:

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: Yes No

Since your 17th birthday, have you ever been convicted of a felony or misdemeanor (including criminal traffic offenses)? List below: Yes No
Disorderly Conduct, 1 year ago, Speeding 6 years ago

As a juvenile, were you ever waived into adult court and convicted of a felony or misdemeanor? List below: Yes No
PTCB - March 1999, Brown County

Have you even been convicted by military court-martial? List below: Yes No

Are you currently subject to any pending charges? List below: Yes No

List all convictions, citations, tickets and pending charges:

MONTH/YEAR	LOCATION	CHARGE	DISPOSITION
Summer 2001	Denmark, WI	Disorderly Conduct	fine
2006	Beillion, WI.	Speeding	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.

Debbie Jempele
Applicant's Signature

05-07-2012
Date

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

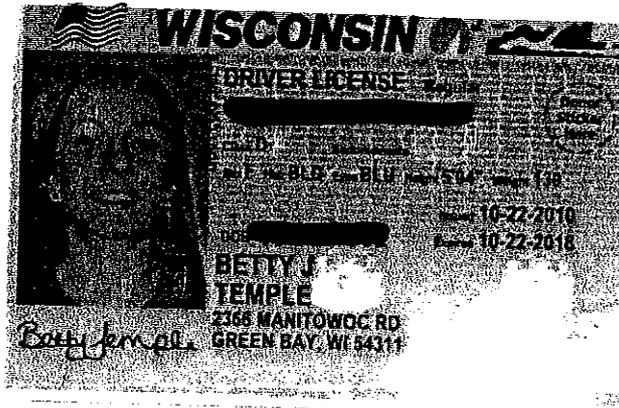
Subject has no Criminal Arrest Record with either the Wisconsin State Crime Bureau

Files indicate that subject has the attached Criminal Arrest Record.

Lynn K. Robus
Authorized signature performing background check

5/10/2012
Date

Receipt # 17590 Dated: 5/7/12 Mail or Pick Up Date: _____



City of Green Bay
Operator's License

Betty J Temple

DOB: [REDACTED]
Expires: 06/30

10 11 12 13 14 15 16

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU**05/10/2012****Order Number : 3195964**

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

Name	BETTY J TEMPLE
Date of Birth	[REDACTED]
Sex	F
Race	W

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 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.

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: VANDENPLAS		First Name: APRIL		Middle Name: MICHELLE			
Residence: Street Address: 2149 TRUE LN		City: GREEN BAY		State: WI		Zip: 54304	
Residence Phone: 9208192640	Birthdate: [REDACTED]	Birth Place (City, State): CHERKY POINT NC	Race: WH	Sex: F	Height: 57	Weight: 150	Hair: BR Eyes: BI
Driver's License # (State & Number): [REDACTED]	Establishment Where Employed: ANDUZZIS HOWARD			Contact Person & Phone Number: MICHAEL TOMASIK			

Other Names, Aliases or Birthdates ever used:
 SURNAMES: BARBER PROKASH

Cities & States lived in the past 10 years: GREEN BAY WI	From:	To:
---	-------	-----

Please check box below if you have lived at this address for 10 years or more:

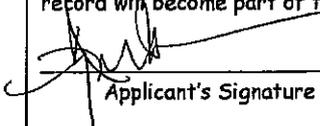
Indicate whether you are a U.S. Citizen, U.S. Alien or Temporary Resident:
 U.S. Citizen Alien Temporary Resident (Employment Number _____)

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 th 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.


 Applicant's Signature

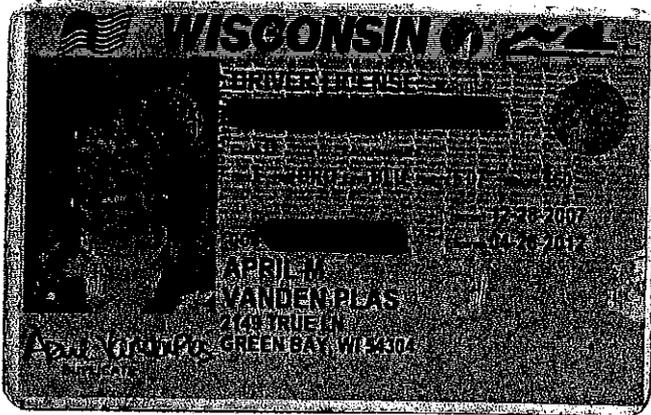
05/02/12
 Date

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. Kobus 5/10/12
 Authorized signature performing background check Date

Receipt # 17331 Dated: 5/2/12 Mail or Pick Up Date: _____



**WISCONSIN
TECHNICAL COLLEGE
SYSTEM**

Responsible Beverage Service Course Completion Certificate

April Vanden Plas
Name of student

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

Date of course completion 7/19/10

Name of instructor M. J. Cuneo

Wisconsin Technical College issuing certificate Northeast Wisconsin Technical College

David Chung
Wisconsin Technical College System President

[Signature]
Northeast Wisconsin Technical College President

5684BIT jk 1.09

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

05/03/2012

Order Number : 3186035

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

Name	APRIL M VANDEN PLAS
Date of Birth	[REDACTED]
Sex	F
Race	W

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: <ul style="list-style-type: none"> 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. Review Of Your Application: <ul style="list-style-type: none"> 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: Vandervest	First Name: Lynn	Middle Name: Jane +
Residence: Street Address: 5881 Marip Rd	City: New Franken	State: WI
Residence Phone: 920 866 9641	Birthdate: [REDACTED]	Zip: 54229
Birth Place (City, State): Green Bay WI	Race: W	Sex: F
Height: 5'4"	Weight: 160	Hair: Br
Eyes: Blue	Establishment Where Employed: Vandervest Harley-Davidson	Contact Person & Phone Number: Self
Other Names, Aliases or Birthdates ever used:		
Cities & States lived in the past 10 years:	From:	To:
Please check box below if you have lived at this address for 10 years or more: <input checked="" type="checkbox"/>	From: 1999	To: Present
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 th 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.

Ryan J. Vanderveest
Applicant's Signature

May 1 2012
Date

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

<input checked="" type="checkbox"/>	Subject has no Criminal Arrest Record with either the Wisconsin State Crime Bureau...
<input type="checkbox"/>	Files indicate that subject has the attached Criminal Arrest Record.

Lynn K. Kobus
Authorized signature performing background check

5/10/2012
Date

Receipt # 17274 Dated: 5/1/12 Mail or Pick Up Date: _____

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

05/03/2012

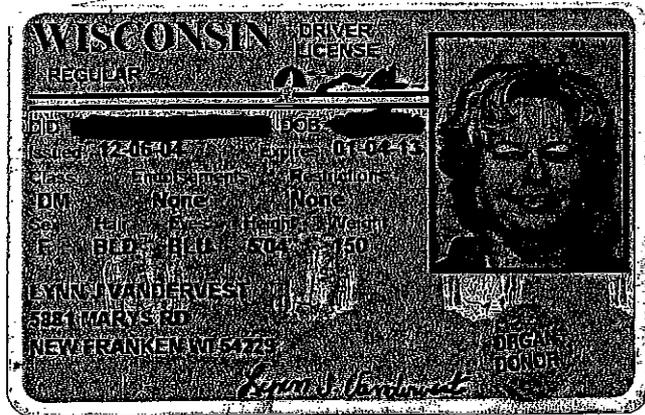
Order Number : 3186035

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

Name	LYNN J VANDERVEST
Date of Birth	[REDACTED]
Sex	F
Race	W

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'S LICENSE

No. 44

\$10.00

WHEREAS, the local governing body of the
CITY OF PESHTIGO,
COUNTY OF MARINETTE, WISCONSIN,
has upon application duly made, granted and authorized the
issuance of an "Operator's" License to:
LYNN J. VANDERVEST

AND WHEREAS, the said applicant has paid to the treasurer
the sum of \$10.00 as required by local ordinances and has
complied with all requirements necessary for obtaining a
license;

NOW THEREFORE, an "Operator's" License, pursuant to
sections 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**

Given under my hand and the corporate seal of the **CITY OF
PESHTIGO, COUNTY OF MARINETTE, STATE OF
WISCONSIN** this 8th Day of June, 2011.

Mary Ann Wills, Clerk



**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: <ul style="list-style-type: none"> 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. Review Of Your Application: <ul style="list-style-type: none"> 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: Vanderwest		First Name: Rick
		Middle Name: Elmer
Residence: Street Address: 5881 Mary Rd		City: New Franken
		State: WI
		Zip: 54229
Residence Phone: 920 866 9641	Birthdate: [REDACTED]	Birth Place (City, State): Green Bay WI
		Race: W
		Sex: M
		Height: 6'
		Weight: 210
		Hair: Bl
		Eyes: Blue
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: Vanderwest Harley-Davidson
		Contact Person & Phone Number: Self
Other Names, Aliases or Birthdates ever used:		
Cities & States lived in the past 10 years:		
		From: _____
		To: _____
Please check box below if you have lived at this address for 10 years or more:		From: _____
<input checked="" type="checkbox"/>		To: Present
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 th 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.

Rick E Vanderwest
Applicant's Signature

5-1-12
Date

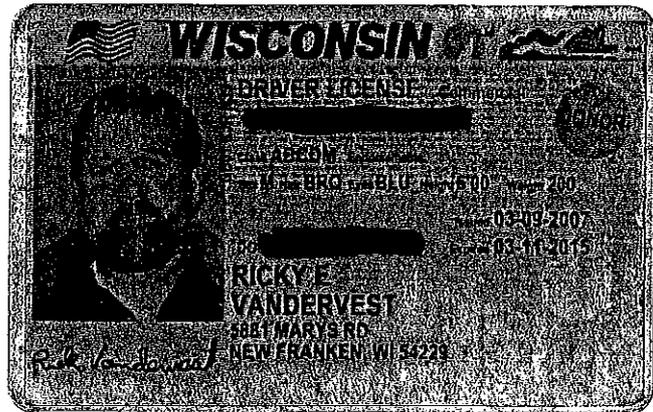
To be filled out by the Howard Police Department or Clerical Staff

<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. Kobus
Authorized signature performing background check

5/10/12
Date

Receipt # 17274 Dated: 5/1/12 Mail or Pick Up Date: _____



AND WHEREAS, the said applicant has paid to the treasurer the sum of \$10.00 as required by local ordinances and has complied with all requirements necessary for obtaining a license;

NOW THEREFORE, an "Operator's" License, pursuant to sections 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

Given under my hand and the corporate seal of the CITY OF PESHTIGO, COUNTY OF MARINETTE, STATE OF WISCONSIN this 8th Day of June, 2011.

Mary Ann Wills, Clerk

OPERATOR'S LICENSE

No. 45

\$10.00

WHEREAS, the local governing body of the
CITY OF PESHTIGO,
COUNTY OF MARINETTE, WISCONSIN,
has upon application duly made, granted and authorized the
issuance of an "Operator's" License to:

RICK E. VANDERVEST

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

05/03/2012

Order Number : 3186035

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

Name	RICK E VANDERVEST
Date of Birth	[REDACTED]
Sex	M
Race	W

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.
