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**Operator License Application
Village of Howard**

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

Office Use Only: _____	License # _____	Provisional # _____
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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: DeKeyser		First Name: Natalie		Middle Name: Kirt				
Residence: Street Address		City: Green Bay		State: Wi		Zip: 54302		
Residence Phone: 920 309-3070	Birthdate: [REDACTED]	Birth Place (City, State): Green Bay, Wi	Race: W	Sex: F	Height: 5'2	Weight: 15'8	Hair: BW	Eyes: Haz
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: B'S's Bar & Grill			Contact Person & Phone Number: Sheila			

Other Names, Aliases or Birthdates ever used: _____

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

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

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

WISCONSIN
DRIVER LICENSE



NATALIE MARIE DEKEYSER
228 BADER ST
GREEN BAY, WI 54302-3421

DOB: [REDACTED] Expires: 03-02-2012
Expires: 03-05-2020

Natalie DeKeyser

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

Natalie M DeKeyser

DOB: [REDACTED]
Expires: 6/30

13	14	15	16	17	18	19
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DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU**11/08/2012****Order Number : 3414355**

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

Name	NATALIE MARIE DEKEYSER
Date of Birth	[REDACTED]
Sex	F
Race	W

The response is based on a search using the identification data supplied. Searches based solely on name and non-unique identifiers are not fully reliable. The CIB cannot guarantee that the information furnished pertains to the individual you are interested in.

NO CRIMINAL HISTORY FOUND.



**Operator License Application
Village of Howard**

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

Office Use Only:	License #	Provisional #
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Last Name: Karpenko		First Name: Joseph		Middle Name:				
Residence: Street Address: 2641 Trojan Drive apt. 312		City: Green Bay		State: WI		Zip: 54313		
Residence Phone: 9204719620	Birthdate: [REDACTED]	Birth Place (City, State): Dawson's Grove, IL	Race: White	Sex: M	Height: 5'10"	Weight: 150	Hair: BRO	Eyes: BRO
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: Mex-Itally's			Contact Person & Phone Number: Luis Ponce 920-662-0631			

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 _____)

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
2011	Suamico	under age drinking	paid ticket
2011	De pene	under age drinking	paid ticket

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.

Joseph Kuperko
Applicant's Signature

10-26-2012
Date

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

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

Lynn Kobus 11/7/12
Authorized signature performing background check Date

Receipt # 24938 Dated: 10/26/12 Mail or Pick Up Date: _____

WISCONSIN

SELLER / SERVER CERTIFICATION

Trainee Name: Joseph Karpenko

Date of Completion: 10/18/2012 20:02 CST

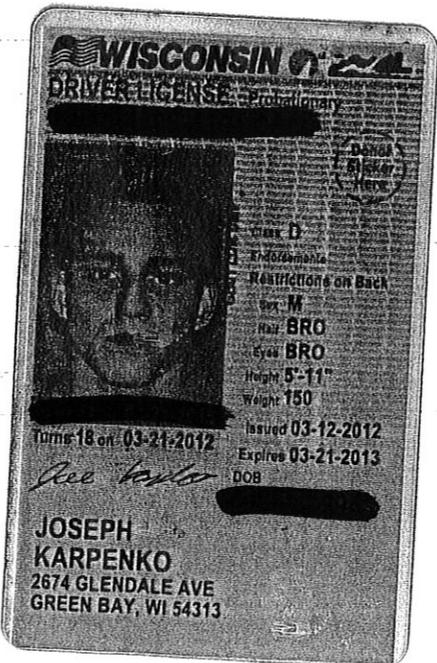
School Name: Learn2Serve

Certification #: WI 1962653

I, 

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

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66



Corporate Headquarters

19201 N. Loop East, Suite 400

Austin, Texas 78727

P 800.242.1149

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

11/07/2012

Order Number : 3412711

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

Name	JOSEPH KARPENKO
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 checked="" type="checkbox"/> New <input type="checkbox"/> Renewal	<input checked="" type="checkbox"/> Operator \$ 40.00 <input type="checkbox"/> Provisional \$ 15.00	<input type="checkbox"/> Duplicate License \$ 5.00
Temporary \$6.00 (License is limited to once per year, for a maximum of 14 days and only to persons employed by or donating their services for non profit corporations.) Date Needed: _____ Event Name: _____		
Office Use Only: License # _____		Provisional # _____
Filling Out Your Application: <ul style="list-style-type: none"> An Operator License is a privilege, not a right. Any false answers or omissions may result in the denial of your application. This application must be filled out accurately and completely. If you have any doubt as to whether to include the facts of a specific incident, it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the Village Clerk for clarification. Your application will not be processed until you deal with any outstanding warrants. You can obtain information regarding your criminal history from the police department, the court with which you interacted, or the Wisconsin Circuit Court Access website at: www.wcca.wicourts.gov. Review Of Your Application: <ul style="list-style-type: none"> The Howard Police Department (Brown County Sheriff) or our clerical staff will perform a background check to verify that the information you have provided is complete and accurate. You may be called to appear before the Village Board if there are concerns about your criminal history as it relates to your application, or if it appears that you falsified or omitted information from your application. If you are asked to appear but choose not to do so, your application may be denied. 		
Last Name: Kunzer		First Name: Melanie
		Middle Name: Lynn
Residence: Street Address: 2624 County Rd S		City: Little Suamico
		State: WI
		Zip: 54141
Residence Phone: (920) 826-5685	Birthdate: [REDACTED]	Birth Place (City, State): Wauwato, WI
		Race: Cauc
		Sex: F
		Height: 5'4
		Weight: 212
		Hair: Brown
		Eyes: Haz
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: Shopko express
		Contact Person & Phone Number: Matt Buchanan 906-290-4289
Other Names, Aliases or Birthdates ever used:		
Cities & States lived in the past 10 years, including where you now reside (must reside in Wisconsin for at least the past 90 days to be eligible for this license):		
From:		To:
From:		To:
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.

Melanie Kumpka
Applicant's Signature

10/29/12
Date

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

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

Lynn Kobus
Authorized signature performing background check

11/7/12
Date

Receipt # 25131 Dated: 11/2/12 Mail or Pick Up Date: _____

83405-072-850

\$24.00

CLASS: D - Non-Commercial Vehicles

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

Signature: _____ Date: _____

0408 088 01
0004204087

WISCONSIN DRIVER LICENSE

MELANIE L KUNZER

Melanie L. Kunzer

DOB [REDACTED]

SEX F

HGT 5'04"

WGT 160

ISSUED 10-22-2007

EXPIRES 10-27-2015

DOB [REDACTED]

MELANIE L KUNZER
 2624 CTH S
 LITTLE SUAMICO, WI 54141

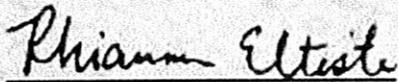
Wisconsin Responsible Beverage Server Training

Melanie Kunzer

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

Certification Number: 42472

Date of Completion: 10/28/2012



Authorized Signature

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

11/07/2012

Order Number : 3412711

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

Name	MELANIE L KUNZER
Date of Birth	[REDACTED]
Sex	F
Race	W

The response is based on a search using the identification data supplied. Searches based solely on name and non-unique identifiers are not fully reliable. The CIB cannot guarantee that the information furnished pertains to the individual you are interested in.

NO CRIMINAL HISTORY FOUND.



Operator License Application
Village of Howard

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

Office Use Only:	License #	Provisional # 2012-059
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Last Name: ROUSE	First Name: CHELSEA	Middle Name: LYNN
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Residence: Street Address: 920 CLEMENT ST. APT. 1	City: GREEN BAY	State: WI	Zip: 54302
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Residence Phone: 920-470-0405	Birthdate: [REDACTED]	Birth Place (City, State) APPLETON, WI	Race W	Sex F	Height 5'5"	Weight 180	Hair B	Eyes G
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Driver's License # (State & Number) [REDACTED]	Establishment Where Employed: EXPRESS CONVENIENCE CENTER	Contact Person & Phone Number: 920-498-0298
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Other Names, Aliases or Birthdates ever used:

Cities & States lived in the past 10 years: Appleton WI Green Bay WI Algoma WI	From:	To:
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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 _____)

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.

Charles Case
Applicant's Signature

10-30-12
Date

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

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

Lynn K. Kobus
Authorized signature performing background check

11/7/12
Date

Receipt # _____ Dated: _____ Mail or Pick Up Date: _____

Wisconsin Responsible Beverage Server Training

Chelsea Rouse

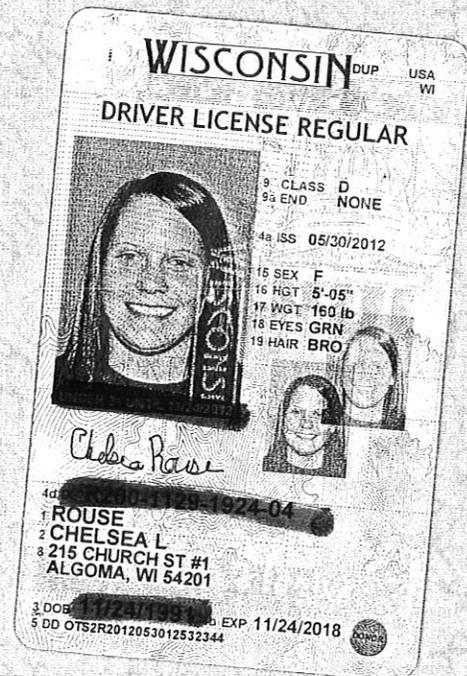
has met all training requirements and successfully completed the above course and/or exam.

Certification Number: 42387

Date of Completion: 10/23/2012

Rhianne Eltiste

Authorized Signature



DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

11/07/2012

Order Number : 3412711

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

Name	CHELSEA L ROUSE
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.

PROVISIONAL OPERATORS LICENSE

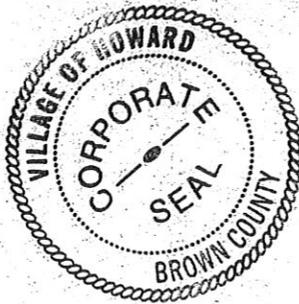
NO. 2012-059

\$ 15.00

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

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

For the period ending December 30, 2012 or when an Operators License is issued to the holder.



Given under my hand and the corporate seal of the
 Village of Howard
County of Brown, State of Wisconsin
This 30th day of October, 2012

Deputy Clerk

REC'D OCT 31 2012



**Operator License Application
Village of Howard**

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

Office Use Only:	License #	Provisional #
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Last Name: Sherban		First Name: Galen		Middle Name: Glen				
Residence: Street Address: 613 Park st		City: Green Bay		State: WI		Zip: 54303		
Residence Phone: 920 405-0915	Birthdate: [REDACTED]	Birth Place (City, State): Wheatridge CO.	Race: W	Sex: M	Height: 5'10"	Weight: 170	Hair: Brun	Eyes: Green
Driver's License # (State & Number): [REDACTED]		Establishment Where Employed: Kwik Trip # 725			Contact Person & Phone Number: Andy Larson 920-434-2041			

Other Names, Aliases or Birthdates ever used:

Cities & States lived in the past 10 years:		From:	To:
29 Palm CA 92278		9-13-04	9-13-08
613 Park st Green Bay WI		8-1-96 9-14-08	9-12-04 Present

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

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
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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
6-04	Green Bay	1 st -3 rd underasp	Paided
9-08	Green Bay	1 st OWI	paied
10-12	Green Bay	2 nd OWI	Not paided

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.

Carl Smith 10-31-12
 Applicant's Signature Date

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

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

Lynn K. Kobus 11/7/12
 Authorized signature performing background check Date

Receipt # 25041 Dated: 10/31/12 Mail or Pick Up Date: _____

WISCONSIN

SELLER / SERVER CERTIFICATION

Trainee Name: Galen Sherbon

Date of Completion: 10/31/2012 09:50 CST

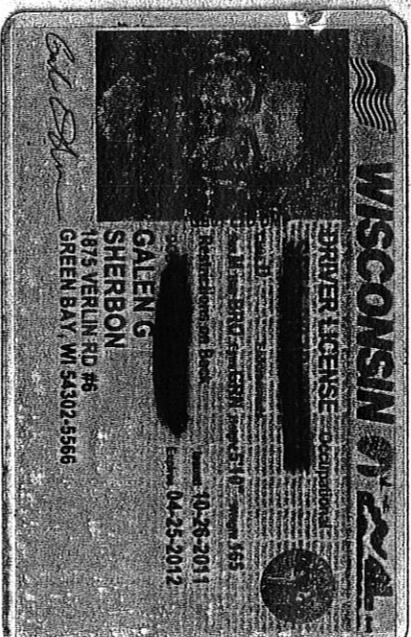
School Name: Learn2Serve

Certification #: WI 1979695

I, 

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

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66



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

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU

11/07/2012

Order Number : 3412711

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

Name	GALEN G SHERBON
Date of Birth	[REDACTED]
Sex	M
Race	W



Wisconsin Criminal History

Report Date: 11/07/2012

Government

WISCONSIN IDENTIFICATION DATA

CAREFULLY READ THIS ENTIRE EXPLANATION AND THE WISCONSIN CRIMINAL HISTORY RECORD BELOW IN ORDER TO DETERMINE WHETHER THIS RECORD PERTAINS TO THE INDIVIDUAL IN WHOM YOU ARE INTERESTED.

THIS RESPONSE IS BASED ON A SEARCH USING THE NAME, DATE OF BIRTH, AND ANY OTHER IDENTIFYING DATA YOU PROVIDED. THE IDENTIFYING DATA YOU PROVIDED IS PRINTED ON THE COVER PAGE ACCOMPANYING THIS REPORT.

THE CRIMINAL HISTORY REPORTED BELOW IS LINKED TO FINGERPRINTS ASSOCIATED WITH THE NAME APPEARING IMMEDIATELY BELOW THE WISCONSIN CRIMINAL HISTORY RECORD LINE AND IDENTIFIED AS THE "SUBJECT NAME" IN THE INFORMATION THAT FOLLOWS. USE BY THAT PERSON OF AN ALIAS OR FRAUDULENT NAME SIMILAR TO THE NAME OF ANOTHER PERSON, SUCH AS THE NAME YOU SUBMITTED FOR SEARCHING, DOES NOT MEAN THAT THE OTHER PERSON HAS A CRIMINAL HISTORY. IT IS NOT UNCOMMON FOR CRIMINAL OFFENDERS TO USE ALIAS NAMES AND FALSE DATES OF BIRTH, SOMETIMES KNOWN AS "IDENTIFY THEFT." ALIAS NAMES USED BY THE PERSON WHOSE WISCONSIN CRIMINAL HISTORY RECORD FOLLOWS BELOW ARE LISTED IN THE "OTHER NAMES USED"

SECTION. IF THE NAME YOU SUBMITTED TO BE SEARCHED IS DIFFERENT FROM THE "SUBJECT NAME" BELOW, THE WISCONSIN CRIMINAL HISTORY RECORD BELOW MAY BELONG TO SOMEONE OTHER THE PERSON WHO'S NAME YOU SUBMITTED FOR SEARCHING.

THIS RESPONSE MAY NOT SHOW ALL ARRESTS FOR THE INDIVIDUAL WHO IS THE SUBJECT OF THE CRIMINAL HISTORY REPORT. HOWEVER, ALL INFORMATION PROVIDED TO THE STATE REPOSITORY AND RELEASABLE PURSUANT TO YOUR REQUEST IS INCLUDED IN THE REPORT. THE RESULTS OF THIS SEARCH ARE EFFECTIVE AND CURRENT FOR THE DATE OF THIS SEARCH ONLY. A NEW REQUEST SHOULD BE SUBMITTED IF AN UPDATED RESPONSE IS NEEDED AT A LATER TIME.

NOTICE TO EMPLOYERS: IT MAY BE A VIOLATION OF STATE LAW TO DISCRIMINATE AGAINST A JOB APPLICANT BECAUSE OF AN ARREST OR CONVICTION RECORD. GENERALLY SPEAKING, AN EMPLOYER MAY REFUSE TO HIRE AN APPLICANT ON THE BASIS OF A CONVICTION RECORD ONLY IF THE CIRCUMSTANCES OF THE OFFENSE FOR WHICH THE APPLICANT WAS CONVICTED SUBSTANTIALLY RELATE TO THE CIRCUMSTANCES OF THE PARTICULAR JOB. FOR MORE INFORMATION, SEE WISCONSIN STATUTE § 111.335 AND THE DEPARTMENT OF WORKFORCE DEVELOPMENT'S PUBLICATION, ARREST AND CONVICTION RECORDS UNDER THE LAW.

BEFORE ANY ADVERSE FINAL DETERMINATION IS MADE, APPLICANTS SHOULD BE NOTIFIED OF THEIR RIGHT TO CHALLENGE THE ACCURACY AND COMPLETENESS OF ANY INFORMATION CONTAINED IN A CRIMINAL HISTORY RECORD. CHALLENGES SHOULD BE SUBMITTED TO CIB ON FORM DJ-LE-247 AND MAY INCLUDE A REQUEST FOR FINGERPRINT COMPARISON OF YOUR SUBJECT TO THE FINGERPRINTS ON FILE ASSOCIATED WITH THE WISCONSIN CRIMINAL HISTORY RECORD BELOW. FORM DJ-LE-247 IS AVAILABLE FREE OF CHARGE ON THE DEPARTMENT OF JUSTICE WEBSITE AT [HTTP://WWW.DOJ.STATE.WI.US/DLES/CIB/CRIMHIST.ASP](http://www.doj.state.wi.us/dles/cib/crimhist.asp) OR BY CALLING (608) 266-7314.

RECORD LAST UPDATED: 05/31/2012

Identification Criminal History Contributing Agencies Your Request

IDENTIFICATION

GALEN GLEN SHERBON

Male / White
Born in Wisconsin ; Citizen of USA

04/13/1936

5'10" 160lbs Green Eyes ; Brown Hair
613 Park St, Green Bay, WI 54303 as of 05/30/2012
1875 Verlin Rd. Apt. #6, Green Bay, WI 54302 as
of 09/11/2011

FBI: Unknown

STATE ID: WI1341283

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

EMPLOYER: Unknown

OCCUPATION: Unknown

PHOTO INFORMATION:

WI013035Y WI CIB Identification Section

CRIMINAL HISTORY

Cycle 1

EARLIEST EVENT DATE: September 11, 2011
ARREST TRACKING NUMBER: 5001109110174
DATE OF OFFENSE: September 11, 2011

ARREST DATA

SUBJECT NAME: GALEN GLEN SHERBON
TYPE: Adult Only
DATE: September 11, 2011
ARREST AGENCY: WI0050000 BROWN COUNTY SHERIFF

BOOKING

AGENCY: WI0050000 BROWN COUNTY SHERIFF

CHARGE

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

Cycle 2

EARLIEST EVENT DATE: September 11, 2011
ARREST TRACKING NUMBER: 5001205300257
DATE OF OFFENSE: September 11, 2011

ARREST DATA

SUBJECT NAME: GALEN GLEN SHERBON
TYPE: Adult Only
DATE: May 30, 2012
ARREST AGENCY: WI0050000 BROWN COUNTY SHERIFF

BOOKING

AGENCY: WI0050000 BROWN COUNTY SHERIFF
CHARGE
SEQUENCE NUMBER: 01
STATUTE NUMBER: 346.63(1)(A)
LITERAL: OPERATING WHILE INTOXICATED
NCIC CODE: 5404
COUNTS: 1
CLASSIFICATION:
CHARGE SEVERITY: Misdemeanor

CONTRIBUTING AGENCIES

WI0050000 Brown County Sheriff
WI013035Y WI CIB Identification Section

YOUR REQUEST:

User ID:	10562	Date & Time:	11/07/2012 13:26:21
State Ident Number:	WI1341283	Purpose Code:	A



Operator License Application
Village of Howard

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

Office Use Only:	License #	Provisional #
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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: <u>Smith</u>		First Name: <u>Marie</u>		Middle Name: <u>E</u>				
Residence: Street Address: <u>1018 Cardinal Ln</u>		City: <u>Green Bay</u>		State: <u>WI</u>		Zip: <u>54313</u>		
Residence Phone: <u>434-0451</u>	Birthdate: <u>6-26-55</u>	Birth Place (City, State): <u>Green Bay WI</u>	Race: <u>WI</u>	Sex: <u>Fe</u>	Height: <u>5'4</u>	Weight: <u>180</u>	Hair: <u>Br</u>	Eyes: <u>Br</u>
Driver's License # (State & Number): <u>WIS</u>		Establishment Where Employed:			Contact Person & Phone Number:			

Other Names, Aliases or Birthdates ever used:
Mueller, Wayka

Cities & States lived in the past 10 years: <u>2001 E Tropicana Ave Apt 2111 Las Vegas, NV 89119</u>		From: <u>2003</u>	To: <u>2011</u>
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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 _____)

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.

Mari Smith
Applicant's Signature

10-22-2012
Date

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

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

Lynn Kobus 11/7/12
Authorized signature performing background check Date

Receipt # 24763 Dated: 10/22/12 Mail or Pick Up Date: _____

WISCONSIN
TECHNICAL COLLEGE
SYSTEM

Responsible Beverage Service Course Completion Certificate

Marie Smith
Name of student

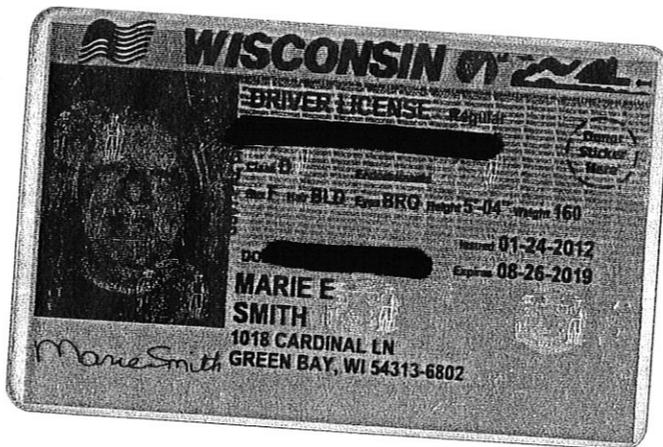
Has successfully completed the responsible beverage service course which complies with Wisconsin Statutes 125.17(6) and 134.66(2m) related to retail tobacco sales.

Date of course completion 10-18-12
Name of instructor Doug Leitnerman
Wisconsin Technical College issuing certificate Northeast Wisconsin Technical College

David Henry
Wisconsin Technical College System President

[Signature]
Northeast Wisconsin Technical College President

5684BIT jk 1.09



HOWARD, WI VILLAGE
2456 Glendale Ave
PO Box 12207
Green Bay WI 4307--2207
920-434-4642
Transaction 24763.4426
22-Oct-12 11:30am

Operators License
Marie E Smith \$40.00

Subtotal \$40.00
CC \$40.00

DEPARTMENT OF JUSTICE CRIME INFORMATION BUREAU**11/07/2012****Order Number : 3412711**

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

Name	MARIE E SMITH
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.
