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APPLICATION FOR TEMPORARY CLASS "B"/"CLASS B" RETAILER'S LICENSE

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$ 10.⁰⁰

AUGUST 29 2011 Wis., 20

To the governing body of the

Town of

Village of

City of

HOWARD

County of

BROWN

The named organization applies for: (check appropriate box(es).)

A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.

A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stat.

at the premises described below during a special event beginning 10/8 and ending 10/8 and agrees to comply with all law, resolution, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

1. ORGANIZATION (Bona fide club, church, lodge or society, veteran's organization or fair association):

(a) Name VALLEY CABINET

(b) Address 845 PROSPER ROAD DE PERE WIS. 54115

Street

Town

Village

City

(c) Date organized NOV, 1960

(d) If corporation, give date of incorporation NOV, 1960

(e) Names and addresses of all officers:

President DEAN STOLLER 4061 HALF CROWN PUN DE PERE WIS. 54115

Vice President MIKE STOLLER 2015 REDGE WREN ROAD " " "

Secretary STAVE MASHI 2236 OLD MARTIN ROAD " " "

Treasurer TOM SMITH 5315 SUNDRUST CT " " "

(f) Name and address of manager or person in charge of affair: DEAN STOLLER

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

(a) Street number 345 Village Ct

(b) Lot Block

(c) Do premises occupy all or part of building? picnic area

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover:

DECLARATION

The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.

VALLEY CABINET INC. Name of organization

Officer Dean Stoller (Signature)

Officer [Signature] (Signature)

VILLAGE OF HOWARD
2456 GLENDALE AVE.
P.O. BOX 12207
GREEN BAY, WI 54307-2207

Date Filed

Date Reported to Council or Board

Date Approved

License No.