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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 — 5/16 Wis., _____ 20 11

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 6/17 and ending 6/19/2011 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 Howard Youth Sports Assc
   (b) Address 2456 Glendale Ave (Street) ☐ Town ☒ Village ☐ City
   (c) Date organized 1-1-89
   (d) If corporation, give date of incorporation _____
   (e) Names and addresses of all officers:
   President Bill Monfre 3563 Abby Ct Howard
   Vice President _____
   Secretary _____
   Treasurer Dave Luedke 1208 Cardinals Dr Howard
   (f) Name and address of manager or person in charge of affair: Dave Luedke 1208 Cardinals Dr 54313
2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:
   (a) Street number Akzo Nobel Pinecrest Rd
   (b) Lot _____ Block _____
   (c) Do premises occupy all or part of building? _____
   (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.

HYSA
Name of organization

Officer _____ (Signature)

Officer _____ (Signature)

Date Filed REC'D MAY 16 2011

Date Reported to Council or Board _____

Date Approved _____

License No. _____

AT-315 (R. 01-02)
Wisconsin Department of Revenue

Printed on Recycled Paper

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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 — 5-16- Wis., 20 11

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 7/22 and ending 7/24/2011 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 Howard Youth Sports Assc
   (b) Address 2456 Glendale Ave (Street) ☐ Town ☑ Village ☐ City
   (c) Date organized 1-1-89
   (d) If corporation, give date of incorporation
   (e) Names and addresses of all officers:
   President Bill Monroe 3563 Abby Ct, Howard
   Vice President
   Secretary
   Treasurer DAVE LUECKE 1208 Caprinus Dr Howard
   (f) Name and address of manager or person in charge of affair: Mike Siwoons 3891 Sunray Ln Howard

2. **LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:**
   (a) Street number Akzo Nobel Pinecrest
   (b) Lot Block
   (c) Do premises occupy all or part of building?
   (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.

HYSA
Name of organization

Officer (Signature)

Officer (Signature)

Date Filed REC'D MAY 16 2011

Date Reported to Council or Board

Date Approved

License No.

AT-315 (R. 01-02)
Wisconsin Department of Revenue

Printed on Recycled Paper

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REC'D MAY 27 2011

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 Howard Wis., May 27 20 11

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 July 16, 2011 and ending July 17, 2011 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 St. John the Baptist Church
   (b) Address 2597 Glendale Ave (Street) ☐ Town ☒ Village ☐ City
   (c) Date organized 1853
   (d) If corporation, give date of incorporation 1884
   (e) Names and addresses of all officers:
   President Fr. John Bergstadt
   Vice President Deacon Manny Torres
   Secretary Lynn Greisinger
   Treasurer David Withee
   (f) Name and address of manager or person in charge of affair: Deacon Manny Torres 2597 Glendale Ave.
2. **LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:**
   (a) Street number 2597 Glendale Ave
   (b) Lot _____ Block _____
   (c) Do premises occupy all or part of building? Yes
   (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.

St. John the Baptist Church
Name of organization

Officer Rev. John P. Bergstadt
(Signature)

Officer Deacon Manny Torres
(Signature)

Date Filed 5/27/11

Date Reported to Council or Board _____

Date Approved _____

License No. _____

AT-315 (R. 01-02)
Wisconsin Department of Revenue

Printed on Recycled Paper

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

Transaction 1951
16-May-11 10:15am

Liquor License
$10.00
Temp Class B hysa July 22 through July 24, 2011

Liquor License
$10.00
Temp class B hysa June 17 through June 19, 2011

Subtotal $20.00
Cash $20.00

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

Transaction 1951
16-May-11 10:15am

Liquor License
$10.00
Temp Class B hysa July 22 through July 24, 2011

Liquor License
$10.00
Temp class B hysa June 17 through June 19, 2011

Subtotal $20.00
Cash $20.00

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

Transaction 2492
27-May-11 10:42am

Liquor License
$10.00
St. John the Baptist Church - Temp. Class B - Picnic Permit

Subtotal $10.00
Check $10.00