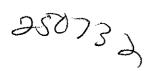
250732

## SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT ORGANIZATION OR LIMITED LIABILITY COMPANY

Submit to municipal clerk. All corporations/organizations or limited liability companies applying for a license to sell fermented mait beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official. Racine To the governing body of: Town/Village/City of County of The undersigned duly authorized officer(s)/members/managers of Speedway SuperAmerica LLC (registered name of corporation/organization or limited liability company) a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Speedway # 4451 (trade name) located at 2110 South Green Bay Rd., Racine, UT 53406-4918 Rachel Sue Wells appoints (name of appointed agent) 317 Graham St., Racine, WI 53405 (home address of appointed agent) to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/ organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin? Yes X No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies). Is applicant agent subject to completion of the responsible beverage server training course? X Yes No How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin?\_ Lifetime 317 Graham St., Racine, WI 53405 Place of residence last year Speedway SuperAmerica LLC (name of corporation/organization/limited liability company) James T. Morgan, Vice President Ronald L. Edmiston, Treasurer (signature of Officer/Member/Manager) ACCEPTANCE BY AGENT Rachel Sue Wells \_\_\_\_\_, hereby accept this appointment as agent for the corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company. Agent's age \_\_\_47 (signature of agent) 317 Graham St., Racine, WI 53405 Date of birth (home address of agent) APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official) thereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

(signature of proper local official)

(town chair, village president, police chief)



## AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

HOME ADDRESS (Street/Route)  317 Grahem St.  HOME PHONE NUMBER 262-554-5004  The above named individual provides the following information as a person who is (check one):  Applying for an alcohol beverage license as an individual.  A member of a partnership which is making application for an alcohol beverage license.  Rechel Sue tiells, Agent of Speeduay SuperAmerica LLC (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG (NAME OF CORPORATION, LIMITED LIABILITY COMPANY	31	IVIDUAL'S FULL NAME (Please Print) (Last Name)	(First Nar	ne)	(Middle Name)	SOCIAL SE	CURITY NUM	MBER	
317 Graham St.    Recine   MI   532     Home Phone Numbers   Age   Date of pilith   Place of Birth   Place o	31	WE ADDRESS (Street/Pouts)	Ract		Sue				
HOME PHONE NUMBER  262-554-5004  Age  Age  Age  Age  Age  Age  Age  Ag	HON	·		1		STATE	ZIP CODE		
The above named individual provides the following information as a person who is (check one):    Applying for an alcohol beverage license as an Individual.   A member of a partnership which is making application for an alcohol beverage license.   Rachel Sue litells, Agent		/ GLATIAN 30. ME PHONE NUMBER	AGE				53406	1	
The above named individual provides the following information as a person who is (check one):  Applying for an alcohol beverage license as an individual.  A member of a partnership which is making application for an alcohol beverage license.  Rachel Sue tibile, Agent of SuperAmerica LLC (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION, LIMITEO LIABILITY COMPANY OR NONPROFIT ORG (INAME OF CORPORATION LIABILITY COMPANY OR NONPROFIT ORG (INAME OF	26	2-554-5004	l -	DATE OF BIRTH	•	Ī			
Applying for an alcohol beverage license as an Individual.  A member of a partnership which is making application for an alcohol beverage license.  Rachel Sue Wells, Agent of Speedway SuperAmerica LLC (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORG which is making application for an alcohol beverage license.  The above named individual provides the following information to the licensing authority:  1. How long have you continuously resided in Wisconsin prior to this date? Lifetime  1. How long have you continuously resided in Wisconsin prior to this date? Lifetime  1. How long have you continuously resided in Wisconsin prior to this date? Lifetime  2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)  3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? (If yes, describe status of charges pending.)  4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit?  5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin?  6. Named individual must list in chronological order last two employers.  Employer's Address  From  Speeduay SuperAmeric	_			1		T DTSCK I	KIVEL LEI	TTS' MT	
A member of a partnership which is making application for an alcohol beverage license.    Rachel Sue litells, Agent	The	above named individual provides the following	information as a per	son who is ( <b>chec</b>	k one):				
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Rachel Sue libiles, Agent  Off Speeduay SuperAmerica LLC  (Officer/Direct/Oriec		A member of a partnership which is making a	polication for an alco	hol beverage lice	nea				
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(If yes, identify.)  (NAME OF WHOLESALE LICENSEE OR PERMITTEE)  (ADDRESS BY CITY AND COUNTY)  Employer's Address  From  Speeduay SuperAmerica LLC  P D Box 1500, Springfield, 0H 45501  Canterbury Home  Kenosha, Lill  O6/200  The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing applicate applicant has read and made a complete answer to each question, and that the answers in each instance are true and undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes about the application of the Region of the Address of the Region of the Region of the Address of the Region of t		member/manager/agent of a limited liability company holding or applying for a wholesale hoor license, browner,							
(NAME OF WHOLESALE LICENSEE OR PERMITTEE)  (ADDRESS BY CITY AND COUNTY)  Employer's Address  From  Speeduay SuperAmerica LLC  P D Box 1500, Springfield, 0H 45501  O5/200  Canterbury Home  Kenosha, Lill  O6/200  The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing applicate applicant has read and made a complete answer to each question, and that the answers in each instance are true and undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes about the applicant has read and made a complete answer to each question, and that the answers in each instance are true and undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes about the applicant has read and made a complete answer to each question, and that the answers in each instance are true and undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes about the applicant has read and made a complete answer to each question, and that the answers in each instance are true and undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes are the applicant has read and made a complete answer to each question, and that the answers in each instance are true and undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes are the applicant has read and made a complete answer to each question.	P	entilit of wholesale liquor betmit in the State of	f Wisconsin?		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	. Yes 🗌	No X	
6. Named individual must list in chronological order last two employers.  Employer's Name Speedway SuperAmerica LLC P 0 Box 1500, Springfield, 0H 45501  Canterbury Home Kenosha, LilI  The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing applicate applicant has read and made a complete answer to each question, and that the answers in each instance are true and undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes about the small be understands.	Ų	n yes, identity.)							
Employer's Name Speedway SuperAmerica LLC P D Box 1500, Springfield, 0H 45501 Canterbury Home Kenosha, WI  The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing applicate applicant has read and made a complete answer to each question, and that the answers in each instance are true and undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes about he world.	. 1				(ADDRESS BY (	DRESS BY CITY AND COUNTY)			
Speedway SuperAmerica LLC P D Box 1500, Springfield, 0H 45501 05/200  Canterbury Home Kenosha, LtT 06/200  The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing applicate applicant has read and made a complete answer to each question, and that the answers in each instance are true and undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes about he world.		Employer's Name	• •				Employed		
Canterbury Home Kenosha, LiT 06/200  The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing applicate the applicant has read and made a complete answer to each question, and that the answers in each instance are true and undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes and the uniderstands.	_	Speedway SuperAmerica LLC	• • • • • • • • • • • • • • • • • • • •		1. OH 45501		/200E	To	
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undersigned further understands that any license issued contrary to Chapter 125 of the Wisconein Statutos shall be used a		ndersigned, being first duly sworn on oath, dep	oses and says that h	e/she is the perso	n named in the	foregoing a	pplication;	that	
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