



Operator License Application Village of Howard

<input type="checkbox"/> New <input checked="" 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: <u>Armstrong</u>		First Name: <u>TAMMY</u>
Residence: Street Address: <u>1405 Flobengoa Lane</u>		Middle Name: <u>KAYE</u>
Residence Phone: <u>930-621-5357</u>	City: <u>Sobieski</u>	State: <u>WI</u> Zip: <u>54171</u>
Birthdate: [REDACTED]	Birth Place (City, State): <u>Ashkosh WI</u>	Race: <u>W</u> Sex: <u>F</u> Height: <u>5'2"</u> Weight: <u>120</u> Hair: <u>BR</u> Eyes: <u>Hazel</u>
Driver's License # (State & Number): [REDACTED]	Establishment Where Employed: <u>Chasers Bar & Grill</u>	Contact Person & Phone Number: <u>Dave Golik 601-4100</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:		
<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: <i>OWI</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:	<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
<i>DEC 2009</i>	<i>Dconto County</i>	<i>OWI</i>	<i>closed</i>

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.

Johnny Armatron
Applicant's Signature

4-26-11
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.

<u><i>Lynn K. Kobers</i></u> Authorized signature performing background check	<u><i>6/2/2011</i></u> Date
--	--------------------------------

Receipt # *2696* Dated: *6-2-2011* Mail or Pick Up Date: _____

*Previous License Issued
2009-0162*

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

06/02/2011

Order Number : 2813973

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

Name	TAMMY K ARMSTRONG
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.

HOWARD, WI VILLAGE

2456 GLENDALE AVE
 PO BOX 12207
 GREEN BAY WI 54313
 920-434-4640

Transaction 2696
 02-Jun-11 03:03pm

Operators License	\$40.00
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David M Golik - Chasers

Operators License	\$40.00
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Tammy Kaye Armstrong - Chasers

Operators License	\$40.00
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Alice Kussow - Chasers

Subtotal	\$120.00
Check	\$120.00



Operator License Application
Village of Howard

<input type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$5.00
<input checked="" type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00	
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

Office Use Only:	License #	Provisional #
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Filling Out Your Application:

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- If you have any doubt as to whether to include the facts of a specific incident, it is recommended that you disclose the information.
- 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: Baye		First Name: Julie			Middle Name: Ann					
Residence: Street Address: 1551 Biemeret St		City: Green Bay			State: WI		Zip: 54304			
Residence Phone: 544-9392		Birthdate: [REDACTED]	Birth Place (City, State): Green Bay WI		Race: W	Sex: F	Height: 5'7"	Weight: 110	Hair: Bl	Eyes: Hazel
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: Farr's Grove			Contact Person & Phone Number: Jerry Farr 494-9956					

Other Names, Aliases or Birthdates ever used:
Julie Ann Van Ark

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

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

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 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:	<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
Nov 1981	Green Bay	Disorderly Conduct	Fine
June 1994	Green Bay	Disorderly/Domestic	Dismissed
Nov 1995	Green Bay	Disorderly/Domestic	Dismissed

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.

Julie A. Baye
Applicant's Signature

6-7-11
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 6/9/2011
Authorized signature performing background check Date

Receipt # 2857 Dated: 6/7/2011 Mail or Pick Up Date: _____

OPERATOR'S LICENSE

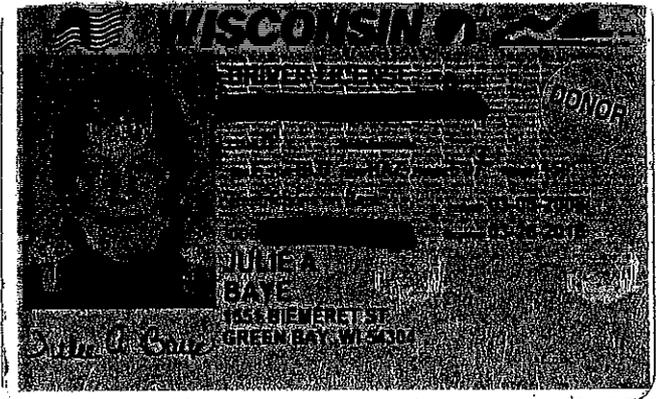
No. 2010-077 \$ 40.00

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

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

For the period ending June 30, 2011
Date

Lynn K. Kobus Deputy Clerk
ART-8 WS



HOWARD, WI VILLAGE

2456 GLENDALE AVE
PO BOX 12207
GREEN BAY WI 54313
920-434-4640

Transaction 2857
07-Jun-11 10:57am

Operators License
Julie Ann Baye \$40.00

Subtotal \$40.00
CC \$40.00

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

06/08/2011

Order Number : 2820972

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

Name	JULIE A BAYE
Date of Birth	[REDACTED]
Sex	F
Race	W

**Wisconsin Criminal History**

Report Date: 06/08/2011

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**JULIE ANN VANARK**

Alias Names/Fraudulent Data

Female / White

Born in Wisconsin ; Citizen of USA

[REDACTED]
5'06" 145lbs Green Eyes ; Blonde Or Strawberry Hair
1103 Lincoln St, Green Bay, WI

FBI: Unknown

STATE ID: WI286601

FINGERPRINT 13530811120655531209
CLASS:

EMPLOYER: Unknown

OCCUPATION: Unknown

ALIAS NAMES/FRAUDULENT DATA:Alias JULIE ANN BAYE JULIE A VANARK
Names:

CRIMINAL HISTORY**Cycle 1**

EARLIEST EVENT DATE: November 20, 1981

DATE OF OFFENSE: November 20, 1981

ARREST DATA

SUBJECT NAME: JULIE ANN VANARK

TYPE: Adult Only

DATE: November 20, 1981

ARREST AGENCY: WI0050200 GREEN BAY PD

BOOKING

AGENCY: WI0050200 GREEN BAY PD

CHARGE

SEQUENCE NUMBER: 01

LITERAL: DISORDERLY CONDUCT

NCIC CODE: 5311

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Other

COURT

SUBJECT NAME: JULIE ANN VANARK

DATE: February 12, 1982

CASE NUMBER: 110862
 COURT: MUNICIPAL COURTWI000000M
 CHARGE
 SEQUENCE NUMBER: 01
 LITERAL: DISORDERLY CONDUCT
 NCIC CODE: 5311
 COUNTS: 1
 CLASSIFICATION:
 CHARGE SEVERITY: Other

COURT ACTION:
 LITERAL: Convicted
 DISPOSITION DATE: February 12, 1982
 DISPOSITION: CONVICTED

SENTENCING
 DATE: February 12, 1982
 CASE NUMBER: 110862
 CONVICTED OFFENSE:
 CHARGE SEQUENCE NUMBER: 01
 SENTENCE:
 SENTENCE: Fine
 SENTENCE BEGIN DATE: 1982-02-12

Cycle 2
 EARLIEST EVENT DATE: June 15, 1994
 DATE OF OFFENSE: June 15, 1994

ARREST DATA
 SUBJECT NAME: JULIE ANN BAYE
 TYPE: Adult Only
 DATE: June 15, 1994
 ARREST AGENCY: WI0050200 GREEN BAY PD

BOOKING
 AGENCY: WI0050200 GREEN BAY PD

CHARGE
 SEQUENCE NUMBER: 01
 LITERAL: DISORDERLY CONDUCT-DOMESTIC ABUSE
 NCIC CODE: 5311
 COUNTS: 1
 CLASSIFICATION:
 CHARGE SEVERITY: Other

COURT
 SUBJECT NAME: JULIE ANN BAYE
 DATE: June 15, 1994, July 27, 1994
 CASE NUMBER: M0220765
 COURT: Unknown, MUNICIPAL COURTWI000000M

CHARGE
 SEQUENCE NUMBER: 01
 LITERAL: DISORDERLY CONDUCT-DOMESTIC ABUSE
 NCIC CODE: 5311
 COUNTS: 1

CLASSIFICATION:**CHARGE SEVERITY:** Other**COURT ACTION:****LITERAL:** Other**DISPOSITION DATE:** June 15, 1994**DISPOSITION:** DISPOSITION NOT REPORTED**CHARGE****SEQUENCE NUMBER:** 02**LITERAL:** DISORDERLY CONDUCT**NCIC CODE:** 5311**COUNTS:** 1**CLASSIFICATION:****CHARGE SEVERITY:** Other**COURT ACTION:****LITERAL:** Dismissed**DISPOSITION DATE:** July 27, 1994**DISPOSITION:** DISMISSED**Cycle 3****EARLIEST EVENT DATE:** November 04, 1995**DATE OF OFFENSE:** November 04, 1995**ARREST DATA****SUBJECT NAME:** JULIE ANN BAYE**TYPE:** Adult Only**DATE:** November 04, 1995**ARREST AGENCY:** WI0050200 GREEN BAY PD**BOOKING****AGENCY:** WI0050200 GREEN BAY PD**CHARGE****SEQUENCE NUMBER:** 01**STATUTE NUMBER:** 947.01**STATUTE NUMBER:** 968. DOMESTIC ABUSE RELATED**LITERAL:** DISORDERLY CONDUCT**NCIC CODE:** 5311**COUNTS:** 1**CLASSIFICATION:****CHARGE SEVERITY:** Misdemeanor**PROSECUTION****PROSECUTOR:** Unknown**CHARGE****SEQUENCE NUMBER:** 01**STATUTE NUMBER:** 947.01**STATUTE NUMBER:** 968. DOMESTIC ABUSE RELATED**LITERAL:** DISORDERLY CONDUCT**NCIC CODE:** 5311**COUNTS:** 1**CLASSIFICATION:****CHARGE SEVERITY:** Misdemeanor**PROSECUTION ACTION:**

LITERAL: Dismissed
DISPOSITION DATE: April 17, 1996
DISPOSITION: NO PROSECUTION

CONTRIBUTING AGENCIES

WI0050200 Green Bay Pd
WI000000M Municipal Court

YOUR REQUEST:

User ID:	10562	Date & Time:	06/08/2011 10:09:13
State Ident Number:	WI286601	Purpose Code:	A



**Operator License Application
Village of Howard**

<input type="checkbox"/> New <input checked="" type="checkbox"/> Renewal	<input checked="" type="checkbox"/> Operator \$ 40.00 <input type="checkbox"/> Provisional \$ 15.00	<input type="checkbox"/> Duplicate License \$5.00
<input checked="" type="checkbox"/> Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

Office Use Only:	License #	Provisional #
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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: Berg		First Name: Marla		Middle Name: Marie				
Residence: Street Address: 2654 Tulip Ln		City: Green Bay		State: WI		Zip: 54313		
Residence Phone: 609-1610	Birthdate: [REDACTED]	Birth Place (City, State): Green Bay WI	Race: Wh	Sex: F	Height: 5'8"	Weight: 145	Hair: Bl	Eyes: Bl
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: Farris Grove			Contact Person & Phone Number: Jerry Farris 494-9956			

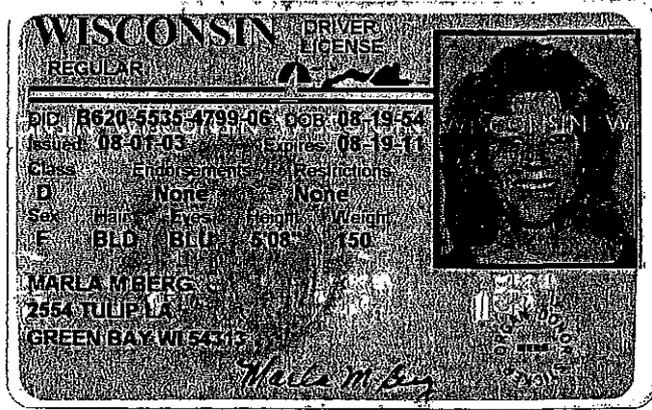
Other Names, Aliases or Birthdates ever used:

Cities & States lived in the past 10 years:	From:	To:
Green Bay WI	my whole	life

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 _____)



OPERATOR'S LICENSE

No. 2009-0043 \$ 40.00

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

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

For the period ending June 30, 2011
Date

Lynn Kobus Deputy Clerk
ABT-8 WS

HOWARD, WI VILLAGE
 2456 GLENDALE AVE
 PO BOX 12207
 GREEN BAY WI 54313
 920-434-4640
 Transaction 2581
 01-Jun-11 09:38am

Operators License
 Marla Marie Berg \$40.00

Subtotal \$40.00
 Cash \$40.00

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

06/02/2011

Order Number : 2812952

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

Name	MARLA M BERG
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 type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$ 5.00	
<input checked="" type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00		
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____			
Office Use Only:	License #	Provisional #	
Filling Out Your Application:			
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Review Of Your Application:			
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Last Name: <i>Beyer</i>		First Name: <i>Scott</i>	
Residence: Street Address: <i>3071 Mercedes Dr.</i>		Middle Name: <i>Joseph</i>	
City: <i>Green Bay</i>		State: <i>WI</i>	
Residence Phone: <i>920 662-9156</i>		Zip: <i>54313</i>	
Birthdate: [REDACTED]		Birth Place (City, State): <i>Green Bay, WI</i>	
Race: <i>W</i>		Sex: <i>M</i>	
Height: <i>5'11"</i>		Weight: <i>193</i>	
Hair: <i>Br</i>		Eyes: <i>Bl</i>	
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: <i>Farr's Grove</i>	
Contact Person & Phone Number: <i>Jerry Farr 494-9956</i>		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:	
		To:	
Indicate whether you are a U.S. Citizen, U.S. Alien or Temporary Resident:			
<input checked="" type="checkbox"/> U.S. Citizen <input type="checkbox"/> Alien <input type="checkbox"/> Temporary Resident (Employment Number _____)			

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

Adrian B...
Applicant's Signature

6-8-11
Date

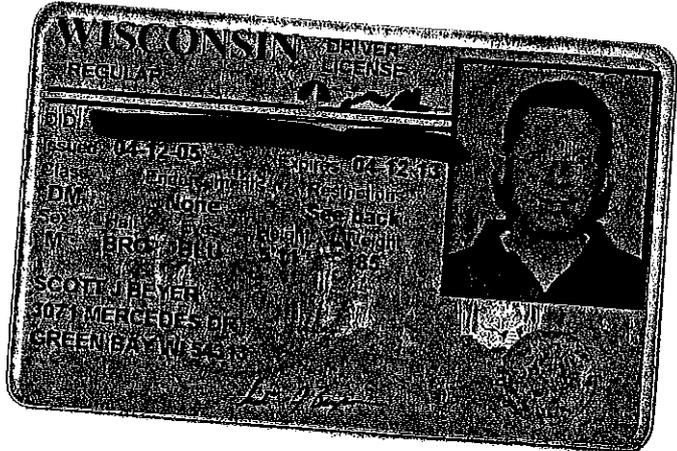
To be filled out by the Howard Police Department or Clerical Staff

<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. Kobas 6/9/2011
Authorized signature performing background check Date

Receipt # 2929 Dated: 6/9/2011 Mail or Pick Up Date: _____

No. 2009-0120
 Issued to: Scott
Joseph
Beyer 8/13/19
 Village - Town - City of Howard mailed
 or the period ending:
 on June 30, 2011
 Clerk LR



Operators License \$40.00
 Scott J. Beyer - Operator Renewal Application
 Dept Total \$40.00
 Tax Payment \$40.00

HOWARD, WI VILLAGE

2456 GLENDALE AVE
 PO BOX 12207
 GREEN BAY WI 54313
 920-434-4640
 Transaction 2929
 08-Jun-11 12:38pm

Operators License	\$40.00
Scott Joseph Beyer	
Recreation Programs	\$15.00
Tae Kwon Do Scott Beyer	

Subtotal \$55.00
 CC \$55.00

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

06/09/2011

Order Number : 2823747

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

Name	SCOTT J BEYER
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.



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Village of Howard**

<input type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$5.00
<input checked="" type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00	
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Office Use Only:	License #	Provisional #
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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: Biaggio		First Name: Mary		Middle Name: Jane							
Residence: Street Address: 1501 14th Ave		City: Green Bay		State: Wisc		Zip: 54304					
Residence Phone: 920-405-0292		Birthdate: [REDACTED]		Birth Place (City, State): Green Bay Wisc		Race: wh	Sex: F	Height: 5-2	Weight: 130	Hair: BRN	Eyes: BL
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: Kwik Trip				Contact Person & Phone Number: Andy MiHag 4340341					

Other Names, Aliases or Birthdates ever used:
Marg Denis - Macius

Cities & States lived in the past 10 years: Green Bay	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:

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

#34-2041

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 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:	<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
7/10/94	Sheboqan	Disordtly Conduct	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.

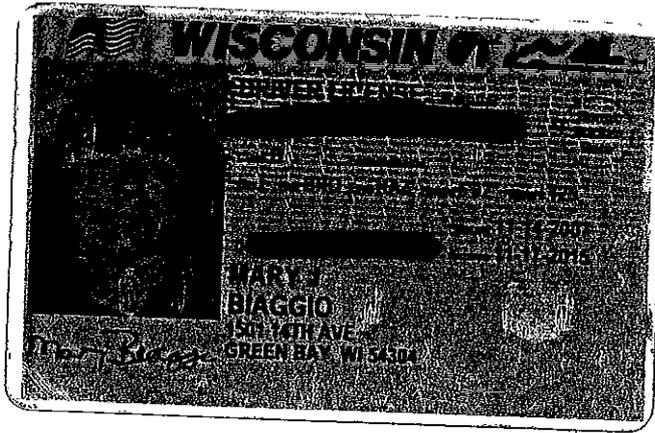
Mary Deaggo
Applicant's Signature

5/6/11
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>Amber L. Dwyer</u>	<u>5/25/11</u>
Authorized signature performing background check	Date

Receipt # 1690 Dated: 5/6/11 Mail or Pick Up Date: _____



No. 2009-0143 OPERATOR'S LICENSE \$ 40.00
WHEREAS, The local governing body of the [Village - Town - City] of Howard, County of Brown, Wisconsin, has upon application duly made, granted and authorized the issuance of an "Operator's License" to Mary Jane Blaggio
AND WHEREAS, the said applicant has paid to the treasurer the sum of \$ 40.00 as required by local ordinances and has complied with all requirements necessary for obtaining a license. Now therefore, an Operator's License, pursuant to Section 125.32(2) and 125.68(2) of the Wisconsin Statutes, and local ordinances, is hereby issued to said applicant.
For the period ending June 30, 2011
Date
Lynn K. Kobus Deputy Clerk
ABT-8 WS

HOWARD, WI VILLAGE

2456 GLENDALE AVE
PO BOX 12207
GREEN BAY WI 54313
920-434-4640

Transaction 1690
06-May-11 08:46am

Operators License

\$40.00

Mary Jane Blaggio

Subtotal

\$40.00

CC

\$40.00

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

05/18/2011

Order Number : 2795716

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

Name	MARY JANE BIAGGIO
Date of Birth	[REDACTED]
Sex	F
Race	W
Alias	MARY JANE DENIS NACIUS

**Wisconsin Criminal History**

Report Date: 05/18/2011

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.

RECORD LAST UPDATED: 06/06/2007Identification Criminal History Contributing Agencies Your Request

IDENTIFICATION**MARY J BIAGGIO**

Female / White

Born in Wisconsin ; Citizen of USA

[REDACTED]
5'02" 120lbs Hazel Eyes ; Brown Hair

2122 S 10th St, Sheboygan, WI as of 07/10/1994

FBI: Unknown

STATE ID: WI631803

EMPLOYER: Unknown

OCCUPATION: Unknown

CRIMINAL HISTORY**Cycle 1**

EARLIEST EVENT DATE: July 10, 1994

DATE OF OFFENSE: July 10, 1994

ARREST DATA

SUBJECT NAME: MARY J BIAGGIO

TYPE: Adult Only

DATE: July 10, 1994

ARREST AGENCY: WI0600200 SHEBOYGAN POLICE DEPARTMENT

BOOKING

AGENCY: WI0600200 SHEBOYGAN POLICE DEPARTMENT

CHARGE

SEQUENCE NUMBER: 01

STATUTE NUMBER: 947.01

STATUTE NUMBER: 968. DOMESTIC ABUSE RELATED

LITERAL: DISORDERLY CONDUCT

NCIC CODE: 5311

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT

SUBJECT NAME: MARY J BIAGGIO

DATE: August 29, 1994

CASE NUMBER: 94CM603

COURT: SHEBOYGAN CO CIRCUIT COURT BRANCH 4WI060043J

CHARGE

SEQUENCE NUMBER: 01
LITERAL: DISORDERLY CONDUCT
NCIC CODE: 5311
COUNTS: 1
CLASSIFICATION:

CHARGE SEVERITY: Other

COURT ACTION:

LITERAL: Convicted
DISPOSITION DATE: August 29, 1994
DISPOSITION: CONVICTED

SENTENCING

DATE: August 29, 1994
CASE NUMBER: 94CM603
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 01

SENTENCE:

SENTENCE: Fine
SENTENCE BEGIN DATE: 1994-08-29

CONTRIBUTING AGENCIES

WI0600200 Sheboygan Police Department
WI060043J Sheboygan Co Circuit Court Branch 4

YOUR REQUEST:

User ID:	10562	Date & Time:	05/18/2011 15:25:30
State Ident Number:	WI631803	Purpose Code:	A



**Operator License Application
Village of Howard**

<input type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$5.00
<input checked="" type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00	
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

Office Use Only:	License #	Provisional #
------------------	-----------	---------------

Filling Out Your Application:

- An Operator License is a privilege, not a right. Any false answers or omissions may result in the denial of your application. This application must be filled out accurately and completely.
- If you have any doubt as to whether to include the facts of a specific incident, it is recommended that you disclose the information.
- If you are unsure about how to respond to any questions on this form, check with the Village Clerk for clarification. Your application will not be processed until you deal with any outstanding warrants.
- You can obtain information regarding your criminal history from the police department, the court with which you interacted, or the Wisconsin Circuit Court Access website at: www.wcca.wicourts.gov.

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: DoKey		First Name: Mary		Middle Name: A	
Residence: Street Address: 1127 N. Buchanan		City: Green Bay		State: WI	Zip: 54313
Residence Phone: (920) 665-1141	Birthdate: [REDACTED]	Birth Place (City, State): Green Bay W	Race: F	Sex: F	Height: 4'11"
Weight: 91	Hair: Red	Eyes: Blue	Driver's License # (State & Number): [REDACTED]		
Establishment Where Employed: Kwik Trip - Howard			Contact Person & Phone Number: Ann Gullis 336-8162		
Other Names, Aliases or Birthdates ever used: Mary Delair - Coranius - Page					434-2041

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

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 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:	<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
Oct-05	Oshkosh	DUI	Guilty/No Contest
Aug-04	Resisting Arrest	to stop	11
	Oshkosh	to hurt	11
	oper. atn's while Re-worked		11

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.

Mary Deery
Applicant's Signature

5-19-11
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.

Amitha L. D...
Authorized signature performing background check

5/25/11
Date

Receipt # 2183 Dated: 5/19/11 Mail or Pick Up Date: _____

operating while intoxicated 2nd Guilty / No Contact
operating w/ Pac dismissed

Retail theft - Oct 22 1976 - fine

Feb. 24 1997 - Domestic Abuse Related - dismissed

April 23 2004 OUA

HOWARD, WI VILLAGE

2456 GLENDALE AVE
PO BOX 12207
GREEN BAY WI 54313
920-434-4640

Transaction 2183
19-May-11 11:36am

Operators License \$40.00

Jeff R Miller

Operators License \$40.00

Mary A Dokey

Subtotal \$80.00
Cash \$100.00

OPERATOR'S LICENSE

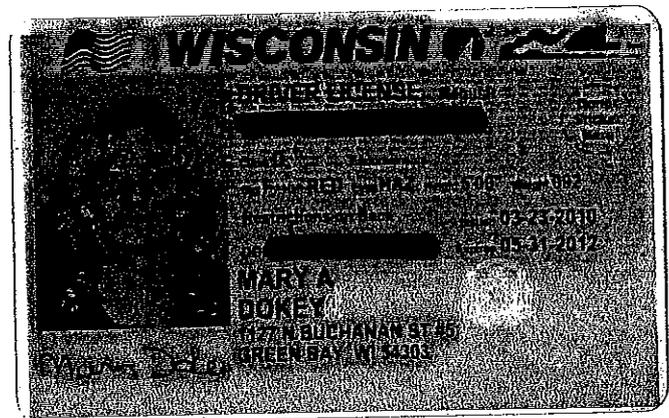
No. 2009-0155 \$ 40.00

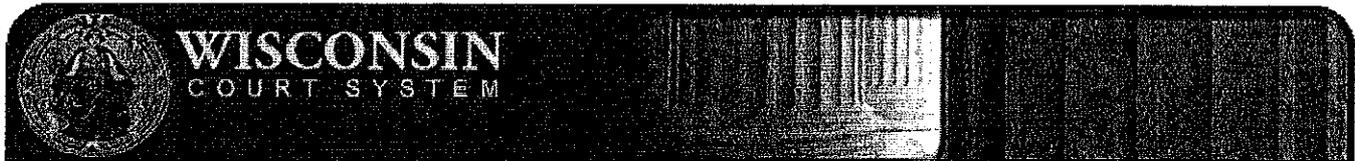
WHEREAS, The local governing body of the [Village - Town - City] of
Howard, County of Brown, Wisconsin,
has upon application duly made, granted and authorized the issuance of an "Operator's
License" to Mary A. Dokey

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

For the period ending June 30, 2011
Date

Lynn K. Kobus Deputy Clerk
ABT-8WS





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State of Wisconsin vs. Mary A Dokey

Brown County Case Number 2004CF000735

What is RSS?

Filing Date 07-21-2004
Case Type Criminal
Case Status Closed

Court Record Events
<input checked="" type="checkbox"/> Ascending Date Order
<input type="checkbox"/> Descending Date Order

Defendant Date of Birth [REDACTED]
Address 1810 9th St #6, Green Bay, WI 54304
Branch Id 3
DA Case Number 2004BR006269

Charge(s)

Count No.	Statute	Description	Severity	Disposition
1	346.04(2t)	Resisting/Failing to Stop	Misd. U	Guilty / No Contest
2	346.63(1)(a)	Operating While under Influence (3rd)	Misd. U	Guilty / No Contest
3	343.44(1)(b)	Operating While Revoked (3rd)	Misd. U	Guilty / No Contest

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

Defendant Owes the Court: \$ 0.00

Responsible Official Bischel, Sue E.
Prosecuting Agency District Attorney
Prosecuting Attorney Shaha, Roger J
Defense Attorney LaPlant, Carrie

Defendant

Defendant Name Dokey, Mary A
Date of Birth [REDACTED]
Sex Female
Race ¹
Address 1810 9th St #6, Green Bay, WI 54304
Address Updated On 06-15-2006
JUSTIS ID
Finger Print ID
Defendant Attorney(s)
Attorney Name LaPlant, Carrie
Entered 08-09-2004

Total Receivables

Court Assessments	Adjustments ³	Paid to the Court	Probation/Other Agency Amount ⁴	Balance Due to Court	Due Date ⁵
\$ 1,856.00	\$ 0.00	\$ 1,856.00	\$ 0.00	\$ 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.

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State of Wisconsin vs. Mary A Dokey

Brown County Case Number 2003CT002242

What is RSS?

Filing Date 11-13-2003
Case Type Criminal Traffic
Case Status Closed

Court Record Events
 Ascending Date Order
 Descending Date Order

Defendant Date of Birth [REDACTED]
Address 1810 9th St #6, Green Bay, WI 54304

Branch Id 8
DA Case Number

Charge(s)

Count No.	Statute	Description	Severity	Disposition
1	346.63(1)(a)	Operating while Intoxicated (2nd)	Misd. U	Guilty / No Contest
2	346.63(1)(b)	Operating with PAC .10 or More (2nd)	Misd. U	Dismissed on Prosecutor's Motion

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

Defendant Owes the Court: \$ 0.00

Responsible Official Atkinson, William
Prosecuting Agency District Attorney
Prosecuting Attorney Enli, Eric R.
Defense Attorney

Defendant

Defendant Name Dokey, Mary A
Date of Birth [REDACTED]
Sex Female
Race 1
Address 1810 9th St #6, Green Bay, WI 54304
Address Updated On 06-15-2006

JUSTIS ID
Finger Print ID

Defendant Attorney(s)

Attorney Name Langan, Alf R.
Entered 02-09-2004
Withdrawn 07-01-2004

Citations

Citation D501731-6

Bond Amount \$ 0.00
Deposit Type None
Appearance Date and Time 11-19-2003 at 08:15 am
Mandatory Yes
Name Dokey, Mary A
Date of Birth 05-31-1956
Sex Female
Address 1810 9th St #6, Green Bay, WI 54304
Address Updated On 06-15-2006
Plate Number
State
Expiration
VIN
Issuing Agency
Officer Name
Violation Date
MPH Over

Ashwaubenon Police Dept.		09-12-2003	
Plaintiff Agency	Ordinance or Statute	Statute	Charge Description
State	Statute	346.63(1)(a)	Operating while Intoxicated (2nd)
Severity			
Misd. U			

Total Receivables

Court Assessments	Adjustments ³	Paid to the Court	Probation/Other Agency Amount ⁴	Balance Due to Court	Due Date ⁵
\$ 1,250.24	\$ 0.00	\$ 1,250.24	\$ 0.00	\$ 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.

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⁵ For cases with multiple assessments, the due date represents the assessment with the latest date.

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State of Wisconsin vs. Mary A Dokey

Brown County Case Number 2002CM000758

What is RSS?

Filing Date	Case Type	Case Status
05-10-2002	Criminal	Closed
Defendant Date of Birth	Address	
05-31-1956	1810 9th St #6, Green Bay, WI 54304	

Court Record Events
<input type="checkbox"/> Ascending Date Order <input type="checkbox"/> Descending Date Order

Charge(s)

Count No.	Statute	Description	Severity	Disposition
1	31.12	County/Municipality worthless check	Forf. U	Guilty / No Contest

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

Defendant Owes the Court: \$ 0.00

Responsible Official	Prosecuting Agency	Prosecuting Attorney	Defense Attorney
Gazeley, Lawrence	District Attorney	Enli, Eric R.	

Defendant

Defendant Name	Date of Birth	Sex	Race ¹
Dokey, Mary A	[REDACTED]	Female	
Address			Address Updated On
1810 9th St #6, Green Bay, WI 54304			06-15-2006
JUSTIS ID	Finger Print ID		

Total Receivables

Court Assessments	Adjustments ³	Paid to the Court	Probation/Other Agency Amount ⁴	Balance Due to Court	Due Date ⁵
\$ 153.53	\$ 0.00	\$ 153.53	\$ 0.00	\$ 0.00	08-06-2002

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.

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DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

05/19/2011

Order Number : 2797094

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

Name	MARY A DOKEY
Date of Birth	[REDACTED]
Sex	F
Race	W
Alias	MARY A DELAIR
	MARY A GRANIUS
	MARY A PAQUE
	MARY A DOKEY



Wisconsin Criminal History

Report Date: 05/19/2011

Government



Convicted Felon

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.

ARREST DATA

SUBJECT NAME: MARY AGNES DELAIR
TYPE: Adult Only
DATE: October 09, 1976
ARREST AGENCY: WI0050200 GREEN BAY PD

BOOKING

AGENCY: WI0050200 GREEN BAY PD

CHARGE

SEQUENCE NUMBER: 01
LITERAL: RETAIL THEFT
NCIC CODE: 2303
COUNTS: 1
CLASSIFICATION:
CHARGE SEVERITY: Other

COURT

SUBJECT NAME: MARY AGNES DELAIR
DATE: October 22, 1976
COURT: Unknown

CHARGE

SEQUENCE NUMBER: 01
LITERAL: RETAIL THEFT
NCIC CODE: 2303
COUNTS: 1
CLASSIFICATION:
CHARGE SEVERITY: Other

COURT ACTION:

LITERAL: Convicted
DISPOSITION DATE: October 22, 1976
DISPOSITION: CONVICTED

SENTENCING

DATE: October 22, 1976
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 01
SENTENCE:
SENTENCE: Fine
SENTENCE BEGIN DATE: 1976-10-22

Cycle 2

EARLIEST EVENT DATE: November 06, 1996
DATE OF OFFENSE: November 06, 1996

ARREST DATA

SUBJECT NAME: MARY AGNES DOKEY
TYPE: Adult Only
DATE: November 06, 1996
ARREST AGENCY: WI0050200 GREEN BAY PD

BOOKING

AGENCY: WI0050200 GREEN BAY PD

CHARGE

SEQUENCE NUMBER: 01

STATUTE NUMBER: 940.19
STATUTE NUMBER: 968. DOMESTIC ABUSE RELATED
LITERAL: BATTERY
NCIC CODE: 1399
COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT

SUBJECT NAME: MARY AGNES DOKEY
DATE: February 24, 1997
CASE NUMBER: 96CM1747
COURT: BROWN CO CIRCUIT COURT WI005000J

CHARGE

SEQUENCE NUMBER: 01
STATUTE NUMBER: 940.19(1)
STATUTE NUMBER: 968. DOMESTIC ABUSE RELATED
LITERAL: BATTERY
NCIC CODE: 1399
COUNTS: 1
CLASSIFICATION:

CHARGE SEVERITY: Unknown

COURT ACTION:

LITERAL: Dismissed
DISPOSITION DATE: February 24, 1997
DISPOSITION: DISMISSED

Cycle 3

EARLIEST EVENT DATE: September 12, 2003
ARREST TRACKING NUMBER: 5000404230208
DATE OF OFFENSE: September 12, 2003

ARREST DATA

SUBJECT NAME: MARY AGNUS DOKEY
TYPE: Adult Only
DATE: April 23, 2004
ARREST AGENCY: WI0050000 BROWN COUNTY SHERIFF
LOCAL IDENTIFICATION NUMBER: 910000381985

BOOKING

AGENCY: WI0050000 BROWN COUNTY SHERIFF

CHARGE

SEQUENCE NUMBER: 01
STATUTE NUMBER: 346.63(1)(A)
LITERAL: OPERATING WHILE INTOXICATED
NCIC CODE: 5499
COUNTS: 1
CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

Cycle 4

EARLIEST EVENT DATE: July 20, 2004

ARREST TRACKING NUMBER: 5000407210025
DATE OF OFFENSE: July 20, 2004

ARREST DATA

SUBJECT NAME: MARY AGNUS DOKEY
TYPE: Adult Only
DATE: July 21, 2004
ARREST AGENCY: WI0050000 BROWN COUNTY SHERIFF
LOCAL IDENTIFICATION NUMBER: 910000381985

BOOKING

AGENCY: WI0050000 BROWN COUNTY SHERIFF

CHARGE

SEQUENCE NUMBER: 01
STATUTE NUMBER: 346.04(3)
LITERAL: VEH.OPERATOR FLEE/ELUDE TRAFFIC OFFICER
NCIC CODE: 5499
COUNTS: 1
CLASSIFICATION:

CHARGE SEVERITY: Felony

CHARGE

SEQUENCE NUMBER: 02
STATUTE NUMBER: 346.63(1)(A)
LITERAL: OPERATING WHILE INTOXICATED
NCIC CODE: 5499
COUNTS: 1
CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT

SUBJECT NAME: MARY AGNUS DOKEY
DATE: October 25, 2004
CASE NUMBER: 052004CF000735
COURT: Unknown
COMMENTS: CCAP DISPOSITION

CHARGE

SEQUENCE NUMBER: 01
TRACKING NUMBER: 5000407210025
STATUTE NUMBER: 346.04(3)
LITERAL: VEH.OPERATOR FLEE/ELUDE TRAFFIC OFFICER
COUNTS: 1
CLASSIFICATION:

CHARGE SEVERITY: Felony

COMMENTS: AMEND/OTHER

COURT ACTION:

LITERAL: Unknown
DISPOSITION DATE: October 25, 2004
DISPOSITION: AMENDED BY PROSECUTOR/COURT

CHARGE

SEQUENCE NUMBER: 02
TRACKING NUMBER: 5000407210025
STATUTE NUMBER: 346.63(1)(A)

LITERAL: OPERATING WHILE INTOXICATED

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Convicted

DISPOSITION DATE: October 25, 2004

DISPOSITION: CONVICTED

CHARGE

SEQUENCE NUMBER: 03

TRACKING NUMBER: 5000407210025

STATUTE NUMBER: 343.44(1)(B)

LITERAL: OPERATING WHILE REVOKED

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Convicted

DISPOSITION DATE: October 25, 2004

DISPOSITION: CONVICTED

CHARGE

SEQUENCE NUMBER: 04

TRACKING NUMBER: 5000407210025

STATUTE NUMBER: 346.04(2T)

LITERAL: FAIL TO OBEY TRAFFIC OFFICER/SIGNAL-KNOWINGLY RESIST

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Convicted

DISPOSITION DATE: October 25, 2004

DISPOSITION: CONVICTED

SENTENCING

DATE: October 25, 2004

CASE NUMBER: 052004CF000735

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 02

SENTENCE:

SENTENCE: Jail

SENTENCE BEGIN DATE: 2004-10-25

SENTENCE LENGTH: 60 days

COMMENTS: GOOD TIME & HUBER, CHILDCARE & AODA TREATMENT

CONSECUTIVE TO CT 1

SENTENCING

DATE: October 25, 2004

CASE NUMBER: 052004CF000735

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 02

SENTENCE:

SENTENCE: Fine

SENTENCING

DATE: October 25, 2004
CASE NUMBER: 052004CF000735
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: Court Ordered Condition
SENTENCE LENGTH: Unknown

SENTENCING

DATE: October 25, 2004
CASE NUMBER: 052004CF000735
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: License Revoked
SENTENCE LENGTH: 30 months

SENTENCING

DATE: October 25, 2004
CASE NUMBER: 052004CF000735
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: Ignition Interlock
SENTENCE LENGTH: 30 months

SENTENCING

DATE: October 25, 2004
CASE NUMBER: 052004CF000735
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: Alcohol Assessment
SENTENCE LENGTH: Unknown

SENTENCING

DATE: October 25, 2004
CASE NUMBER: 052004CF000735
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: Probation
SENTENCE BEGIN DATE: 2004-10-25
SENTENCE LENGTH: Unknown
SENTENCE INDICATOR: Probation By Judgment

SENTENCING

DATE: October 25, 2004
CASE NUMBER: 052004CF000735
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: Unknown Sentence Code
COMMENTS: ATTEND DRUNK DRIVING IMPACT PANEL ON 2/9/05

SENTENCING

DATE: October 25, 2004

CASE NUMBER: 052004CF000735
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 03
SENTENCE:
SENTENCE: Fine

SENTENCING

DATE: October 25, 2004
CASE NUMBER: 052004CF000735
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 04
SENTENCE:
SENTENCE: Jail
SENTENCE BEGIN DATE: 2004-10-25
SENTENCE LENGTH: 10 days
TIME SERVED: 16 days

COMMENTS: GOOD TIME & HUBER, CHILDCARE & AODA TREATMENT

SENTENCING

DATE: October 25, 2004
CASE NUMBER: 052004CF000735
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 04
SENTENCE:
SENTENCE: Fine

SENTENCING

DATE: October 25, 2004
CASE NUMBER: 052004CF000735
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 04
SENTENCE:
SENTENCE: Costs

Cycle 5

EARLIEST EVENT DATE: October 25, 2004
ARREST TRACKING NUMBER: 5000410250406
DATE OF OFFENSE: October 25, 2004

SUPERVISION

SUBJECT NAME: MARY AGNUS DOKEY
DATE: October 25, 2004
CORRECTIONS OR JAIL CASE NUMBER: 110100138295
SUPERVISION AGENCY: WI0050000 BROWN COUNTY SHERIFF
COMMENTS: Adult Submission

CHARGE

SEQUENCE NUMBER: 01
STATUTE NUMBER: 346.04(3)
LITERAL:
NCIC CODE: 5499
COUNTS: 1
CLASSIFICATION:
CHARGE SEVERITY: Felony

DISPOSITION

LITERAL: Other

DISPOSITION DATE: October 25, 2004

DISPOSITION: CONFINED Custody Sentence: JAIL; Sentence Date: 10/25/2004;

Length: 10 days

CHARGE

SEQUENCE NUMBER: 02

STATUTE NUMBER: 346.63(1)(A)

LITERAL:

NCIC CODE: 5499

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

DISPOSITION

LITERAL: Other

DISPOSITION DATE: October 25, 2004

DISPOSITION: CONFINED Custody Sentence: JAIL; Sentence Date: 10/25/2004;

Length: 10 days

SUPERVISION ACTION

ACTION LITERAL: Jail Intake: 10/25/2004

CONTRIBUTING AGENCIES

- WI013035Y WI CIB Identification Section
- WI0050200 Green Bay Pd
- WI0050000 Brown County Sheriff
- WI005000J Brown Co Circuit Court

YOUR REQUEST:

User ID:	10562	Date & Time:	05/19/2011 12:43:01
State Ident Number:	WI136806	Purpose Code:	A



Operator License Application
Village of Howard

<input type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$5.00
<input checked="" type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00	
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: <u>7-1-11</u> 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: GLAB		First Name: HEATHER		Middle Name: MARIE			
Residence: Street Address: 836 CHRISTIANA ST		City: GREEN BAY		State: WI		Zip: 54303	
Residence Phone: (920) 265-6621		Birthdate: [REDACTED]		Birth Place (City, State): FR. ATKINSON WI		Race: WHT	
Driver's License # (State & Number): [REDACTED]		Sex: F		Height: 5'2"		Weight: 130	
Establishment Where Employed: AVENUE		Contact Person & Phone Number: STEVE VANSTRATEN					
Other Names, Aliases or Birthdates ever used:						(920) 406-0508	

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"/> BADGER ST GB WI	2002	2003

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: 3 OWI'S	<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:	<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
1/94	PORTAGE WI	OWI	FINE
7/03	GB	OWI	FINE
2/08	GB	OWI	FINE / JAIL

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.

Heather M. Gorb
Applicant's Signature

6-7-11
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. Kobusz 6/9/2011
Authorized signature performing background check Date

Receipt # 2863 Dated: 6/7/2011 Mail or Pick Up Date: _____



Operator License Application

Operator
2009-0

No. 2009-00516

Issued to: Heather Marie Glab

(Village - Town - City) of Howard ^{6/24/9} Mailed

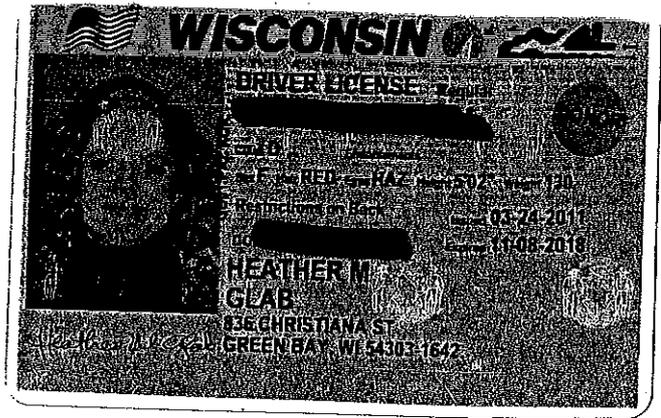
For the period ending:
Date June 30, 2011

LK
Clerk

ABT-8 WS

Annette @ CASHREGISTER

Operators License	\$40.00
Heather Marie Glab	
Receipt Total	\$40.00
Check Payment	\$40.00



HOWARD, WI VILLAGE

2456 GLENDALE AVE
PO BOX 12207
GREEN BAY WI 54313
920-434-4640

Transaction 2863
07-Jun-11 12:06pm

Operators License

\$40.00

Heather Marie Glab

Subtotal

\$40.00

Cash

\$40.00

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

06/08/2011

Order Number : 2820972

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

Name	HEATHER M GLAB
Date of Birth	[REDACTED]
Sex	F
Race	W

**Wisconsin Criminal History**

Report Date: 06/08/2011

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**HEATHER MARIE GLAB**

Female / White

Born in Wisconsin ; Citizen of USA

5'02" 120lbs Hazel Eyes ; Red Or Auburn Hair

836 Christina Street, Green Bay, WI 54304 as of 07/19/2008

2225 Fox Heights Ln, Green Bay, WI

FBI: Unknown

STATE ID: WI475284

FINGERPRINT 13AAAATT0510TTAA0209

CLASS:

PALM PRINT, ORI AND WI0050200-GREEN BAY PD

LITERAL:

PALM PRINT, ORI AND WI0050000-BROWN COUNTY SHERIFF

LITERAL:

EMPLOYER: Mi-tech

OCCUPATION: Data Entry

1700 Industrial, Green Bay, WI

EMPLOYER: Itt School

OCCUPATION: Student

Main, Green Bay, WI 54303

PHOTO INFORMATION:

09/30/1993 WI0050200 Green Bay Pd

WI013035Y WI CIB Identification Section

CRIMINAL HISTORY**Cycle 1**

EARLIEST EVENT DATE: September 30, 1993

DATE OF OFFENSE: September 30, 1993

ARREST DATA

SUBJECT NAME: HEATHER MARIE GLAB

TYPE: Adult Only

DATE: September 30, 1993

ARREST AGENCY: WI0050200 GREEN BAY PD

BOOKING

AGENCY: WI0050200 GREEN BAY PD

CHARGE

SEQUENCE NUMBER: 01
LITERAL: RESIST OBSTRUCT OFFICER
NCIC CODE: 4899
COUNTS: 1
CLASSIFICATION:
CHARGE SEVERITY: Other

COURT

SUBJECT NAME: HEATHER MARIE GLAB
DATE: April 15, 1994
CASE NUMBER: M00372239
COURT: MUNICIPAL COURTWI000000M

CHARGE

SEQUENCE NUMBER: 01
LITERAL: RESIST OBSTRUCT OFFICER
NCIC CODE: 4899
COUNTS: 1
CLASSIFICATION:
CHARGE SEVERITY: Other

COURT ACTION:

LITERAL: Dismissed
DISPOSITION DATE: April 15, 1994
DISPOSITION: DISMISSED

Cycle 2

EARLIEST EVENT DATE: February 22, 2008
ARREST TRACKING NUMBER: 5000802220116
DATE OF OFFENSE: February 22, 2008

ARREST DATA

SUBJECT NAME: HEATHER MARIE GLAB
TYPE: Adult Only
DATE: February 22, 2008
ARREST AGENCY: WI0050200 GREEN BAY PD
LOCAL IDENTIFICATION NUMBER: 910000401992

BOOKING

AGENCY: WI0050000 BROWN COUNTY SHERIFF

CHARGE

SEQUENCE NUMBER: 01
STATUTE NUMBER: 346.63(1)(A)
LITERAL: OPERATING WHILE INTOXICATED
NCIC CODE: 5499
COUNTS: 1
CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

CHARGE

SEQUENCE NUMBER: 02
STATUTE NUMBER: 961.41(3G)(AM)
LITERAL: POSSESSION OF SCHEDULE I AND II NARCOTIC DRUGS
NCIC CODE: 3599
COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Felony

PROSECUTION

CASE NUMBER: 2008BR001233

PROSECUTOR: WI005013A BROWN CO DISTRICT ATTORNEY

CHARGE

SEQUENCE NUMBER: 01

TRACKING NUMBER: 5000802220116

STATUTE NUMBER: 346.63(1)(A)

STATUTE NUMBER: 346.65(2)(G) PAC ENHANCER

STATUTE NUMBER: 346.65(2)(G) PAC ENHANCER

LITERAL: OPERATING WHILE INTOXICATED

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

PROSECUTION ACTION:

LITERAL: Other

DISPOSITION DATE: February 22, 2008

DISPOSITION: CHARGE ISSUED

CHARGE

SEQUENCE NUMBER: 02

TRACKING NUMBER: 5000802220116

STATUTE NUMBER: 961.41(3G)(B)

LITERAL: POSSESSION OF CONTROLLED SUBSTANCE

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

PROSECUTION ACTION:

LITERAL: Other

DISPOSITION DATE: February 22, 2008

DISPOSITION: CHARGE ISSUED

COURT

SUBJECT NAME: HEATHER MARIE GLAB

DATE: May 19, 2008, May 19, 2008

CASE NUMBER: 052008CT000276, 052008CM000337

COURT: Unknown, Unknown

COMMENTS: CCAP DISPOSITION, CCAP DISPOSITION

CHARGE

SEQUENCE NUMBER: 01

TRACKING NUMBER: 5000802220116

STATUTE NUMBER: 346.63(1)(A)

STATUTE NUMBER: 346.65(2)(G) PAC ENHANCER

LITERAL: OPERATING WHILE INTOXICATED

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COMMENTS: AMEND/OTHER

COURT ACTION:

LITERAL: Unknown

DISPOSITION DATE: May 19, 2008

DISPOSITION: AMENDED BY PROSECUTOR/COURT

CHARGE

SEQUENCE NUMBER: 01

TRACKING NUMBER: 5000802220116

STATUTE NUMBER: 346.63(1)(A)

STATUTE NUMBER: 346.65(2)(G) PAC ENHANCER

LITERAL: OPERATING WHILE INTOXICATED

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Convicted

DISPOSITION DATE: May 19, 2008

DISPOSITION: CONVICTED

CHARGE

SEQUENCE NUMBER: 01

TRACKING NUMBER: 5000802220116

STATUTE NUMBER: 346.63(1)(B)

STATUTE NUMBER: 346.65(2)(G) PAC ENHANCER

LITERAL: PROHIBITED ALCOHOL CONCENTRATION

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Dismissed

DISPOSITION DATE: May 19, 2008

DISPOSITION: DISMISSED

CHARGE

SEQUENCE NUMBER: 02

TRACKING NUMBER: 5000802220116

STATUTE NUMBER: 961.41(3G)(B)

LITERAL: POSSESSION OF CONTROLLED SUBSTANCE

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Dismissed

DISPOSITION DATE: May 19, 2008

DISPOSITION: DISMISSED

SENTENCING

DATE: May 19, 2008

CASE NUMBER: 052008CT000276

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 01

SENTENCE:

SENTENCE: Alcohol Assessment

SENTENCE LENGTH: Unknown

COMMENTS: ATTEND DRUNK DRIVING IMPACT PANEL ON WEDNESDAY 8/13/08

AT 7:00 PM

SENTENCING

DATE: May 19, 2008
CASE NUMBER: 052008CT000276
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 01

SENTENCE:
SENTENCE: Fine
COMMENTS: \$800.00 CASH BOND APPLIED

SENTENCING

DATE: May 19, 2008
CASE NUMBER: 052008CT000276
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 01

SENTENCE:
SENTENCE: Jail
SENTENCE BEGIN DATE: 2008-07-19
SENTENCE LENGTH: 60 days
TIME SERVED: 2 days
COMMENTS: GOOD TIME AND HUBER GRANTED.

SENTENCING

DATE: May 19, 2008
CASE NUMBER: 052008CT000276
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 01

SENTENCE:
SENTENCE: License Revoked
SENTENCE LENGTH: 24 months

Cycle 3

EARLIEST EVENT DATE: February 22, 2008
ARREST TRACKING NUMBER: 5000807190314
DATE OF OFFENSE: February 22, 2008

ARREST DATA

SUBJECT NAME: HEATHER MARIE GLAB
TYPE: Adult Only
DATE: July 19, 2008
ARREST AGENCY: WI0050000 BROWN COUNTY SHERIFF
LOCAL IDENTIFICATION NUMBER: 910000401992

BOOKING

AGENCY: WI0050000 BROWN COUNTY SHERIFF

CHARGE

SEQUENCE NUMBER: 01
STATUTE NUMBER: 346.63(1)(A)
LITERAL: OPERATING WHILE INTOXICATED
NCIC CODE: 5499
COUNTS: 1
CLASSIFICATION:
CHARGE SEVERITY: Misdemeanor

CONTRIBUTING AGENCIES

WI0050200 Green Bay Pd
WI0050000 Brown County Sheriff
WI013035Y WI CIB Identification Section
WI000000M Municipal Court
WI005013A Brown Co District Attorney

YOUR REQUEST:

User ID:	10562	Date & Time:	06/08/2011 10:19:51
State Ident Number:	WI475284	Purpose Code:	A



**Operator License Application
Village of Howard**

<input type="checkbox"/> New <input checked="" 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.
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- You can obtain information regarding your criminal history from the police department, the court with which you interacted, or the Wisconsin Circuit Court Access website at: www.wcca.wicourts.gov.

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>GLANNER</i>		First Name: <i>DAWN</i>		Middle Name: <i>MARIE</i>				
Residence: Street Address: <i>832 N MAPLE AVE</i>		City: <i>GREEN BAY</i>		State: <i>WI</i>		Zip: <i>54303</i>		
Residence Phone: <i>920 246-8457</i>	Birthdate: [REDACTED]	Birth Place (City, State): <i>GREEN BAY, WI</i>	Race: <i>W</i>	Sex: <i>F</i>	Height: <i>5'3"</i>	Weight: <i>135</i>	Hair: <i>BR</i>	Eyes: <i>BR</i>
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: <i>FARR'S GROVE</i>			Contact Person & Phone Number: <i>JERRY FARR 494-9956</i>			

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 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 _____)

No. 2009-0064

Issued to: Dawn Marie
Glanner

7/20/09

VILLAGE
2456 Gl
PO Box
Green B
(920)434

[Village - Town - City] of

Howard

For the period ending:

Date June 30, 2011

Transac
23-Jun-

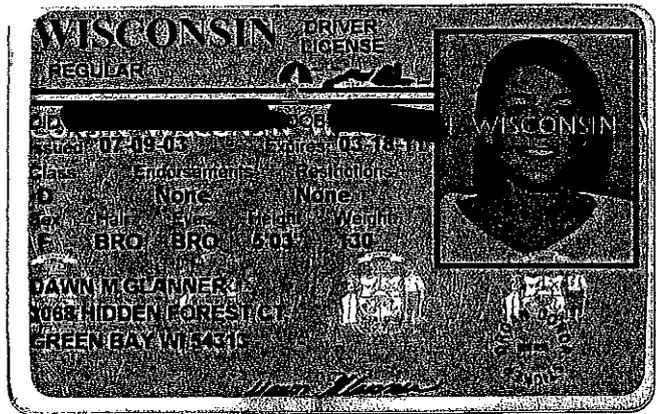
ABT-SWS

LK
Clerk

Annette E CASHREGISTER

Operators License Dawn Marie Glanner	\$40.00
Receipt Total	\$40.00
CC Payment	\$40.00





HOWARD, WI VILLAGE

2456 GLENDALE AVE

PO BOX 12207

GREEN BAY WI 54313

920-434-4640

Transaction 2851

07-Jun-11 10:22am

Operators License

\$40.00

Dawn Glanney

Subtotal

\$40.00

Check

\$40.00

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

06/08/2011

Order Number : 2820972

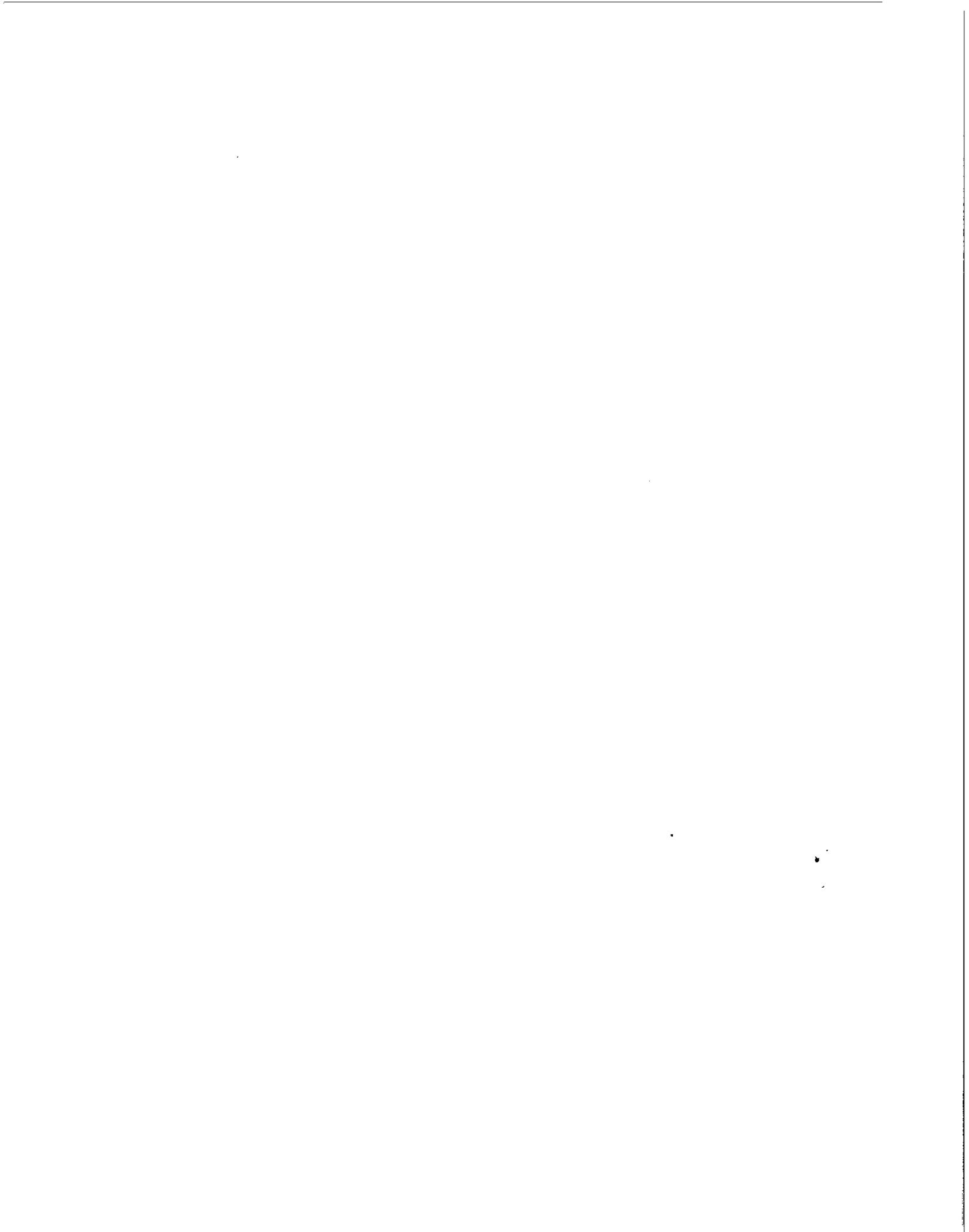
This criminal background check was performed by searching the following data submitted to the Crime Information Bureau.

Name	DAWN M GLANNER
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 type="checkbox"/> New <input checked="" type="checkbox"/> Renewal	<input checked="" type="checkbox"/> Operator <input type="checkbox"/> Provisional	\$ 40.00 \$ 15.00	<input type="checkbox"/> Duplicate License \$5.00
<input checked="" type="checkbox"/> Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____			

Office Use Only:	License #	Provisional #
------------------	-----------	---------------

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- 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.
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Last Name: GOLIK		First Name: DAVID		Middle Name: MICHAEL			
Residence: Street Address: 330 TONY LANE		City: GREEN BAY		State: WI		Zip: 54303	
Residence Phone: 920-639-7963	Birthdate: [REDACTED]	Birth Place (City, State): GREEN BAY, WI	Race: W	Sex: M	Height: 5'7"	Weight: 180	Hair: BR Eyes: BLUE
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: CHASERS BAR + GRILL			Contact Person & Phone Number: MARCIA STACHURA WI-4068		

Other Names, Aliases or Birthdates ever used:

Cities & States lived in the past 10 years:		From:	To:
SOBIESKI, WI		1988	2005
GREEN BAY, WI		2005	PRESENT

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 _____)

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

06/02/2011

Order Number : 2813973

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

Name	DAVID M GOLIK
Date of Birth	[REDACTED]
Sex	M
Race	W

**Wisconsin Criminal History**

Report Date: 06/02/2011

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**DAVID MICHAEL GOLIK**

Male / White

Born in Wisconsin ; Citizen of USA

5'07" 175lbs Blue Eyes ; Brown Hair

330 Tony Ln, Green Bay, WI 54303 as of 10/03/2010

FBI: Unknown

STATE ID: WI1305124

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

EMPLOYER: Unknown

OCCUPATION: Unknown

PHOTO INFORMATION:

WI013035Y WI CIB Identification Section

CRIMINAL HISTORY**Cycle 1**

EARLIEST EVENT DATE: October 03, 2010

ARREST TRACKING NUMBER: 5001010030115

DATE OF OFFENSE: October 03, 2010

ARREST DATA

SUBJECT NAME: DAVID MICHAEL GOLIK

TYPE: Adult Only

DATE: October 03, 2010

ARREST AGENCY: WI0050000 BROWN COUNTY SHERIFF

BOOKING

AGENCY: WI0050000 BROWN COUNTY SHERIFF

CHARGE

SEQUENCE NUMBER: 01

STATUTE NUMBER: 346.04(3)

LITERAL: VEH.OPERATOR FLEE/ELUDE TRAFFIC OFFICER

NCIC CODE: 5499

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Felony

CHARGE

SEQUENCE NUMBER: 02

STATUTE NUMBER: 940.19(1)

LITERAL: BATTERY

NCIC CODE: 1399

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

CHARGE

SEQUENCE NUMBER: 03

STATUTE NUMBER: 940.19(1)

STATUTE NUMBER: 968.075 DOMESTIC ABUSE INCIDENT

LITERAL: BATTERY

NCIC CODE: 1399

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

CHARGE

SEQUENCE NUMBER: 04

STATUTE NUMBER: 947.01

STATUTE NUMBER: 968.075 DOMESTIC ABUSE INCIDENT

LITERAL: DISORDERLY CONDUCT

NCIC CODE: 5311

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

PROSECUTION

CASE NUMBER: 2010BR007037

PROSECUTOR: WI005013A BROWN CO DISTRICT ATTORNEY

CHARGE

SEQUENCE NUMBER: 01

TRACKING NUMBER: 5001010030115

STATUTE NUMBER: 346.04(2T)

LITERAL: FAIL TO OBEY TRAFFIC OFFICER/SIGNAL-KNOWINGLY RESIST

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

PROSECUTION ACTION:

LITERAL: Other

DISPOSITION DATE: October 04, 2010

DISPOSITION: CHARGE ISSUED

CHARGE

SEQUENCE NUMBER: 02

TRACKING NUMBER: 5001010030115

STATUTE NUMBER: 940.19(1)

STATUTE NUMBER: 968.075 DOMESTIC ABUSE INCIDENT

LITERAL: BATTERY

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

PROSECUTION ACTION:

LITERAL: Other

DISPOSITION DATE: October 04, 2010

DISPOSITION: CHARGE ISSUED

CHARGE

SEQUENCE NUMBER: 03
TRACKING NUMBER: 5001010030115
STATUTE NUMBER: 940.19(1)
LITERAL: BATTERY
COUNTS: 1
CLASSIFICATION:
CHARGE SEVERITY: Misdemeanor

PROSECUTION ACTION:

LITERAL: Other
DISPOSITION DATE: October 04, 2010
DISPOSITION: CHARGE ISSUED

CHARGE

SEQUENCE NUMBER: 04
TRACKING NUMBER: 5001010030115
STATUTE NUMBER: 947.01
STATUTE NUMBER: 968.075 DOMESTIC ABUSE INCIDENT
LITERAL: DISORDERLY CONDUCT
COUNTS: 1
CLASSIFICATION:
CHARGE SEVERITY: Misdemeanor

PROSECUTION ACTION:

LITERAL: Other
DISPOSITION DATE: October 04, 2010
DISPOSITION: CHARGE ISSUED

COURT

SUBJECT NAME: DAVID MICHAEL GOLIK
DATE: December 20, 2010
CASE NUMBER: 052010CM001557
COURT: Unknown
COMMENTS: CCAP DISPOSITION

CHARGE

SEQUENCE NUMBER: 01
TRACKING NUMBER: 5001010030115
STATUTE NUMBER: 346.04(2T)
LITERAL: FAIL TO OBEY TRAFFIC OFFICER/SIGNAL-KNOWINGLY RESIST
COUNTS: 1
CLASSIFICATION:
CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Convicted
DISPOSITION DATE: December 20, 2010
DISPOSITION: CONVICTED

CHARGE

SEQUENCE NUMBER: 02
TRACKING NUMBER: 5001010030115
STATUTE NUMBER: 940.19(1)
STATUTE NUMBER: 968.075 DOMESTIC ABUSE INCIDENT
LITERAL: BATTERY
COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Dismissed

DISPOSITION DATE: December 20, 2010

DISPOSITION: DISMISSED READ IN

CHARGE

SEQUENCE NUMBER: 02

TRACKING NUMBER: 5001010030115

STATUTE NUMBER: 940.19(1)

STATUTE NUMBER: 968.075 DOMESTIC ABUSE INCIDENT

LITERAL: BATTERY

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Convicted

DISPOSITION DATE: December 20, 2010

DISPOSITION: CONVICTED

CHARGE

SEQUENCE NUMBER: 04

TRACKING NUMBER: 5001010030115

STATUTE NUMBER: 947.01

STATUTE NUMBER: 968.075 DOMESTIC ABUSE INCIDENT

LITERAL: DISORDERLY CONDUCT

COUNTS: 1

CLASSIFICATION:

CHARGE SEVERITY: Misdemeanor

COURT ACTION:

LITERAL: Dismissed

DISPOSITION DATE: December 20, 2010

DISPOSITION: DISMISSED READ IN

SENTENCING

DATE: December 20, 2010

CASE NUMBER: 052010CM001557

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 01

SENTENCE:

SENTENCE: Probation

SENTENCE LENGTH: Unknown

SENTENCING

DATE: December 20, 2010

CASE NUMBER: 052010CM001557

CONVICTED OFFENSE:

CHARGE SEQUENCE NUMBER: 01

SENTENCE:

SENTENCE: Probation

SENTENCE BEGIN DATE: 2010-12-20

SENTENCE LENGTH: 14 months

FINE: 243.00

SENTENCE INDICATOR: Probation By Judgment

SENTENCING

DATE: December 20, 2010
CASE NUMBER: 052010CM001557
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 01
SENTENCE:
SENTENCE: Fine
COMMENTS: PAY COURT COSTS

SENTENCING

DATE: December 20, 2010
CASE NUMBER: 052010CM001557
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 01
SENTENCE:
SENTENCE: Unknown Sentence Code
COMMENTS: SAME CONDITIONS AS CT #1

SENTENCING

DATE: December 20, 2010
CASE NUMBER: 052010CM001557
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: Probation
SENTENCE LENGTH: Unknown

SENTENCING

DATE: December 20, 2010
CASE NUMBER: 052010CM001557
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: Probation
SENTENCE BEGIN DATE: 2010-12-20
SENTENCE LENGTH: 14 months
FINE: 243.00
SENTENCE INDICATOR: Probation By Judgment

SENTENCING

DATE: December 20, 2010
CASE NUMBER: 052010CM001557
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: Community Service

SENTENCING

DATE: December 20, 2010
CASE NUMBER: 052010CM001557
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: Fine
COMMENTS: PAY COURT COSTS

SENTENCING

DATE: December 20, 2010
CASE NUMBER: 052010CM001557
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: Court Ordered Condition
SENTENCE LENGTH: Unknown
COMMENTS: NO CONTACT WITH VICTIMS.

SENTENCING

DATE: December 20, 2010
CASE NUMBER: 052010CM001557
CONVICTED OFFENSE:
CHARGE SEQUENCE NUMBER: 02
SENTENCE:
SENTENCE: Unknown Sentence Code
COMMENTS: COUNSELING DEEMED APPROPRIATE BY AGENT

CONTRIBUTING AGENCIES

WI0050000 Brown County Sheriff
WI013035Y WI CIB Identification Section
WI005013A Brown Co District Attorney

YOUR REQUEST:

User ID:	10562	Date & Time:	06/02/2011 15:36:25
State Ident Number:	WI1305124	Purpose Code:	A

HOWARD, WI VILLAGE

2456 GLENDALE AVE

PO BOX 12207

GREEN BAY WI 54313

920-434-4640

Transaction 2696

02-Jun-11 03:03pm

Operators License \$40 00

David M Golik - Chasers

Operators License \$40 00

Tammy Kaye Armstrong - Chasers

Operators License \$40.00

Alice Kussow -Chasers

Subtotal \$120.00

Check \$120.00



**Operator License Application
Village of Howard**

<input type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$5.00
<input checked="" type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00	
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

Office Use Only:	License #	Provisional #
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Filling Out Your Application:

- 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: <i>Heavelmans</i>		First Name: <i>Gary</i>		Middle Name: <i>Roland</i>							
Residence: Street Address: <i>1105 Devonwood</i>		City: <i>Green Bay</i>		State: <i>WI</i>		Zip: <i>54304</i>					
Residence Phone: <i>9204972672</i>		Birthdate: <i>[REDACTED]</i>		Birth Place (City, State): <i>GB WI</i>		Race: <i>C</i>	Sex: <i>M</i>	Height: <i>5'10"</i>	Weight: <i>195</i>	Hair: <i>Br</i>	Eyes: <i>Bl</i>
Driver's License # (State & Number): <i>[REDACTED]</i>		Establishment Where Employed: <i>Sportsman Club Brown County</i>				Contact Person & Phone Number: <i>Mike May 4349930</i>					
Other Names, Aliases or Birthdates ever used: <i>NONE</i>											

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

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

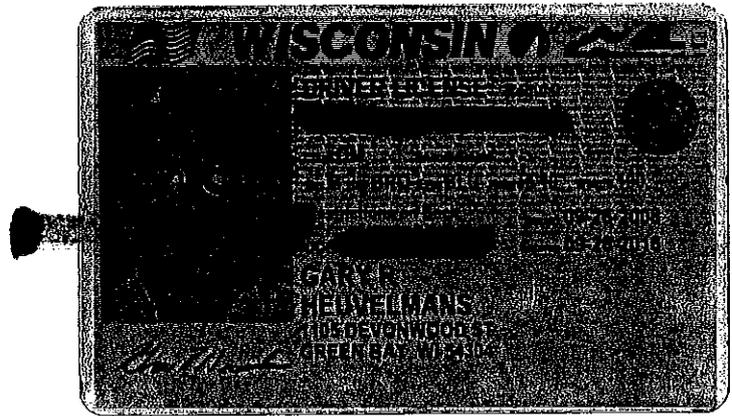
5-27-11
Date

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 6/2/2011
Authorized signature performing background check Date

Receipt # 2501 Dated: 5-27-2011 Mail or Pick Up Date: _____



HOWARD, WI VILLAGE

2456 GLENDALE AVE
PO BOX 12207
GREEN BAY WI 54313
920-434-4640

Transaction 2501
27-May-11 01:17pm

Operators License

\$40.00

Gary R Heuvelmans - Operator License Fee

Subtotal

\$40.00

Cash

\$40.00

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

06/02/2011

Order Number : 2812952

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

Name GARY R HEUVELMANS
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.



Operator License Application
Village of Howard

<input type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$5.00
<input checked="" type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00	
<input checked="" type="checkbox"/> Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

Office Use Only:	License #	Provisional #
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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: KUSSOW	First Name: ALICE	Middle Name: MARIE
-----------------------------	-----------------------------	------------------------------

Residence: Street Address: 850 Centennial Centre	City: BVD APT 87 ONEIDA WI	State: WI	Zip: 54155
--	--------------------------------------	---------------------	----------------------

Residence Phone: 920-655-3166	Birthdate: [REDACTED]	Birth Place (City, State): Green Bay WI	Race: WH	Sex: F	Height: 5'3"	Weight: 115	Hair: BR	Eyes: BR
---	--------------------------	---	--------------------	------------------	------------------------	-----------------------	--------------------	--------------------

Driver's License # (State & Number): [REDACTED]	Establishment Where Employed: CHASERS BAR & GRILL	Contact Person & Phone Number: CAMILLE KUSSOW 680-1626
--	---	--

Other Names, Aliases or Birthdates ever used:
N/A

Cities & States lived in the past 10 years: PULASKI WI Green Bay WI	From: BIRTH	To: CURRENT
---	-----------------------	-----------------------

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 _____)

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

06/02/2011

Order Number : 2813973

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

Name	ALICE M KUSSOW
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.

HOWARD, WI VILLAGE

2456 GLENDALE AVE
 PO BOX 12207
 GREEN BAY WI 54313
 920-434-4640

Transaction 2696
 02-Jun-11 03:03pm

Operators License	\$40.00
David M Golik - Chasers	
Operators License	\$40.00
Tammy Kaye Armstrong - Chasers	
Operators License	\$40.00
Alice Kussow -Chasers	

Subtotal	\$120.00
Check	\$120.00

476 11/20/2018



Operator License Application
Village of Howard

<input type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$5.00
<input checked="" type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00	
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

Office Use Only:	License #	Provisional #
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Filling Out Your Application:

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- 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>Lubenske</i>		First Name: <i>Dell</i>		Middle Name: <i>RALPH</i>							
Residence: Street Address: <i>11798 BLACK BASS LAKE</i>		City: <i>CRIVITZ</i>		State: <i>WI</i>		Zip: <i>54114</i>					
Residence Phone: <i>715-276-6822</i>		Birthdate: [REDACTED]		Birth Place (City, State): <i>Green Bay</i>		Race: <i>W</i>	Sex: <i>M</i>	Height: <i>6.1</i>	Weight: <i>225</i>	Hair: <i>B</i>	Eyes: <i>B</i>
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: <i>Brown County Sportsman Club</i>				Contact Person & Phone Number: <i>MIKE MAY</i>					

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 checked="" type="checkbox"/>		

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

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

OPERATOR'S LICENSE

No. 2009-0041 \$ 40.00

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

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

For the period ending June 30, 2011
Date

Lynn Robus Deputy Clerk
ABT-8 WS

HOWARD, WI VILLAGE

2456 GLENDALE AVE
PO BOX 12207
GREEN BAY WI 54313
920-434-4640

Transaction 2411
24-May-11 02:39pm

Operators License
\$40.00
Dell R. Lubenske - Operator License Renewal

Subtotal \$40.00
Cash \$40.00



Operator License Application
Village of Howard

<input type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$ 5.00
<input checked="" type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00	
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

Office Use Only:	License #	Provisional #
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Filling Out Your Application:

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- 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:

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- 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: Price	First Name: Karla	Middle Name: Jean
------------------	-------------------	-------------------

Residence: Street Address: 1531 E Frances St	City: Appleton	State: WI	Zip: 54911
--	----------------	-----------	------------

Residence Phone: 920 739 3783	Birthdate: [REDACTED]	Birth Place (City, State): Elkhorn, WI	Race: WH	Sex: F	Height: 5'7	Weight: 180	Hair: Brn	Eyes: Hazel
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Driver's License # (State & Number): [REDACTED]	Establishment Where Employed: Legends Brewhouse	Contact Person & Phone Number: Karla Price (602-1111)
---	---	---

Other Names, Aliases or Birthdates ever used:
 Karla Donahue (maiden) (I am the G.M.)

Cities & States lived in the past 10 years: Appleton, WI	From:	To:
---	-------	-----

Please check box below if you have lived at this address for 10 years or more: <input checked="" 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 _____)

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 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:	<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
OWI 6, 91	Lake Michigan, WI	OWI	1 st offense
OWI, 02	De Pere, WI	OWI	1 st offense
OWI 08	Appleton, WI	OWI	3 rd offense

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.

Paula Price
Applicant's Signature

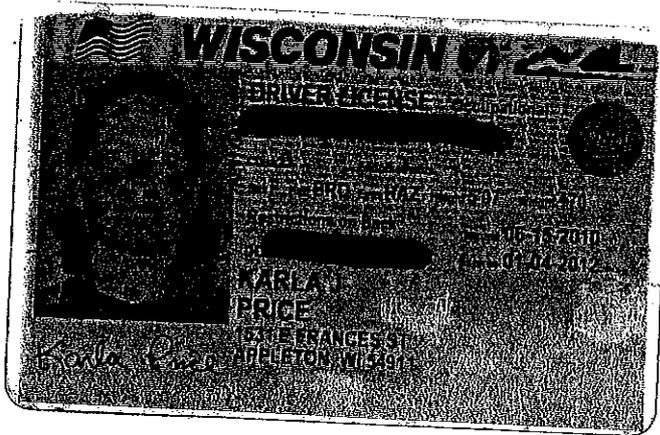
6-3-11
Date

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 K. Kobus 6/9/2011
Authorized signature performing background check Date

Receipt # 2754 Dated: 6/3/2011 Mail or Pick Up Date: _____



OPERATOR'S LICENSE
No. 2009-0049 \$ 40.00
WHEREAS, The local governing body of the [Village - Town - City] of Howard, County of Brown, Wisconsin, has upon application duly made, granted and authorized the issuance of an "Operator's License" to Karla J. Price
AND WHEREAS, the said applicant has paid to the treasurer the sum of \$40.00 as required by local ordinances and has complied with all requirements necessary for obtaining a license. Now therefore, an Operator's License, pursuant to Section 125.32(2) and 125.68(2) of the Wisconsin Statutes, and local ordinances, is hereby issued to said applicant.
For the period ending June 30, 2011
Lynn Kobus Deputy Clerk
ABT-SWS

HOWARD, WI VILLAGE
2456 GLENDALE AVE
PO BOX 12207
GREEN BAY WI 54313
920-434-4640
Transaction 2754
03-Jun-11 01:42pm

Operators License	
Karla Price	\$40.00
Subtotal	\$40.00
Cash	\$40.00

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

06/08/2011

Order Number : 2820972

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

Name	KARLA J PRICE
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 type="checkbox"/> New	<input checked="" type="checkbox"/> Operator \$ 40.00	<input type="checkbox"/> Duplicate License \$ 5.00
<input checked="" type="checkbox"/> Renewal	<input type="checkbox"/> Provisional \$ 15.00	
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		

Office Use Only:	License #	Provisional #
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Filling Out Your Application:

- 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: Theyo		First Name: Katherine		Middle Name: Marie	
Residence: Street Address: 834 14th Ave		City: Green Bay		State: WI	Zip: 54304
Residence Phone: 920-606-7971	Birthdate: [REDACTED]	Birth Place (City, State): Rice Lake, WI	Race: W	Sex: F	Height: 5'6"
Weight: 190	Hair: Blk	Eyes: Blk	Driver's License # (State & Number): [REDACTED]		
Establishment Where Employed: JR's			Contact Person & Phone Number: Bonnie Darrow 494-8326		

Other Names, Aliases or Birthdates ever used:

Cities & States lived in the past 10 years:	From:	To:
Howard	97	2002
Sumner	2002	2008

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.

Katherine Phep
Applicant's Signature

5-31-11
Date

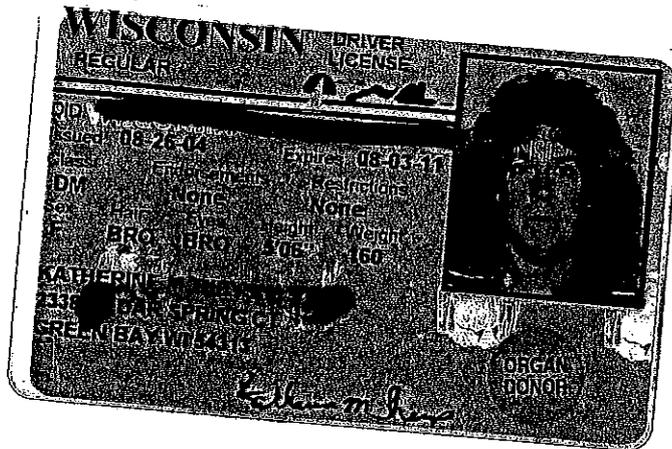
To be filled out by the Howard Police Department or Clerical Staff

<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

6/2/2011
Date

Receipt # 2554 Dated: 5-31-2011 Mail or Pick Up Date: [REDACTED]



OPERATOR'S LICENSE

2009-0070 \$ 40.00

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

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

For the period ending June 30, 2011
Date

Lynn Kobus Deputy Clerk
ABT-SWS

HOWARD, WI VILLAGE

2456 GLENDALE AVE
 PO BOX 12207
 GREEN BAY WI 54313
 920-434-4640

Transaction 2554
 31-May-11 01:10pm

Operators License	\$40.00
Katherine M Theys - Operator License Fee	

Subtotal	\$40.00
Check	\$40.00

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

06/02/2011

Order Number : 2812952

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

Name	KATHERINE M THEYS
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.
