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Schedule for Successor of Agent

there is a change in agent, each club, corporation, or limited liability company who holds a retail permit to sell fermented mall beverages and/or intoxicating liquor must appoint a successor agent pursuant to sec. 125 04(6). Wis. Stats. There is a \$10 change in agent processing fee due with this form. The following questions must be answered by the Agent. The appointment must be signed by an officer of the corporation/organization or one member of limited liability company. (Only one signature is required). The appointment must be approved by the licensing authority.

in accordance with sec 125.04(6). Wis. Stats Name of Permittee THE OLIVE GARDEN ITALIAN REST. #13	20
Yes No 2 Are you of legal drinking age? 3 Have you been a resident of Wisconsin for at least 90 continuous days prior to the date of appointment as age 4 Have you ever been convicted of a federal law violation? 5 Have you ever been convicted of a state law violation? 6 Have you completed the required responsible beverage server program per sec. 125.04(5)(a)5, Wis. Stats.? UNDER PENALTY OF LAW. I declare that all of the above information is true and correct to the best of my knowledge and Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more structed. Successor Addense 8 Successor Addense 9 Have solution? 7 Successor Addense 9 Maxe solution? 7 Gagnature of Apenty 1 Gagnature of Apenty 1 Gagnature of Apenty 1 Successor Addense 1 Successor Addense 1 Addressi 3260 91ST STREET, STURTEVANT, WI 53 (Address) Addressi 1 Maxe of Permittee 1 The undersigned appoints <tr< th=""><th></th></tr<>	
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Name of Permittee THE OLIVE GARDEN ITALIAN REST. #13 Date 04/12 2019 By By	agent
	71
	WEAKE (SCORE (Prof. pro
hereby accept appointment as agent for THE OLIVE GARDEN ITALIAN RESTAURANT #1371 and as	sume
ull responsibility of the conduct of the business relative to fermented malt beverages and intoxicating liquor	
Date 4/15 2019 WICAPLY TOP	n /
(Signature of Agent)	H_{ℓ}
	and a response to

THE AGENT APPOINTED ABOVE MUST BE APPROVED BY THE LICENSING AUTHORITY TO BE EFFECTIVE. (See sec 125.04(6), Wis. Stats.)

	Wit		20
(Municipality)		(Date)	
/P.worto	and the states of		
(Signatu	re of Official	<i>k</i>	
	Title)		
	We	consin Departme	tt of Researce

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

ndividual's Full Name (please print)	(last name)		(first name				name)
	Rogers		Micaela			Marie	
ome Address (street/route) 3260 91st Street		Post Office		city Sturtevant		State WI	Zip Code 53177
ome Phone Number			Age	Date of Birth		Place of	
14-719-8046			1			Milwaukee, WI	
e above named individual pr	ovides the follo	wing information	n as a pers	son who is (check o	one):		
Applying for an alcohol be	verage license a	as an individua	I.				
A member of a partnershi	ip which is maki	ing application f	or an alcol	hol beverage licen	ise.		
Agent		of GN	MRI, Inc.				
(Officer/Director/Membe				ame of Corporation, Limite	ed Liability Compa	ny or Nonpro	ofit Organization)
which is making applicatio	n for an alcohol	beverage licen	se.				
e above named individual pr	ovides the follo	wing information	n to the lice	ensing authority:			
How long have you continu	ously resided in	Wisconsin prio	r to this da	te? Since birth			
Have you ever been convic	ted of any offen	ises (other than	traffic unre	elated to alcohol b	everages) fo	л	
	any Misconsi	n laws, any laws	-			/ county	_
violation of any federal laws							Yes
or municipality?							
or municipality?	e violated, trial o	court, trial date a	and penalt	y imposed, and/or		ption and	
or municipality? If yes, give law or ordinance status of charges pending. Are charges for any offense for violation of any federal la	e violated, trial o (If more room is) es presently pen aws, any Wisco	court, trial date a needed. continue nding against yo	on reverse	y imposed, and/or side of this form) an traffic unrelated	date, descrip	peverage	s)
or municipality? If yes, give law or ordinance status of charges pending. Are charges for any offense for violation of any federal la municipality? If yes, describe status of ch Do you hold, are you makin organization or member/ma beverage license or permit?	e violated, trial o (If more room is) es presently pen aws, any Wisco arges pending. Ig application fo unager/agent of	court, trial date a needed. continue nding against yo nsin laws, any l r or are you an a limited liability	and penalty on reverse u (other th aws of oth officer, dire v company	y imposed, and/or side of this form) an traffic unrelated er states or ordina ector or agent of a holding or applyir	date, descrip d to alcohol b inces of any corporation/ ng for any oth	county of county of nonprofit	s) r Yes
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Subscribed and sworn to before me	\sim	Magolo Rowan
this Dtuday of April , 20 19	WILKINSO	
m. Wie benson	OTARK	
My commission expires 4-8-21	N	6
	PUBLIC	Printed on Recycled Paper
AT-103 (R. 8-11)	OF WISCOMMUN	Wisconsin Department of Revenue

Office of the City Clerk



City Hall 730 Washington Avenue, #103 Racine, Wisconsin 53403 (262) 636-9171 Fax: (262) 636-9298 Email: clerks@cityofracine.org

Tara Coolidge City Clerk

City of Racine, Wisconsin

TO: Micaela Marie Rogers

DATE: 4/15/2019

FROM: CITY CLERK'S OFFICE

 This is to confirm that your application for a
 Change of Agent – "Class B"

 located at
 6000 Durand Avenue
 will be presented to the

 Public Safety and Licensing Committee on
 May 14, 2019
 at

 5:30P.M., in Room 307, City Hall.
 Your attendance is mandatory.

If for any reason you decide to withdraw your application, it <u>must</u> be done in writing and filed with the City Clerk's Office **prior to issuance of your license.** Any refunds for a denied or withdrawn license application will be refunded, minus publication, records check and a \$40.00 processing fee.

If the license is granted, it is understood that the applicant will not be issued a license until all necessary departmental approvals are received by the City Clerk's Office.

Please note there is a possibility the committee may vote to recommend denial / denial of renewal / suspension / revocation of your license application at this hearing, pursuant to the procedures under Wis. Stat. § 125.12 and subject to common council approval. You may be represented by an attorney at your own expense for any of these proceedings. Failure to appear may also result in denial of your application.

Signature of applicant Mrcarles M. Roys
Signature of applicant/partner
Today's Date