



City of Lake Geneva, 626 Geneva St, Lake Geneva, WI 53147- 262.248.3673- www.cityoflakegeneva.com

CITY OF LAKE GENEVA REGULAR COMMON COUNCIL
MONDAY, JUNE 14, 2021 6:00 P.M.
LAKE GENEVA CITY HALL; COUNCIL CHAMBERS (MAIN LEVEL)

Members:

Mayor Charlene Klein, Council President, Rich Hedlund, Council Vice President, John Halverson,
Alderspersons: Tim Dunn, Mary Jo Fesenmaier, Cindy Flower, Ken Howell, Shari Straube, and Joan Yunker

THE CITY OF LAKE GENEVA IS HOLDING ALL MEETINGS VIRTUALLY AS WELL AS IN PERSON TO HELP PROTECT OUR COMMUNITY FROM THE CORONAVIRUS (COVID-19) PANDEMIC. IN-PERSON ATTENDANCE WILL BE LIMITED TO NO MORE THAN THIRTEEN PEOPLE, ON A FIRST COME FIRST SERVED BASIS. IF YOU WISH TO LISTEN OR WATCH THE MEETING YOU MAY DO SO BY USING THE FOLLOWING:

1. Links to the City of Lake Geneva's live video stream can be found at www.cityoflakegeneva.com/video
2. Television: Watch live broadcast of the meeting on Spectrum Cable Channel 25
3. Listen to audio via phone: (602) 333-2017 (Long distance rates may apply) (888) 204-5987 (Toll Free) **Access Code:** 9746153
4. You can provide public comment on agenda items by appearing in person or by emailing your comments to the Clerk at cityclerk@cityoflakegeneva.com or you may deliver your written comments to the City of Lake Geneva City Hall, 626 Geneva Street, Lake Geneva, WI 53147. All written comments must be provided to the Clerk by 5:00 P.M. on the date of the meeting. All written comments will be read aloud during the agenda item when public comments are allowed during the meeting.

AGENDA

1. Mayor Klein call the meeting to order
2. Pledge of Allegiance – Alderperson Yunker
3. Roll Call
4. Awards, Presentations, Proclamations, and Announcements
 - a. Avian Committee Recognition of Junior Girl Scout Troop 7166
5. Re-consider business from previous meeting
6. Comments from the public as allowed by Wis. Stats. §19.84(2), limited to items on this agenda, except for public hearing items. Comments will be limited to 5 minutes
7. Acknowledgement of Correspondence
8. Approve the Regular Council Minutes of May 24, 2021 as prepared and distributed
9. **CONSENT AGENDA**– *Recommended by Finance, Licensing and Regulation on June 1, 2021.* Any item listed on the consent agenda may be removed at the request of any member of the Council. The request requires no second, is not discussed, and is not voted upon.

- a. Sidewalk Café Renewal Application, for the license term of July 1, 2021 through June 20, 2022, filed by Harborside Café located at 100 Broad St
- b. Massage Establishment Renewal Applications, for the license term July 1, 2021 through June 30, 2022, filed by:
 - Element Massage Studio, located at 647 W Main St
 - Aveda Jasmine Salon and Spa, located at 251 Cook St
 - Lake Geneva Massage Therapy, located at 905 Marshall St
 - The Therapeutic Touch, located at 601 W Main St
 - Healing Muscle Therapies, located at 201 Broad St

10. Items removed from the Consent Agenda

- 11. Discussion/Action regarding Resolution 21-R44 a resolution to ratify the Emergency Proclamation approved by the Chief Executive Officer Pertaining to the COVID-19 Pandemic and Declaration of Emergency**

12. Recommendation of the Finance, Licensing, and Regulation Committee of May 18, 2021 and June 1, 2021- Ald. Howell

- a. Discussion/Action regarding the Original Reserve “Class B” Intoxicating Liquor license and Class “B” Fermented Malt Beverage license application filed by Lake Geneva Egg Harbor LLC d/b/a Egg Harbor Cafe, Agent, Adeline Buffa, located at 827 Main St, Lake Geneva
- b. Discussion/Action regarding an Original Class “B” Fermented Malt Beverage License Application filed by Decorum Lake Geneva LLC d/b/a Comfort Suites Lake Geneva East, Agent, Eric Schmitt, located at 300 E Main St, Lake Geneva
- c. Discussion/Action regarding an Original Class “B” Fermented Malt Beverage License Application filed by Tienda El Rancho Inc d/b/a Tienda El Rancho, Agent, Mercedes Jaramillo, located at 1151 Elkhorn Rd, Lake Geneva
- d. Discussion/Action regarding Resolution 21-R35 a resolution authorizing and directing the proper city official(s) to issue the Liquor License renewals for the period of July 1, 2021, to June 30, 2022
- e. Discussion/Action regarding lease for Visitor’s Center Building between the City of Lake Geneva and VISIT Lake Geneva
- f. Discussion/Action regarding Pay Request #8 filed by MSI General Corp for work completed on the Riviera Restoration Project- Phase I in an amount not to exceed \$100,722.45
- g. Discussion/Action regarding Pay Request #7 filed by MSI General Corp for work completed on the Riviera Restoration Project- Phase II- Interior Remodel & MEP Work in an amount not to exceed \$788,765.45
- h. Discussion/Acceptance of June 1, 2021 Finance, Licensing, and Regulation Committee Payment Approval Reports

- 13. Motion to go into Closed Session** pursuant to Wisconsin Statutes 19.85(1)(g) for the purpose of conferring with legal counsel for the governmental body who is rendering oral or written advice

concerning strategy to be adopted by the body with respect to litigation in which it is or is likely to become involved regarding: **Notice of Claim from White River Holdings, LLC**

14. Motion to return to open session pursuant to Wisconsin Statutes 19.85 (2) and take action on any items discussed in closed session

15. Adjournment

Requests from persons with disabilities, who need assistance to participate in this meeting or hearing, should be made to the City Clerk's office in advance so the appropriate accommodations can be made.



Presented June 2021 by the
City of Lake Geneva Avian
Committee to

Junior Girl Scout Troop 7166

recognizing your achievements
earning the

Animal Habitat Badge

as part of the
Learning to Soar
Avian Education Program

Your work is preparing you to be the
citizen-scientists and city leaders we
need to assure that our natural
environment and our birds are
protected and continue to delight us
in the years to come.



Junior Girl Scout Troop 7166

Members

Sienna Arthur

Leah Cunat

Rayna Jones

Madyjo Schuessler

Lexi Shibilski

Deysi Valdez-Salinas

Brooklyn Winters

Leader

Nancy Lazzaroni





Beginning in April 2021, Troop 7166 worked with coaches from the City of Lake Geneva Avian Committee to fulfill the...

Animal Habitat Badge Requirements

- *Find out about wild animals*
- *Investigate an animal habitat*
- *Create an animal house or explore baby-animal habitats*
- *Explore endangered habitats*
- *Help protect animal habitats*



Finding out about wild animals

Use clues to help you identify your bird.

Size: ☐ Small ☐ Medium ☐ Large

Color: ☐ Black ☐ White ☐ Grey ☐ Brown ☐ Red ☐ Blue ☐ Green ☐ Yellow ☐ Orange ☐ Purple

Color pattern: ☐ Solid ☐ Striped ☐ Spotted ☐ Mottled ☐ Ringed

Behavior: ☐ Singing ☐ Chirping ☐ Calling ☐ Nesting ☐ Mating

Habitat (or where observed): ☐ Bird Feeder ☐ Water ☐ Tree - canopy ☐ Field ☐ Other: _____

Season: ☐ Spring ☐ Summer ☐ Fall ☐ Winter

Sketch: 



How do we identify a bird?
What are the clues?





Indoor bird watching!



Practicing citizen-scientist skills



Observe... record...research and
analyze...share results

Observe... record...research and
analyze...share results



Using our new resources – bird guides
and field notebooks - our troop
members successfully started their life-
lists...identifying birds and recording
sightings.



**Investigate
animal habitats**



Explore endangered habitats



Birds need



Migratory birds – such as the Chimney Swift – taught us lessons about how threats to habitats all over the globe can impact our birds.



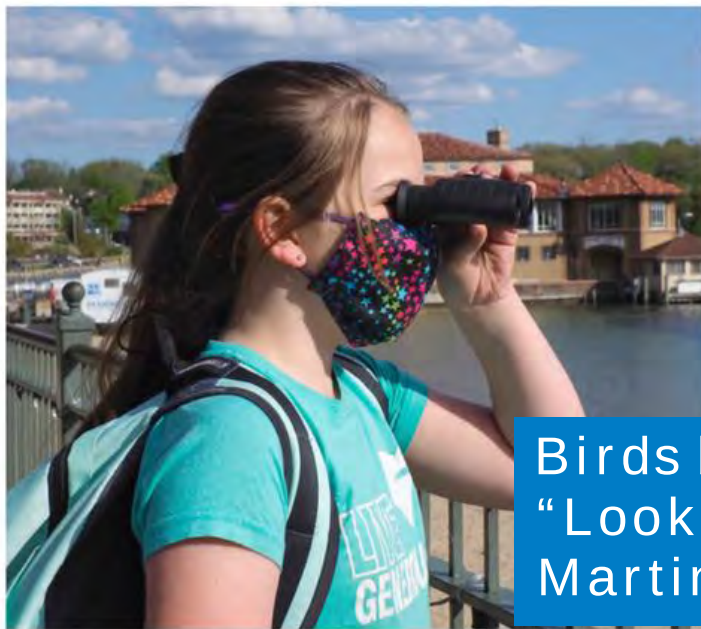
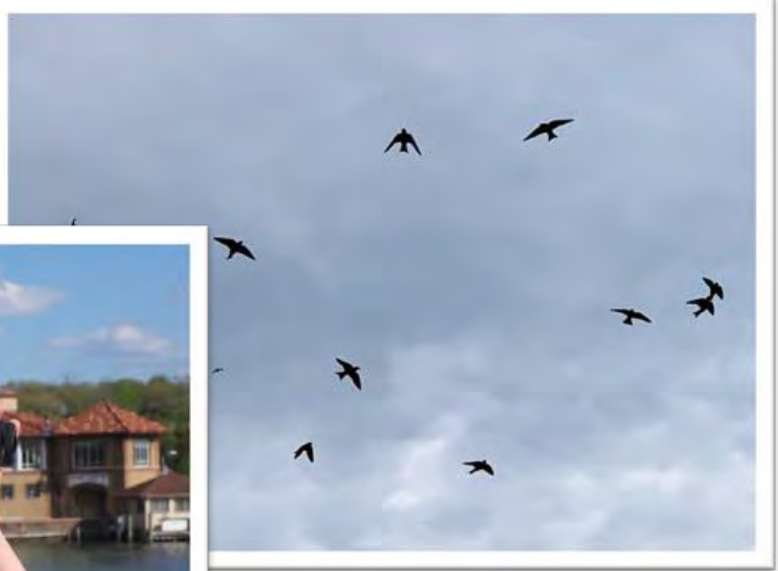
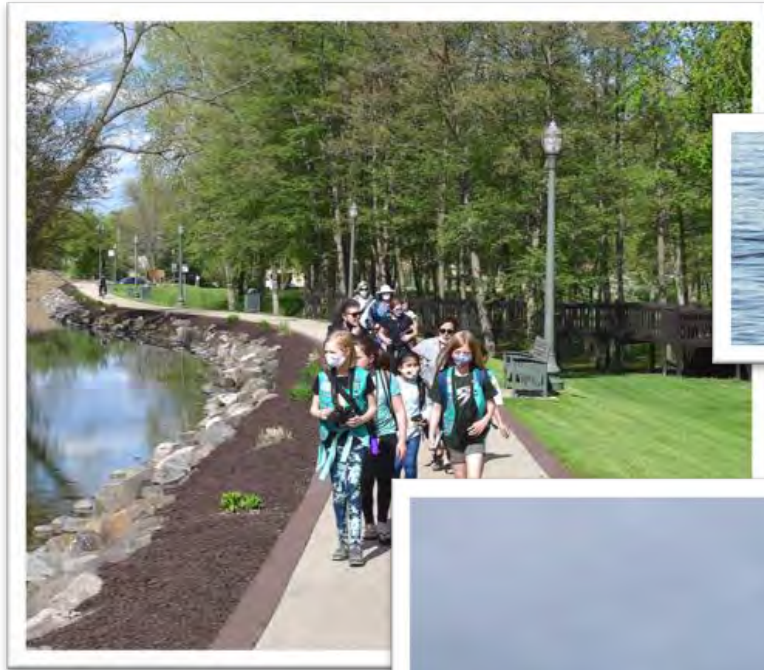
Investigate
animal habitats



Birds in our yards...



Using our bird guides, our field guides and binoculars borrowed from the Lake Geneva Public Library, we and our Avian Committee coaches set out from Eastview Elementary to bird watch.



Birds by the lake...
“Look, those are Purple Martins!”

Investigate
animal habitats





We visited the Avian Committee's Purple Martin Colony to learn about the relationship between people and Purple Martins.



Purple Martin Colony Timeline



Explore baby
animal habitats



We got a "tour" of the Purple Martin houses and nest-boxes.

Purple Martin nest



Fledglings



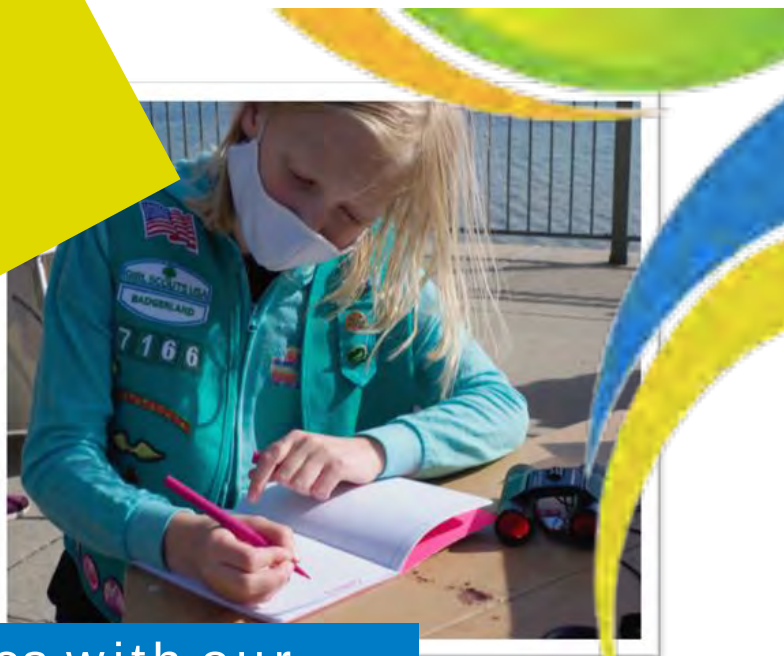
By early August the babies have "fledge" (learned to fly) so they will be ready to migrate in September.

Outcome: More Purple Martins!

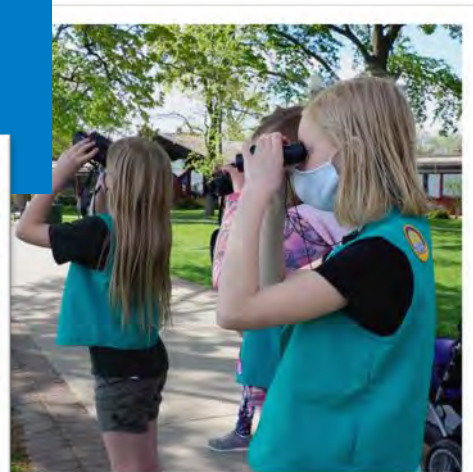


We now understand how Purple Martins build nests and successfully raise their young....
and how humans can help!

Share & Celebrate!



After our experiences with our Avian Committee coaches and the Learning to Soar project, we shared our ideas about ways the committee could inspire young people.



Our suggestions were to: continue offering this program, teach bird identification, build understanding of ways to help protect birds, and tour the Purple Martin Colony.

Share &
Celebrate!



We each got a certificate from the Avian Committee to recognize all our work. So, it was time to **CELEBRATE!**





This memory book was created for
and presented to

Junior Girl Scout Troop 7166

with respect and affection by the
City of Lake Geneva

Avian Committee

Cindy Flower, Chair
Karen Gallo
Kelley Happ
Beverly Leonard
Sarah McConnell
Jill Rodriguez
Carol Zimmermann

CITY OF LAKE GENEVA REGULAR COMMON COUNCIL MINUTES
MONDAY, MAY 24, 2021 6:00 P.M.
LAKE GENEVA CITY HALL; COUNCIL CHAMBERS (MAIN LEVEL)

Members: Mayor Charlene Klein, Council President, Rich Hedlund, Council Vice President, John Halverson, Alderpersons: Tim Dunn, Mary Jo Fesenmaier, Cindy Flower, Ken Howell, Shari Straube, and Joan Yunker

Mayor Klein called the meeting to order at 6:00 p.m.

Aldersperson Howell led the Council in the Pledge of Allegiance.

Roll Call

Present: Dunn, Fesenmaier, Halverson, Hedlund, Howell, Straube, and Yunker

Absent: Flower

Awards, Presentations, Proclamations, and Announcements

Memorial Day Announcement- Mayor Klein

Mayor Klein announced that at 3:00 p.m. on Memorial Day, the area churches will be tolling their bells for the designated National Moment of Remembrance.

Lake Geneva Day Proclamation- Mayor Klein

Mayor Klein proclaimed July 15, 2021 as “Lake Geneva Day” and encouraged the residents to the open house of the restored Riviera along with enjoying free parking for that day.

Re-consider business from previous meeting

None

Comments from the public as allowed by Wis. Stats. §19.84(2), limited to items on this agenda, except for public hearing items. Comments will be limited to 5 minutes

Karen Nancy; Spoke in opposition of the changes to impervious surface change in regards to Ordinance 21-05.

Ruth Ann Monaco; 625 S Lakeshore Dr; Spoke in opposition of the changes to impervious surface change in regards to Ordinance 21-05.

Acknowledgement of Correspondence

Samantha Strenger; Spoke in favor of the Conditional Use Permit application for 615 Center St.

Approve the Regular Council Minutes of May 10, 2021 as prepared and distributed

Motion by Halverson to approve, second by Straube. No discussion. Motion carried 7-0

CONSENT AGENDA– *Recommended by Finance, Licensing and Regulation on May 18, 2021.* Any item listed on the consent agenda may be removed at the request of any member of the Council. The request requires no second, is not discussed, and is not voted upon.

- a. Sidewalk Café Renewal Applications, for the license term July 1, 2021 through June 30, 2022, filed by:
 - Barrique Bistro & Wine Bar, 835 Wrigley Dr
 - Harry’s Café & Place, 808 Main St

- Lake Aire Restaurant, 804 W Main St
 - Oakfire, 831 Wrigley Dr
 - Popeye's, 811 Wrigley Dr
 - Sopra, 724 W Main St
- b. Taxi Company License Renewal filed by Lakefront Shuttle, for the license term of July 1, 2021 through June 30, 2022, located at 300 Wrigley Dr
 - c. Tier I Event Permit application filed by Badger High School for the event of Badger High School Graduation Ceremony to be held June 6, 2021 (rain date June 7, 2021) from 12:30 p.m. to 3:30 p.m. located at Badger High School and Lake Geneva Middle School
 - d. Tier II Event Permit application filed by Mayor Charlene Klein for the event of New Year's Eve Gala to be held December 31, 2021 from 7:00 p.m. to Midnight located at the Riviera Ballroom
 - e. Tier II Event Permit application filed by Mayor Charlene Klein for the event of "String of Pearls" Gala to be held August 28, 2021 from 6:00 p.m. to 11:00 p.m. located at the Riviera Ballroom
 - f. Tier I Event Permit application filed by Mayor Charlene Klein for the event of Riviera Open House to be held July 15, 2021 from 10:00 a.m. to 8:00 p.m. located at the Riviera Ballroom

Motion by Howell to approve the consent agenda, second by Yunker. No discussion. Motion carried 7-0.

Items removed from the Consent Agenda

None

First Reading of Ordinance 21-05 An ordinance amending Chapter 98, Zoning Ordinance, Section 98-407, Substandard Lot Regulations, Section 98-409, Lakeshore Lots, Section 98-505, Lakeshore Overlay Zoning District, Section 98-506(3), Drainageway Overlay Zoning District, Section 98-507(3), Woodland Overlay Zoning District, and Section 98-508(3), Steep Slope Overlay Zoning District; as it relates to the applied requirements for the use of SR-4 Zoning District standards in the ER-1 Zoning District

Mayor Klein offered Ordinance 21-05 as a first reading.

Motion by Fesenmaier to refer to the Plan Commission for further review, second by Dunn.

Fesenmaier stated that she feels that there are more items that need to be discussed regarding stormwater retention. She added that there are other ways besides to change property allowances through a variance or re-zoning.

Mayor Klein indicated that this would align with the past practices, but had no issues sending it back to the Plan Commission. Motion carried 7-0.

Recommendation of the Finance, Licensing, and Regulation Committee of May 18, 2021- Ald. Howell

Discussion/Action regarding Strand Engineering Contract for the South Street Trail Project

Motion by Howell to approve, second by Hedlund. Fesenmaier questioned why the contract indicated in one part that only one public informational meeting was to be scheduled, but that in another part it indicated that there would be more than one. City Administrator Nord stated that language was put in

there due mostly to the pandemic. He added that once the design is completed the City could certainly have more public input sessions. Motion carried 7-0.

Discussion/Action regarding eliminating Lagoon Slip #32 and converting Lagoon Slips #18 and #31 to Personal Water Craft only slips

Motion by Howell to approve, second by Yunker. No discussion. Motion carried 7-0.

Discussion/Action regarding establishing a resident fee for the Personal Water Craft slips at \$1,200 per year

Motion by Howell to approve, second by Hedlund. No discussion. Motion carried 7-0.

Discussion/Action regarding disposal of Parking Stall marker signs (*Finance, Licensing, and Regulation Committee approved selling stall markers at \$20 per marker*)

Motion by Howell to approve, second by Halverson. No discussion. Motion carried 7-0.

Discussion/Action regarding rental of Lower Center Street parking lot in combination with Riviera Ballroom Rental (*Finance, Licensing, and Regulation Committee approved at a rate of \$650 per day*)

Motion by Howell to approve, second by Yunker.

Motion to amend by Halverson to change the price to \$750, second by Straube. Halverson felt that the City could obtain more money for that lot for an event at the Riviera.

Motion to amend carried 7-0.

Original motion as amended was re-read, motion carried 7-0.

Discussion/Action regarding **Resolution 21-R36** a resolution amending the City of Lake Geneva Fee Schedule as it relates to Riviera Ballroom corporate and not-for-profit rental rates

Motion by Howell to approve, second by Yunker. No discussion. Motion carried 7-0.

Discussion/Action authorizing the Mayor to sign contracts for orchestra entertainment in conjunction with Riviera Ballroom events

Motion by Howell to approve, second by Yunker. No discussion. Motion carried 7-0.

Discussion/Acceptance of May 18, 2021 Finance, Licensing, and Regulation Committee Payment Approval Reports

Motion by Howell to accept, second by Hedlund. No discussion. Motion carried 7-0.

Recommendation of the Planning Commission of May 17, 2021- Ald. Dunn

Discussion/Action regarding **Resolution 21-R37** a resolution authorizing the issuance of a Conditional Use Permit (CUP) filed by Thomas & Kathy George, 3389 South Lake Shore Dr. Delavan WI 53115, for a request to raze the building at 252 Center St. Tax Key No. ZOP00258

Motion by Dunn to approve, second by Howell. Dunn noted that the building will be razed and turned into a green space for the time being. Fesenmaier stated that she has concerns with the historical nature of the building and maybe it should be rehabilitated. Straube noted that this building is in disrepair and does not have major historical significance. Motion carried 7-0 on a roll call vote.

Discussion/Action regarding **Resolution 21-R38** a resolution authorizing the issuance of a Conditional Use Permit (CUP) filed by Andrew Loughlin & Linda G. Learn Trust, 223 W. Main St. Barrington IL 60010 for a 2nd floor addition to the home and request to utilize the SR-4 zoning setbacks in the ER-1 zoning for the property located in the Estate Residential - 1 (ER-1) zoning district for the property located at 600 Campbell St., Tax Key No. ZBB00001

Motion by Dunn to approve, second by Yunker. Motion by Fesenmaier to continue to a meeting until after Ordinance 21-05 has been decided, no second was offered. Motion carried 7-0, on a roll call vote.

Discussion/Action regarding **Resolution 21-R39** a resolution authorizing the issuance of a “Limited” Conditional Use Permit (CUP) filed by Tom Keefe / Samantha Strenger 751 Geneva Pkwy / 615 Center St. Lake Geneva for a request to utilize the building located at 725 W. Main St. as a Commercial Indoor Lodging land use in the Central Business (CB) zoning district. Tax Key No. ZOP00276
Motion by Dunn to approve, second by Yunker. No discussion. Motion carried 7-0.

Discussion/Action regarding **Resolution 21-R40** a resolution authorizing the issuance of a “Limited” Conditional Use Permit (CUP) filed by Tom Keefe / Samantha Strenger 751 Geneva Pkwy / 615 Center St. Lake Geneva for a request to utilize the building located at 743 W. Main St. as a Commercial Indoor Lodging land use in the Central Business (CB) zoning district. Tax Key No. ZOP00272
Motion by Dunn to approve, second by Hedlund. No discussion. Motion carried 7-0.

Discussion/Action regarding **Resolution 21-R41** a resolution to amend a Precise Implementation Plan (PIP) filed by 816 Wisconsin Sub LLC, 751 Geneva Pkwy, Lake Geneva 53147 for a request of a Precise Implementation Plan PIP proposal for the property located at 816 Wisconsin St. to allow a Bed & Breakfast at 816 Wisconsin St. and a Short Term Rental at 816 ½ Wisconsin St with in the Neighborhood Business (NB) zoning district
Motion by Dunn to approve, second by Howell. Fesenmaier asked that the paperwork reflect that she would be at the 816 Wisconsin St not 615 Center St. Motion carried 7-0.

Discussion/Action regarding **Resolution 21-R42** a resolution authorizing the issuance of a Conditional Use Permit (CUP) filed by Starboard Properties LLC, 1334 W. Main St Lake Geneva WI 53147, for a request to utilize the SR-4 zoning setbacks in the ER-1 zoning for the property located in the Estate Residential - 1 (ER-1) zoning district for the property located at 1334 W. Main St. Tax Key Nos. ZYUP000094M
Motion by Dunn to approve, second by Straube. No discussion. Motion carried 6-1, Fesenmaier voting no.

Discussion/Action regarding **Resolution 21-R43** a resolution authorizing the issuance of a Conditional Use Permit (CUP) filed by Christopher Meisner 1310 St. Andrews Rd. Lake Geneva, for an addition to the home and request to utilize the SR-4 zoning setbacks in the ER-1 zoning for the property located in the Estate Residential - 1 (ER-1) zoning district for the property located at 1886 Geneva Bay Dr., Tax Key No. ZGB00024
Motion by Dunn to approve, second by Hedlund. Dunn noted that the is property is somewhat in disrepair and the neighbors are in favor of the project. Motion carried 6-1, with Fesenmaier voting no.

Adjournment

Motion by Dunn adjourn, second by Halverson. Motion carried 7-0. The meeting adjourned at 6:56 p.m.



CITY OF LAKE GENEVA

SIDEWALK CAFÉ PERMIT APPLICATION

PLEASE FILL IN ALL BLANKS COMPLETELY, AS INCOMPLETE APPLICATIONS WILL BE REJECTED.

Please Check:

- | | |
|---|--|
| ☐ Initial Sidewalk Café Permit with Alcohol | ☒ Renewal of Sidewalk Café Permit with Alcohol |
| ☐ Initial Sidewalk Café Permit without Alcohol | ☐ Renewal of Sidewalk Café Permit without Alcohol |

Application Checklist:

- ☐ **Certificate of Comprehensive General Liability Insurance** naming the City as a party insured against liability resulting from the uses permitted herein. The coverage shall be in an amount not less than \$1,000,000.00.
- ☐ **Scaled diagram** which accurately depicts the dimensions of the existing sidewalk area and adjacent private property, the proposed location of the sidewalk café, size and number of tables, seats, bollards (and chains or ropes), planters, umbrellas, location of doorways, tree, signage, parking meters, obstructions (either existing or proposed, within the pedestrian way). *Site plan must depict five (5) feet of unobstructed sidewalk for public use.*
- ☐ **Copy of restaurant license issued by the Wisconsin Department of Health and Human Services under Wis. Stat. 254.64.**
- ☐ **Application Fee** of \$15.00 per seat: 60 seats x \$15.00 = \$ 900.⁰⁰
(# OF SEATS) (TOTAL FEE)
- ☐ **Alcohol License Premises Extension Application.** If the applicant wishes to serve alcohol in the sidewalk café area, the applicant must currently hold a valid license to serve alcohol and submit an application requesting the premises description of the license be amended to include the sidewalk café area.

APPLICANT INFORMATION

Applicant Name: SPYRO COMPOS

Establishment Name: HARBOR SIDE PUB & GRILL

Address: 100 BROAD STREET, LAKE GENEVA, WI

Phone: 262 248 3835 E-mail: COMPOS, SPEEDO & EMAIL.COM

Do food sales generate more than 50% of gross receipts? ☒ Yes ☐ No

Are you requesting to serve alcoholic beverages? ☒ Yes ☐ No

If so, please provide the following information:

Agent Name: SPYRO COMPOS

Signature of Agent: [Signature] Date: 5/13/21

INDEMNIFICATION STATEMENT

I, SPYRO CAROAS representing HARBOR SIDE REBOUTILL as its
(FULL NAME) (ESTABLISHMENT)

PRESIDENT (CORP)
(TITLE) agree to hold harmless and indemnify the City, its directors, officers, employees and agents, from and against any and all liabilities, losses, claims, demands, damages, fines, penalties, costs and expenses, including, but not limited to, reasonable attorney's fees and costs of litigation, and all causes of action of any kind or character resulting from my use of the public sidewalk as a café. I certify that I have read and understand the rules of Section 62-67 (6) Sidewalk Café permits.

[Signature]
SIGNATURE OF APPLICANT

5/13/21
DATE

For Office Use Only

Date Filed with Clerk: May 14, 2021

Total Amount: \$ _____ Receipt No.: _____

Date Forwarded to Police Chief: May 14, 2021

Police Chief Signature: [Signature] Approved Denied

Date Forwarded to Building Inspector: 5/19/21

Director of Building Inspector Signature: [Signature] Approved Denied

Date Forwarded to Director of Public Works: May 19, 2021

Director of Public Works Signature: [Signature] Approved Denied

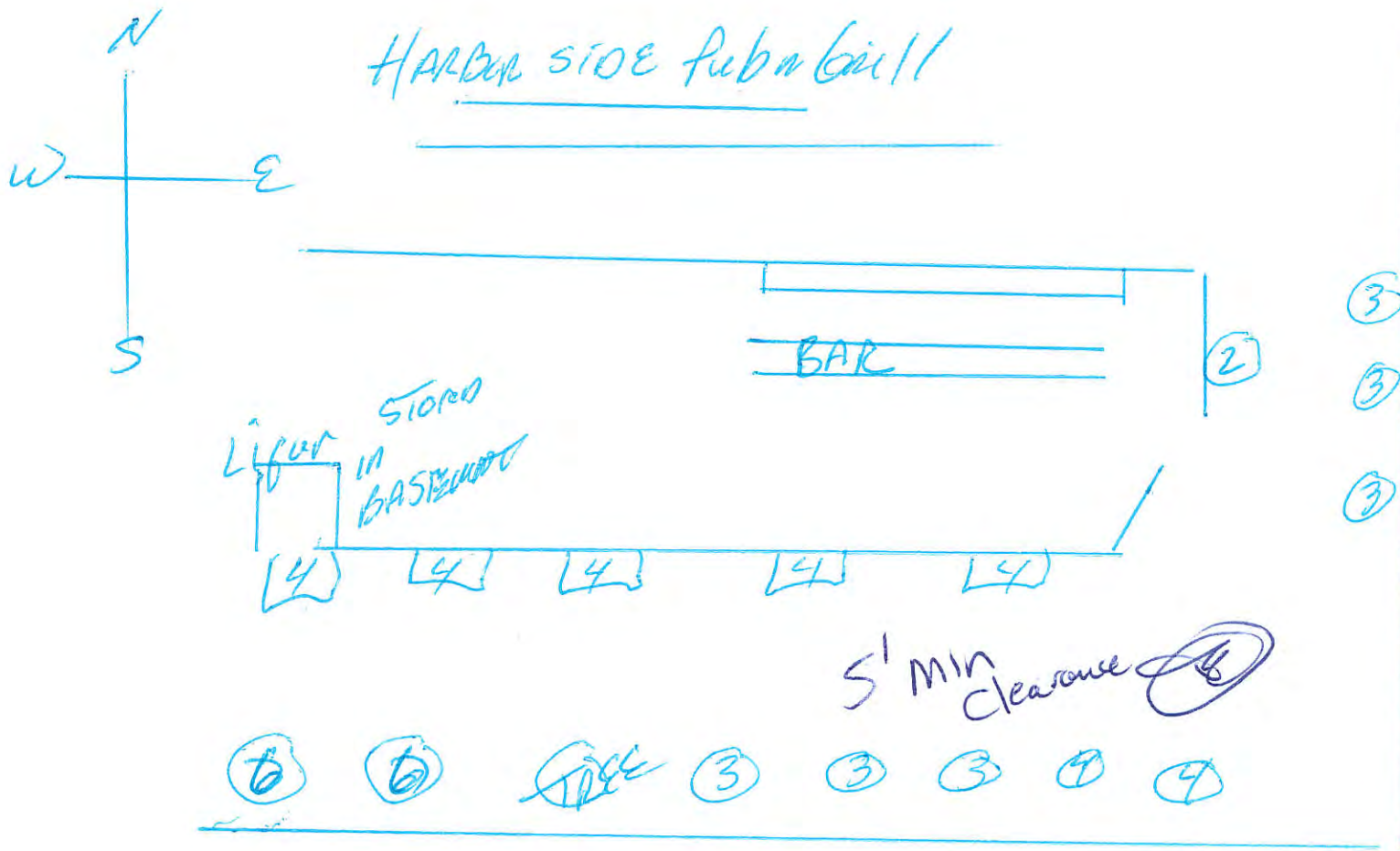
Date of FLR/Council Approval (for alcohol license amendment, if applicable): _____

Permit Issue Date: _____ Permit Number: _____

Copies Provided to:

Police Chief
DPW Director

Fire Chief
Zoning Administrator



Whitely Drive



DEPARTMENT OF AGRICULTURE,
TRADE AND CONSUMER PROTECTION

License, Permit or Registration

The person, firm, or corporation shown below has complied with the Wisconsin statutes and is authorized to engage in the activity indicated.

ACTIVITY Retail Food - Serving Meals - Moderate		EXPIRATION DATE 30-Jun-2022	I.D. NUMBER HSAT-7QXRAT
LICENSEE MAILING ADDRESS CONDOS SPYRO & PATRICIA 100 S BROAD ST LAKE GENEVA WI 53147	NOT TRANSFERABLE	BUSINESS / ESTABLISHMENT ADDRESS HARBOR SIDE CAFE 100 S BROAD ST LAKE GENEVA WI 53147	

All Permits expire on June 30th; it is the responsibility of the licensee to make sure all applicable fees are received by the department before July 1st or a late payment fee will be assessed.

If you do not receive a renewal form prior to June 30th from your licensing authority, you should send in your payment for renewing your permit to the following address:

WDATCP-LICENSE RENEWAL
DRAWER 296
MILWAUKEE, WI 53293-0296
(608)224-4720

* Include the name of your facility and the ID number.



CITY OF LAKE GENEVA

MASSAGE ESTABLISHMENT APPLICATION

\$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original ☐ or Renewal ☒

Application must be accompanied by the following documents:

1. \$50.00 License fee, payable to the City of Lake Geneva and due upon application
2. Copy of Applicant's Driver's License
3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
5. Copy of each Massage Technician's Driver's License
6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: Element Massage Studio

Corporate Name (if applicable): _____

Business Address (Physical): 647 W. Main St.

Mailing Address (if different): _____

City, State, Zip: Lake Geneva WI 53147

Phone: 414-324-2496 Email: elementmassages@yahoo.com

Please explain the nature of services to be provided: Relaxation & Medical Massage Therapy

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Name: Dale Lee Martin

Please provide names and addresses of any and all previous establishments where applicant was employed or subcontracted as a Massage technician during the last 3 years, including type of work performed and dates of employment:

Same

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

☒ NO ☐ YES If yes, please explain: _____

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state?

☒ NO ☐ YES If yes, provide the offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of his/her knowledge and belief.

APPLICANT SIGNATURE: [Signature] Date: 5-7-21

For Office Use Only

Date Filed: May 11, 2021 Receipt #: 17000312 Amt Paid: \$50
Forwarded to Police Dept: May 11, 2021 Background Completed: 5-17-21 JA
Police Chief Recommendation: _____ Approved _____ Denied _____
Fingerprinting required for new establishments - Fingerprinted by LGPD: ☒ N/A
Forwarded to Building Dept: N/A Inspector approval required for new establishments
Building Inspector Recommendation: N/A Approved _____ Denied _____
FLR/Council Approval Dates: _____ License #: _____
Verified: Stark ☐ MSI ☐ Notes/Conditions: _____

Copies to: Building & Zoning Police Chief Fire Chief



CITY OF LAKE GENEVA

MASSAGE ESTABLISHMENT APPLICATION

\$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original ☐ or Renewal ☒

Application must be accompanied by the following documents:

1. \$50.00 License fee, payable to the City of Lake Geneva and due upon application
2. Copy of Applicant's Driver's License
3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
5. Copy of each Massage Technician's Driver's License
6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: Jasmine Salon & Spa
Corporate Name (if applicable): Aveda Jasmine Salon and Spa Group
Business Address (Physical): 251 Cook St.
Mailing Address (if different): _____
City, State, Zip: Lake Geneva, WI 53147
Phone: 262-249-9802 Email: brittany@jasminesalonspa.com
Please explain the nature of services to be provided: massage, facials, nail

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Name: Brittany Harris

Please provide names and addresses of any and all previous establishments where applicant was employed or subcontracted as a Massage technician during the last 3 years, including type of work performed and dates of employment:

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

☒ NO ☐ YES If yes, please explain: _____

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state?

☒ NO ☐ YES If yes, provide the offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of his/her knowledge and belief.

APPLICANT SIGNATURE: [Signature] Date: 05-11-21

For Office Use Only

Date Filed: May 11, 2021 Receipt #: 15.001139 Amt Paid: 50-

Forwarded to Police Dept: May 11, 2021 Background Completed: 5-17-21 JA

Police Chief Recommendation: [Signature] Approved Denied

Fingerprinting required for new establishments - Fingerprinted by LGPD: ☒ N/A

Forwarded to Building Dept: N/A Inspector approval required for new establishments

Building Inspector Recommendation: N/A Approved Denied

FLR/Council Approval Dates: _____ License #: _____

Verified: Stark ☐ MSI ☐ Notes/Conditions: _____

Copies to: Building & Zoning Police Chief Fire Chief



CITY OF LAKE GENEVA

MASSAGE ESTABLISHMENT APPLICATION

\$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original ☐ or Renewal ☒

Application must be accompanied by the following documents:

1. \$50.00 License fee, payable to the City of Lake Geneva and due upon application
2. Copy of Applicant's Driver's License
3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
5. Copy of each Massage Technician's Driver's License
6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: Lake Geneva Massage Therapy

Corporate Name (if applicable): _____

Business Address (Physical): 905 Marshall St

Mailing Address (if different): _____

City, State, Zip: Lake Geneva, WI 53147

Phone: 262-249-1230 Email: lgmessage@yahoo.com

Please explain the nature of services to be provided: massage therapy

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Name: Mark Mitchell

Please provide names and addresses of any and all previous establishments where applicant was employed or subcontracted as a Massage technician during the last 3 years, including type of work performed and dates of employment:

N/A

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

☒ NO

☐ YES

If yes, please explain: _____

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state?

☒ NO

☐ YES

If yes, provide the offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of his/her knowledge and belief.

APPLICANT SIGNATURE: [Signature] Date: 5/10/21

For Office Use Only

Date Filed: May 11, 2021 Receipt #: 15-001138 Amt Paid: \$50

Forwarded to Police Dept: May 11, 2021 Background Completed: 5-17-21 g7

Police Chief Recommendation: [Signature] ☒ Approved ☐ Denied

Fingerprinting required for new establishments - Fingerprinted by LGPD: ☒ N/A

Forwarded to Building Dept: N/A Inspector approval required for new establishments

Building Inspector Recommendation: N/A ☒ Approved ☐ Denied

FLR/Council Approval Dates: _____ License #: _____

Verified: Stark ☐ MSI ☐ Notes/Conditions: _____

Copies to: Building & Zoning Police Chief Fire Chief



CITY OF LAKE GENEVA

MASSAGE ESTABLISHMENT APPLICATION

\$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original ☐ or Renewal ☒

Application must be accompanied by the following documents:

1. \$50.00 License fee, payable to the City of Lake Geneva and due upon application
2. Copy of Applicant's Driver's License
3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
5. Copy of each Massage Technician's Driver's License
6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: The Therapeutic Touch
Corporate Name (if applicable): M & M Clausen dba The Therapeutic Touch, LLC
Business Address (Physical): 1001 W. Main St. Lake Geneva WI 53147
Mailing Address (if different): _____
City, State, Zip: Lake Geneva, WI 53147
Phone: 262-248-6888 Email: info@thetherapeutictouch.com
Please explain the nature of services to be provided: Massage & Facials

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Name: Max Clausen / Monica Clausen

Phone: 262-248-6888 ☒ Copy of Driver's License Attached

Please provide names and addresses of any and all previous establishments where applicant was employed or subcontracted as a Massage technician during the last 3 years, including type of work performed and dates of employment:

See Attached

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

☒ NO ☐ YES If yes, please explain: _____

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state?

☒ NO ☐ YES If yes, provide the offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of his/her knowledge and belief.

APPLICANT SIGNATURE: [Signature] Date: 5/1/21

For Office Use Only

Date Filed: May 13, 2021 Receipt #: 15.001132 Amt Paid: 50-
Forwarded to Police Dept: [Signature] Background Completed: 5-17-21 g1
Police Chief Recommendation: [Signature] Approved ☒ Denied ☐
Fingerprinting required for new establishments - Fingerprinted by LGPD: N/A
Forwarded to Building Dept: [Signature] Inspector approval required for new establishments
Building Inspector Recommendation: 5/17/21 Approved ☒ Denied ☐
FLR/Council Approval Dates: _____ License #: _____
Verified: Stark ☐ MSI ☐ Notes/Conditions: _____

Copies to: Building & Zoning Police Chief Fire Chief



CITY OF LAKE GENEVA

MASSAGE ESTABLISHMENT APPLICATION

\$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original ☐ or Renewal ☒

Application must be accompanied by the following documents:

1. \$50.00 License fee, payable to the City of Lake Geneva and due upon application
2. Copy of Applicant's Driver's License
3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
5. Copy of each Massage Technician's Driver's License
6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: HEALING MUSCLE THERAPIES

Corporate Name (if applicable): _____

Business Address (Physical): 201 BROAD ST., SUITE D, LAKE GENEVA, WI 53147

Mailing Address (if different): _____

City, State, Zip: _____

Please explain the nature of services to be provided: Massage Therapy Services
(Deep Tissue, Relaxation, Salt-Stones, Thai Massage). Henna in warmer months.

BUSINESS OWNER (APPLICANT) INFORMATION

(Marti) Please include information for all business owners
Full Name: Martha E. Doolittle

Please provide names and addresses of any and all previous establishments where applicant was employed or subcontracted as a Massage technician during the last 3 years, including type of work performed and dates of employment:

N/A

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

☒ NO

☐ YES

If yes, please explain: _____

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state?

☒ NO

☐ YES

If yes, provide the offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of his/her knowledge and belief.

APPLICANT SIGNATURE: _____

Martha E. Dorlotti

Date: 5/21/21

For Office Use Only

Date Filed: 5/21/21 Receipt #: 15-001329 Amt Paid: \$80.00

Forwarded to Police Dept: 5/21/21 Background Completed: 5-24-21 g3

Police Chief Recommendation: _____

Approved

Denied

Fingerprinting required for new establishments - Fingerprinted by LGPD: ☒

Forwarded to Building Dept: N/A

Inspector approval required for new establishments

Building Inspector Recommendation: N/A

Approved

Denied

FLR/Council Approval Dates: _____

License #: _____

Verified: Stark ☐ MSI ☐ Notes/Conditions: _____

Copies to:

Building & Zoning

Police Chief

Fire Chief

RESOLUTION OF THE COMMON COUNCIL			
Resolution to ratify the Emergency Proclamation approved by the Chief Executive Officer Pertaining to the COVID-19 Pandemic and Declaration of Emergency			
Committee:	N/A		
Fiscal Impact:	N/A		
File Number:	21-R44	Date:	June 14, 2021

WHEREAS, an emergency, namely the COVID-19 Pandemic, has impacted or is anticipated to impact the City of Lake Geneva, Wisconsin; and

WHEREAS, pursuant to sections 323.11 and 323.14(4)(b) of the Wisconsin Statutes, the chief executive officer of the City of Lake Geneva, Wisconsin, proclaimed a state of emergency in effect from March 16, 2020 until the Council could meet; and

WHEREAS, there continues to be a public health emergency as a result of the COVID-19 Pandemic and continued measures must be taken to protect the public health and welfare of the citizens of the City of Lake Geneva, the employees of the City of Lake Geneva, and the many people who visit our city,

NOW, THEREFORE BE IT RESOLVED that pursuant to sections 323.11 and 323.14 of the Wisconsin Statutes hereby ratify Mayor Charlene Klein's Proclamation of State of Emergency, dated July 27, 2020 and adopt as their own Proclamation of State of Emergency the following provisions to address the continuing public health emergency:

1. Daily business at City Hall will be conducted as follows: Clerk, Treasurer and Front Counter staff will provide service to the public via the counter in the City Hall vestibule. Building and Zoning Department will serve the public via their vestibule adjacent to their offices. Public access to the lobby of City Hall (with the exception for access to a public meeting as described below) will be prohibited.
2. With respect to Municipal Court proceedings, specific guidelines have not been determined as of the date of this proclamation, however, once the public is permitted to enter City Hall for municipal court proceedings, the following is expected: Individuals gaining access to the lobby and council chambers for municipal court purposes will have access to hand sanitizer and be required to wear a mask while in the building. Masks will be made available, free of charge, immediately inside the lobby of City Hall. Those attending court will be allowed to enter the west door of council chambers and instructed to exit using the east door of council chambers. Council Chamber capacity will not exceed twenty-five percent (25%) of full capacity as previously determined by the Lake Geneva Fire Department (25% capacity being 23 individuals.) Seating within council chambers will be arranged to maximize recommended social distancing. To maintain optimal social distancing; spectator chairs will not be allowed to be moved. Designated city staff will be present during court proceedings to insure all regulations are obeyed. Council

Chambers will be thoroughly sanitized after each day's proceedings are concluded.

3. It is recommended that whenever in person staff meetings are required, there be created a "socialization distance" of 6 feet, however in the alternative, staff is encouraged to utilize the technology available to conduct such meetings virtually.

4. With respect to all City Council, Committee, Boards, and Commissions, the following procedures will be adopted: All City Council, City Boards, City Committees and City Commission meetings will be conducted in the City Council chambers. City Hall lobby doors will be unlocked twenty (20) minutes prior to a scheduled meeting and locked twenty minutes after the conclusion of scheduled meetings. Individuals gaining access to the lobby and council chambers for public meeting purposes will have access to hand sanitizer and be required to wear a mask while in the building. Masks will be made available, free of charge, immediately inside the lobby of City Hall. Those attending meetings at City Hall will be allowed to enter the west door of council chambers and instructed to exit using the east door of council chambers. Council Chamber capacity will not exceed twenty-five percent (25%) of full capacity as previously determined by the Lake Geneva Fire Department (25% capacity being 23 individuals.) Seating within council chambers will be arranged to maximize recommended social distancing. To maintain optimal social distancing; spectator chairs will not be allowed to be moved. Designated city staff will be present during meetings to insure all regulations are obeyed (including limiting capacity in the council from exceeding twenty-five percent, insuring all those present wear masks, and that proper social distancing is maintained.) All members of the meeting body will have the option of attending and participating in the meeting in person at the council chambers or attending and participating remotely via the available applications such as zoom, go to meeting, etc. City Council, Committee of the Whole, Finance, Licensing, and Regulation Committee, Plan Commission, Public Works Committee, Piers, Harbors, and Lakefront Committee, and Utility Commission meetings will be televised. The presiding officers of the City Council, Plan Commission, and Committee of the Whole and chairs of all city committees, boards and commissions will be responsible for conducting their meetings, including operating remote meeting applications such as zoom, go to meeting, etc. Those individual who attend an in person meeting will be required to provide their name and phone number for contact tracing purposes. Those from the public who attend a meeting in person and who wish to provide "Public Comment" during the meeting will be required to "sign in" prior to the meeting and print their name, address, and telephone number, and provide a brief description of their public comment. The sign in sheets will be located inside the council chambers and available twenty minutes before the meeting begins. Council Chambers will be sanitized after the day's meeting(s) are concluded.

5. Because of the economic effects of various emergency orders put in place since, March 12th, 2020, and to provide economic relief for our downtown businesses as well as promote more social distancing in their facilities during the pendency of this Proclamation of State of Emergency (until it expires, is amended or is rescinded), the provisions of Section 98-206(8)(f) of the City of Lake Geneva Zoning Code are relaxed to allow the placement of merchandise for sale in those areas designated for "Sidewalk Furnishings" as set forth in Section 62-67(9), of the Municipal Code of the City of Lake Geneva, Wisconsin.

This Proclamation shall take effect immediately and shall continue in effect until June 14, 2021 at 11:59 p.m. or such earlier time as a quorum of the Governing Body convenes and rescinds or alters

this Proclamation.

Granted by action of the Common Council of the City of Lake Geneva this 14th day of June, 2021.

Council Action: ☐ **Adopted** ☐ **Failed** **Vote** _____

Mayoral Action: ☐ **Accept** ☐ **Veto**

Charlene Klein, Mayor Date

Attest:

Lana Kropf, City Clerk Date

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: 07/01/2021 ending: 06/30/2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of } LAKE GENEVA
☐ Village of }
☒ City of }

County of WALWORTH Aldermanic Dist. No. 9
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Applicant's Wisconsin Seller's Permit Number <u>456-1026548060-04</u>	
FEIN Number <u>260559178</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☐ Class B beer	\$
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☒ Reserve Class B liquor	\$ 10000
☐ Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ 10025

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)
LAKE GENEVA EGG HARBOR, LLC

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)
<u>FARRELL</u>	<u>MICHAEL</u>	<u>J</u>
Vice President / Member Last Name	(First)	(Middle Name)
<u>FARRELL</u>	<u>AIMEE</u>	<u>W</u>
Secretary / Member Last Name	(First)	(Middle Name)
<u>WRIGHT</u>	<u>JOHN</u>	<u>E</u>
Treasurer / Member Last Name	(First)	(Middle Name)
Agent Last Name	(First)	(Middle Name)
<u>BUFFA</u>	<u>ADELINE</u>	<u>R</u>
Directors / Managers Last Name	(First)	(Middle Name)

- Trade Name EGG HARBOR CAFE Business Phone Number 262-248-1207
- Address of Premises 827 MAIN ST LAKE GENEVA 53147 Post Office & Zip Code LAKE GENEVA 53147
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
ALCOHOL WILL BE SERVED IN DINING ROOM, FLOOR PLAN ATTACHED
- Legal description (omit if street address is given above):
- (a) Was this premises licensed for the sale of liquor or beer during the past license year? ☐ Yes ☒ No
(b) If yes, under what name was license issued?

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? If yes, explain ☒ Yes ☐ No
ONSITE MANAGER AND AGENT WILL COMPLETE RESPONSIBLE SERVER BEVERAGE
TRAINING COURSE
7. Is the applicant an employee or agent of, or acting on behalf of anyone except the named applicant? ☐ Yes ☒ No
 If yes, explain.
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? If yes, explain ☐ Yes ☒ No
9. (a) **Corporate/limited liability company applicants only:** Insert state WISCONSIN and date 07/16/07 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? If yes, explain ☐ Yes ☒ No
- (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? If yes, explain. ☐ Yes ☒ No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] ☒ Yes ☐ No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☒ Yes ☐ No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.)	Title/Member	Date
FARRELL, AIMEE W	OWNER	04/27/21
Signature <i>Aimee Farrell</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>May 18, 2021</i>	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

McL
GENERAL

Revisions:

REV. 1

All work to be completed as shown, and in accordance with the latest edition of the MSI General Master Specification

MSI General
Corporation
P.O. Box 7
Oconomowoc
Wisconsin
53066
262.367.3661
Fax 262.367.2764
Estimating
262.367.3662
www.msigeneral.com

Single Source Responsibility ^{Tai}

Project Address:

KEEFE ASSOCIATES
NEWPORT WEST RETAIL
Main & Cook Streets
Lake Geneva, WI. 53147

Date: 5-2004

Drawn By: B. Zarkov

Sheet Title:

FLOOR PLAN

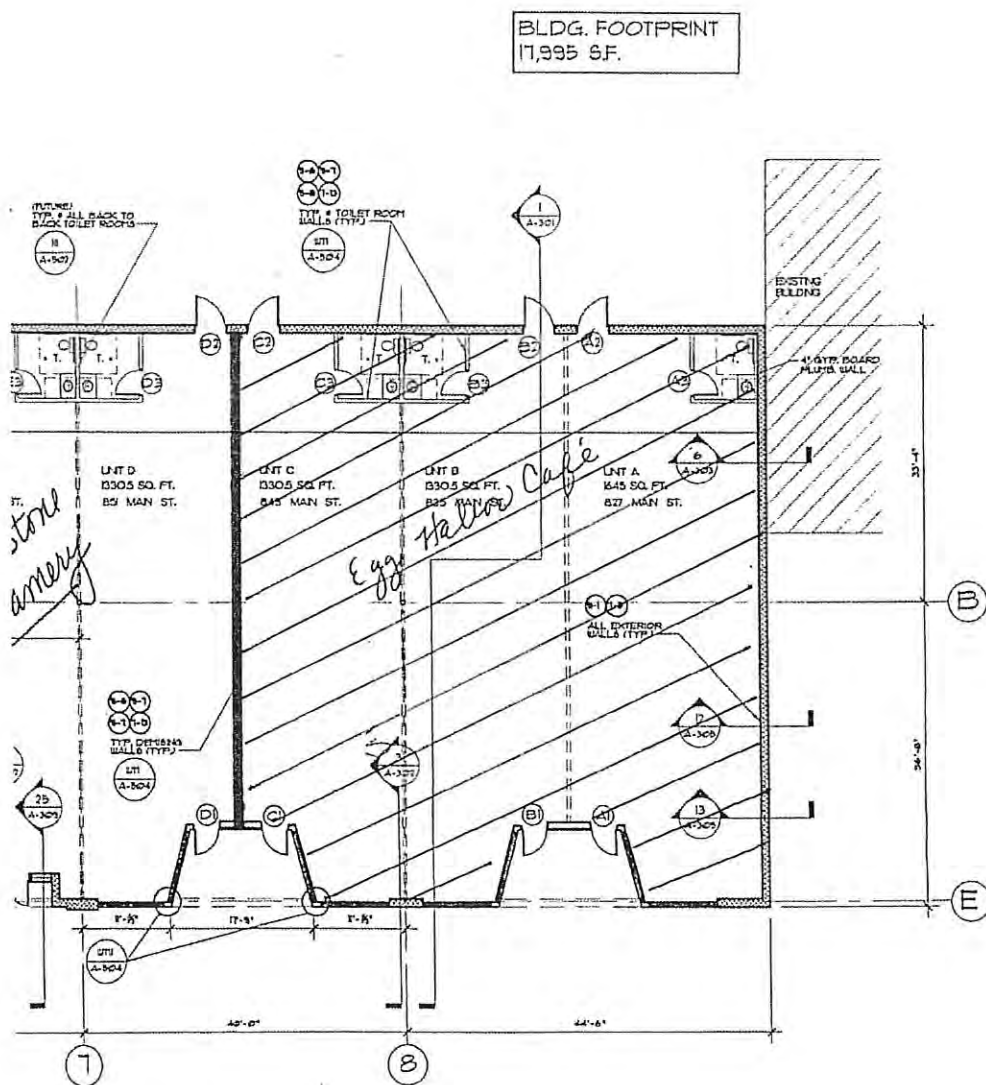
Sheet Number:

A-101

Project Number:

P8143

4088



BLDG. FOOTPRINT
17,995 S.F.

37.
stone
amery

UNIT D
B305 S.W. FT.
B35 MAN ST.

EXISTING BUILDING

4' GYP. BOARD
MULTI WALL

67-1550

2

—(B)

③

NORTH

 $-\partial^1$

\$2500 + 3000 per

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 malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of: ☐ Town ☐ Village of LAKE GENEVA County of WALWORTH
☒ City

The undersigned duly authorized officer/member/manager of: Lake Geneva Egg Harbor, LLC

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Egg Harbor Cafe

(Trade Name)

located at 827 MAIN STREET LAKE GENEVA WI 53147

appoints ADELINE BUFFA

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 ☒ 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? ☒ Yes ☐ No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 27.5 YEARS

Place of residence last year

For: LAKE GENEVA EGG HARBOR, LLC

(Name of Corporation / Organization / Limited Liability Company)

By:

Anna W. Janus

(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

ACCEPTANCE BY AGENT

I, ADELINE BUFFA, hereby accept this appointment as agent for the

(Print / Type Agent's Name)

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

Adeline Buffa

5/4/21

(Date)

(Home Address of Agent)

APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

I hereby 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.

Approved on 5-24-21 by [Signature] Title Police Chief

(Date)

(Signature of Proper Local Official)

(Town Chair Village President, Police Chief)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)	(first name)	(middle name)
Buffa	Adeline	R

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.

☒ **Agent** of Lake Geneva Egg Harbor LLC

(Officer / Director / Member / Manager / Agent)

(Name of Corporation, Limited Liability Company or Nonprofit Organization)

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? 27.5 Years

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 county or municipality? ☐ Yes ☒ No

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 county or municipality? ☐ Yes ☒ No

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? ☐ Yes ☒ No

If yes, identify.

(Name, Location and Type of License/Permit)

5. Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ☐ Yes ☒ No

If yes, identify.

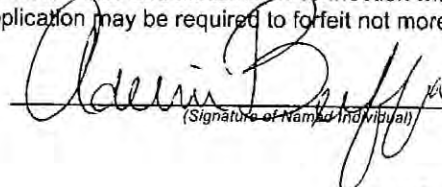
(Name of Wholesale Licensee or Permittee)

(Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Egg Harbor Cafe	827 W Mani St. Lake Geneva	08/24/2018	04/27/2021
Employer's Name	Employer's Address	Employed From	To
Manny's Snack Shack	404 S Lake Ave. Twin Lakes	08/15/2012	06/10/2018

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.


(Signature of Named Individual)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)	(first name)	(middle name)
FARRELL	AIMEE	W

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.
- ☒ **MEMBER** of **LAKE GENEVA EGG HARBOR, LLC**
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)
- which is making application for an alcohol beverage license.

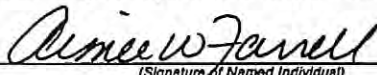
The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? **N/A- AGENT RESIDENT FOR 27.5 YRS**
- 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 county or municipality? ☐ Yes ☒ No
 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.)
- 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 county or municipality? ☐ Yes ☒ No
 If yes, describe status of charges pending.
- 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? ☐ Yes ☒ No
 If yes, identify. (Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ☐ Yes ☒ No
 If yes, identify. (Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
EGG HARBOR CAFE	300 VILLAGE GREEN 60069	10/01/1985	05/04/2021
Employer's Name	Employer's Address	Employed From	To

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.


(Signature of Named Individual)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)	(first name)	(middle name)
FARRELL	MICHAEL	J

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.
- ☒ **MEMBER** of **LAKE GENEVA EGG HARBOR, LLC**
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

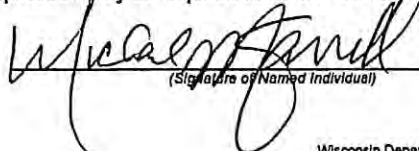
which is making application for an alcohol beverage license.

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? N/A- AGENT RESIDENT FOR 27.5 YRS
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 county or municipality? ☐ Yes ☒ No
 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 county or municipality? ☐ Yes ☒ No
 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? ☐ Yes ☒ No
 If yes, identify. (Name, Location and Type of License/Permit)
5. Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ☐ Yes ☒ No
 If yes, identify. (Name of Wholesale Licensee or Permittee) (Address By City and County)
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
EGG HARBOR CAFE	300 VILLAGE GREEN 60010	10/01/1985	05/04/2021
Employer's Name	Employer's Address	Employed From	To

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.


(Signature of Named Individual)

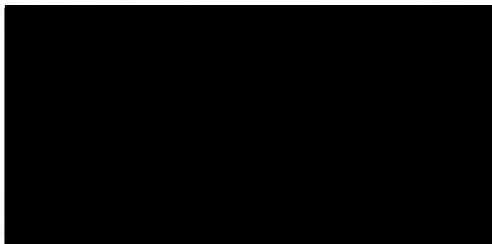


Dear Ms. Lana Kropf,

We are requesting a waiver for the Auxiliary form for one of the members of Lake Geneva Egg Harbor, LLC, Mr. John E Wright. Mr. Wright is 90 years old, homebound and is physically unable to sign the Auxiliary form. Thank you for your understanding.

Kelly Rooney

HAMCO, Inc.





WISCONSIN DEPARTMENT OF REVENUE
PO BOX 8902
MADISON, WI 53708-8902

Contact Information:

2135 RIMROCK RD PO BOX 8902
MADISON, WI 53708-8902
ph: 608-266-2776 fax: 608-264-6884
email: DORBusinessTax@wisconsin.gov
website: revenue.wi.gov

LAKE GENEVA EGG HARBOR LLC

Letter ID L2059199376



Wisconsin Business Tax Registration Certificate

Expiration date: January 31, 2022

Legal/real name: LAKE GENEVA EGG HARBOR LLC

- This certificate confirms that you are registered with the Wisconsin Department of Revenue for the tax types shown below.
- This registration certificate is not a seller's permit, and should not be used as proof that you hold a seller's permit.
- You may not transfer this certificate to any other individual or business.

Tax Type	Account Type	Number
Sales & Use Tax	Sales & Use Tax	456-1026548060-04
Withholding Tax	Withholding Tax	036-1026548060-03

Comfort Suites

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: _____ ending: 6/30/2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of } LAKE GENEVA
☐ Village of }
☒ City of }

County of WALWORTH Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

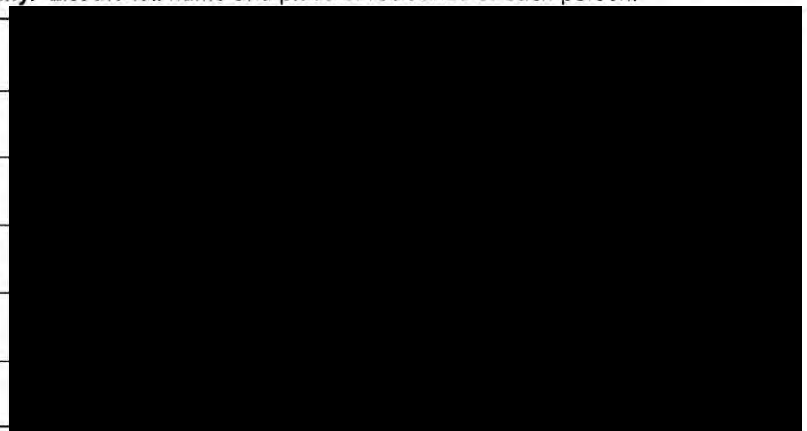
Applicant's Wisconsin Seller's Permit Number	
FEIN Number 86-3123608	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ <u>100-</u>
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>125</u>

pd 4/20/21

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)
DECORUM LAKE GENEVA, LLC

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)
THAKKAR	CHINTAN	S
Vice President / Member Last Name	(First)	(Middle Name)
PATEL	AJIT	K
Secretary / Member Last Name	(First)	(Middle Name)
Treasurer / Member Last Name	(First)	(Middle Name)
Agent Last Name	(First)	(Middle Name)
Schmitt	Eric	
Directors / Managers Last Name	(First)	(Middle Name)



1. Trade Name Comfort Suites Lake Geneva East Business Phone Number (262) 248-2300
2. Address of Premises 300 E Main St Post Office & Zip Code Lake Geneva, 53147

3. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Beverages will be in a cooler in a designated marketplace area next to the front desk.

4. Legal description (omit if street address is given above): _____

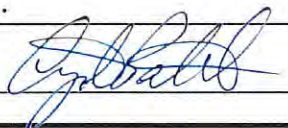
5. (a) Was this premises licensed for the sale of liquor or beer during the past license year? ☒ Yes ☐ No

(b) If yes, under what name was license issued? K.NMG Hotels LLC

[Handwritten signature]

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** ☐ Yes ☒ No
7. Is the applicant an employee or agent of, or acting on behalf of anyone except the named applicant? ☒ Yes ☐ No
If yes, explain.
MANAGING MEMBER
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** ☐ Yes ☒ No
9. (a) **Corporate/limited liability company applicants only:** Insert state WI and date 04/08/21 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** ☐ Yes ☒ No
- (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? **If yes, explain.** ☐ Yes ☒ No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] ☐ Yes ☒ No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☒ Yes ☐ No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) PATEL, AJIT K.	Title/Member MANAGING MEMBER	Date 04/22/21
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>April 29, 2021</u>	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

**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 malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of: ☐ Town
☐ Village of LAKE GENEVA County of WALWORTH
☒ City

The undersigned duly authorized officer/member/manager of DECORUM LAKE GENEVA, 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
COMFORT SUITES LAKE GENEVA LLC

(Trade Name)

located at 300 E Main St., Lake Geneva, WI 53147

appoints ERIC SCHMITT

[Redacted Address]

(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 ☒ 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? ☐ Yes ☒ No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? > 90 DAYS

Place of residence last year [Redacted]

For: DECORUM LAKE GENEVA, LLC

(Name of Corporation / Organization / Limited Liability Company)

By: [Signature]

(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

ACCEPTANCE BY AGENT

I, ERIC SCHMITT, hereby accept this appointment as agent for the
(Print / Type Agent's Name)

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.

Eric Schmitt

4-26-21

APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)

I hereby 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.

Approved on 5-3-21 by [Signature] Title Police Chief
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print)	(last name)	(first name)	(middle name)
PATEL		AJIT	K

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.

☒ **MANAGING MEMBER** of **DECORUM LAKE GENEVA, LLC**

(Officer / Director / Member / Manager / Agent)

(Name of Corporation, Limited Liability Company or Nonprofit Organization)

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? 0

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 county or municipality? ☐ Yes ☒ No

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 county or municipality? ☐ Yes ☒ No

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? ☐ Yes ☒ No

If yes, identify.

(Name, Location and Type of License/Permit)

5. Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ☐ Yes ☒ No

If yes, identify.

(Name of Wholesale Licensee or Permittee)

(Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
QUALITY INN	300 E. WHITESTONE BLVD, TX	04/01/2016	06/01/2021
Employer's Name	Employer's Address	Employed From	To
AKP SOLUTIONS	1400 LITTLE ELM TRAIL #1303	01/01/2014	06/01/2021

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

(Signature of Named Individual)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print)	(last name)	(first name)	(middle name)
THAKKAR	CHINTAN	S	

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.
- ☒ **MANAGING MEMBER** of **DECORUM LAKE GENEVA, LLC**
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

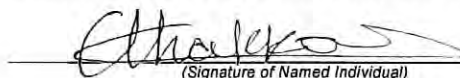
The above named individual provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? 0
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 county or municipality? ☐ Yes ☒ No
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 county or municipality? ☐ Yes ☒ No
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? ☐ Yes ☒ No
If yes, identify.
5. Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ☐ Yes ☒ No
If yes, identify.

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
DAYS INN	220 S. LYFORD RD, 61108	01/01/2012	05/01/2021
Employer's Name	Employer's Address	Employed From	To
HOWARD JOHNSON	3909 11TH STREET, 61109	01/01/2005	01/01/0215

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.


(Signature of Named Individual)

original

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

Tienda El Rancho Inc

All corporations/organizations or limited liability companies apply liquor must appoint an agent.

Agent Last Name (First) (Middle Name)
Jaramillo Mercedes

All Officer(s) Director(s) of Corporation and Members / Mana

President / Member Last Name	(First)	(Middle Name)
Jaramillo	Gerardo	
Vice President / Member Last Name	(First)	(Middle Name)
Jaramillo	Mercedes	
Secretary / Member Last Name	(First)	(Middle Name)
Jaramillo	Mercedes	
Treasurer / Member Last Name	(First)	(Middle Name)
Jaramillo	Gerardo	
Directors / Managers Last Name	(First)	(Middle Name)
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

1. Trade Name Tienda El Rancho Inc Business Phone Number (262) 249-0698.

2. Address of Premises 1151 Elkhorn Rd L.G. Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

NOW it's store in
The restaurant Area in the first door 3 door cooler but
Outside walking cooler but if we aprobe for a CLASS B beer
it will be in a Kitchen Refrigerator and in the outside walking cooler.

Tienda El Rancho

Applicant's Wisconsin Seller's Permit Number 456-1020048704-03	
FEIN Number 20-2479235	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 125

pd 5/11/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Mercedes Jaramillo	Title / Member V.P.	Date 05-11-21
Signature Mercedes Jaramillo		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk May 11, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name) Mercedes Jaramillo	(first name) Mercedes	(middle name)
--	---------------------------------	---------------

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.
- ☐ Gerardo Jaramillo of Tienda El Rancho Inc
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

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? 28 yrs
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 county or municipality? ☐ Yes ☒ No
 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 county or municipality? ☐ Yes ☒ No
 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? ☒ Yes ☐ No
 If yes, identify. Tienda El Rancho Inc
(Name, Location and Type of License/Permit)
5. Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ☐ Yes ☒ No
 If yes, identify.

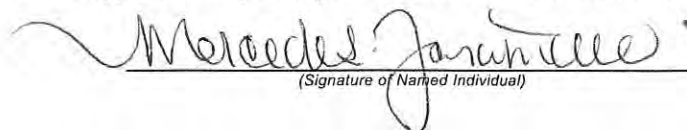
(Name of Wholesale Licensee or Permittee)

(Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name GO INC	Employer's Address 600 chipewag Dr Harvard IL	Employed From 1995	To 1999
Employer's Name	Employer's Address	Employed From	To

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.


(Signature of Named Individual)

Outside
Walking Cooler

EXIT
back door

Dishes

Heg | Dairy
Cooler

Bathroom

Tienda el

Rancho INC

EXIT

Entrance

Fruits &
Snacks

Groceries

Groceries

Cash

Registered

Restaurant

Beef cooler

tables

Meat Department

Kitchen
refrigerator

EXIT
back door



WISCONSIN DEPARTMENT OF REVENUE
PO BOX 8902
MADISON, WI 53708-8902

Contact Information:

2135 RIMROCK RD PO BOX 8902
MADISON, WI 53708-8902
ph: 608-266-2776 fax: 608-327-0235
email: DORBusinessTax@wisconsin.gov
website: revenue.wi.gov

Letter ID L2044334672



TIENDA EL RANCHO, INC.

Wisconsin Business Tax Registration Certificate

Expiration date: March 31, 2023
Legal/real name: TIENDA EL RANCHO, INC.

- This certificate confirms that you are registered with the Wisconsin Department of Revenue for the tax types shown below.
- This registration certificate is not a seller's permit, and should not be used as proof that you hold a seller's permit.
- You may not transfer this certificate to any other individual or business.

Tax Type	Account Type	Number
Sales & Use Tax	Sales & Use Tax	456-1020048704-03
Withholding Tax	Withholding Tax	036-1020048704-04



DEPARTMENT OF AGRICULTURE,
TRADE AND CONSUMER PROTECTION

License, Permit or Registration

The person, firm, or corporation shown below has complied with the Wisconsin statutes and is authorized to engage in the activity indicated.

ACTIVITY Small PH no W&M (22) - Food Sales \$25K - \$1 Million PHF no W&M		EXPIRATION DATE 30-Jun-2021	I.D. NUMBER NFRY-A3W53N
LICENSEE MAILING ADDRESS TIENDA EL RANCHO, INC. 1151 ELKHORN RD LAKE GENEVA WI 53147	NOT TRANSFERABLE	BUSINESS / ESTABLISHMENT ADDRESS TIENDA EL RANCHO 2 1151 ELKHORN RD LAKE GENEVA WI 53147	

All Permits expire on June 30th; it is the responsibility of the licensee to make sure all applicable fees are received by the department before July 1st or a late payment fee will be assessed.

If you do not receive a renewal form prior to June 30th from your licensing authority, you should send in your payment for renewing your permit to the following address:

WDATCP-LICENSE RENEWAL
DRAWER 296
MILWAUKEE, WI 53293-0296
(608)224-4720

* Include the name of your facility and the ID number.

RESOLUTION OF THE COMMON COUNCIL			
Authorizing and directing the proper city official(s) to issue the Liquor License renewals for the period of July 1, 2021, to June 30, 2022			
Committee Action: Finance, Licensing, and Regulation Committee to consider May 18, 2021			
Fiscal Impact: Class A Beer=\$100; Class A Liquor=\$500; Class B Beer & Liquor=\$600; Class C Wine=\$100; Publication fee=\$20			
File Number:	21-R35	Date Introduced:	June 14, 2021

WHEREAS the City Clerk’s office has received applications for Liquor License renewals for the period of July 1, 2021, to June 30, 2022, for the following businesses:

Combination “Class A” Intoxicating Liquor & Class “A” Fermented Malt Beverage:

- Aldi Inc (Wisconsin) d/b/a Aldi #56, 2027 E Geneva St, Candice Jasper, Agent
- Brutap LLC d/b/a Bruno’s Liquors, 524 Broad St, James Sharkus, Agent
- Queso LLC d/b/a The Cheese Box, 801 S Wells St, Zbigniew Boroweic, Agent
- Cove Condominium Association Inc d/b/a The Cove of Lake Geneva (Gift Shop), 111 Center St, Patrick McCarthy, Agent
- 1111 N Edwards Blvd, LLC d/b/a Fairfield Inn & Suites, 1111 N Edwards Blvd, Jill Gaulke, Agent
- Simple Spirits Inc d/b/a Geneva Liquors, 797 S Wells St, Rajesh Sachdeva, Agent
- Kelley Williamson Company d/b/a Kelley’s Market, 350 N Edwards Blvd, Suzanne Dorsey-Sterling, Agent
- Kwik Trip Inc d/b/a Kwik Trip 219, 710 Williams St, Laura Meinen, Agent
- Maya Geneva Inc d/b/a Maya Geneva Inc, 605 Williams St, Vikas Dadhwal, Agent
- New World Wine Shop INC d/b/a New World Wine Shop, 830 W Main St Suite G, Jerry Sibbing, Agent
- Midwest Fuel, Inc d/b/a Northside Mobil, 501 Interchange North, John Consolino, Agent
- Quick and Save LLC d/b/a Quick and Save, 1231 Grant St, Pradip Patel, Agent
- Stinebrinks Lake Geneva Foods LLC d/b/a Stinebrink’s Piggly Wiggly, 100 East Geneva Sq, Mark Stinebrink, Agent
- Kwik Trip Inc d/b/a StopNGo Store # 1520, 896 Wells St, Brigett Kohn, Agent
- Target Corp d/b/a Target Store T2348, 660 N Edwards Blvd, Katherine Johnson, Agent
- Walgreen Co. d/b/a Walgreens #05600, 351 Edwards Blvd, Suzanne Tiedke, Agent
- Walmart Stores INC d/b/a Walmart Store #910, 201 S Edwards Blvd, Rebecca Edwards, Agent

“Class A” Intoxicating Liquor:

- Lake-Ben INC d/b/a Cornerstone Shop & Gallery, 214 Broad St, Karin Bennett, Agent
- Lake Geneva School of Cooking LLC d/b/a Lake Geneva School of Cooking, 727 Geneva St, John Bogan, Agent

Class “A” Fermented Malt Beverage:

- Evergreen BP Operating Corp d/b/a Evergreen BP, 300 Peller Rd, Judith Schwartz, Agent

Combination “Class B” Liquor & Class “B” Fermented Malt Beverage (Hotel Exemption):

- Cove Condominium Association Inc d/b/a The Cove of Lake Geneva, 111 Center St, Patrick McCarthy, Agent
- Harbor Shores Hotel Management INC d/b/a Harbor Shores on Lake Geneva, 300 Wrigley Dr, Shelley Strohm, Agent

Combination “Class B” Liquor & Class “B” Fermented Malt Beverage:

- American Legion Post #24 d/b/a American Legion Post #24, 735 Henry St, Charles Schlehlein, Agent
- Stone Soup LLC d/b/a Baker House, 327 Wrigley Dr, Robert Lopez, Agent
- 422 S. Wells St. LTD d/b/a Celebration on Wells, 422 S Wells St, Charles Lorenzi, Agent
- L&B Main Street Inc d/b/a Champs Sports Bar & Grill, 747 W Main St, Jes Christenson, Agent
- Mangiami Italiano LLC d/b/a Cuoco Pazzo Eat & Drinkz, 393 N Edwards Blvd, Agent, Eric Webber
- Chubby Kitty LLC d/b/a Fat Cat’s, 104 Broad St, Mark Basil, Agent
- Harrys Café & Place Inc d/b/a Harrys Café, 808 Main St, Agent, James Chironis
- Hogs & Kisses Inc d/b/a Hogs & Kisses, 149 Broad St, Linda Chironis, Agent
- Capitol Geneva LLC d/b/a Lake City Social, 111 Center St, Stephen Schroeder, Agent
- Sandal Inc d/b/a Lake Geneva Lanes, 192 E Main St, Franklin Guske, Jr, Agent
- Maxwell Pub LLC d/b/a Maxwell Mansion, 304 S Wells St, Kimberly Yopp
- Medusa Grill & Bistro LLC d/b/a Medusa Grill & Bistro, 501 Broad St, Gregory Anagnos, Agent
- DCR Restaurant Group LLC d/b/a Next Door Pub & Pizzeria, 411 Interchange North, Chad Bittner, Agent
- Samson Enterprises LLC d/b/a Northsiders Lake Geneva, 642 W Main St, Michelle Norgard, Agent
- Oakfire LLC d/b/a Oakfire, 831 Wrigley Dr, David Scotney, Agent
- Popeyes Galley & Grog LTD d/b/a Popeye’s on Lake Geneva, 811 Wrigley Dr, Dimitrius Anagnos, Agent
- Gleneagles LLC d/b/a Sopra, 724 W Main St, Alastair Cumming, Agent
- Mercedes or Bust LLC d/b/a The Bottle Shop, 617 W Main St, Elizabeth Tumas, Agent
- Two Thumbs Up LLC d/b/a Thumbs Up, 260 Broad St, Kimberly Dawson, Agent
- LG Hospitality Group LLC d/b/a Tuscan Tavern & Grill, 430 Broad St, James Georgalus, Agent

Combination Reserve “Class B” Liquor & Class “B” Fermented Malt Beverage:

- Beachside Hospitality Inc d/b/a Barrique Bistro & Wine Bar, 835 Wrigley Dr, Dana Trilla, Agent
- Bella Vista Suites on the Shores of Lake Geneva, INC d/b/a Bella Vista Suites on the Shores of Lake Geneva, 335 Wrigley Dr, Charles Lorenzi, Agent
- Harborside Pub & Grill LLC d/b/a Harborside Pub & Grill, 100 Broad St, Spyro Condos, Agent
- Lake Aire LLC d/b/a Lake Aire Restaurant, 804 W Main St, George Argiropoulos, Agent

Class “B” Fermented Malt Beverage:

- B & B Lake Geneva LLC d/b/a Board & Brush Lake Geneva, 262 Center St, Julie Selby, Agent
- Jackson Wine, LLC d/b/a Studio Winery/Geneva Lake Distillery, 401 Sheridan Springs Rd, Kathleen Jackson, Agent

Class “B” Fermented Malt Beverage & Class “C” Wine:

- DCRB Inc d/b/a Avant Cycle Café, 234 Broad St, Andrew Gruber, Agent
- The Candle Mercantile LLC d/b/a The Candle Mercantile, 870 W Main St, Eizabeth Doyle, Agent
- El Zacatecano LLC d/b/a El Zacatecano, 627/629 Williams St, Christian Ovalle, Agent
- The Farmstand LLC d/b/a The Farmstand, 707 W Main St, Daniel Robers, Agent

- D & D Restaurant Group Inc d/b/a Flat Iron Tap, 150 Center St, John Lindsey, Agent
- Plaza Media LLC d/b/a Geneva Theater, 244 Broad St, Shad Branen, Agent
- Breakfast Bungalow LLC d/b/a Great Eggs, 220 Cook St #101, Justin Ochlek, Agent
- Happy Restaurant INC d/b/a Happy Café, 526 Wells St, Min Ting Zhong, Agent
- MOD Super Fast Pizza (Wisconsin) LLC d/b/a MOD Pizza, 281 N Edwards Blvd, Heidi Yohn, Agent
- Martins Olympic Restaurant LLC d/b/a Olympic Restaurant, 748 W Main St, Yolanda Zavaleta, Agent
- Sabai Sabai Thai Cuisine Inc d/b/a Sabai Sabai Thai Cuisine, 306 Center St, Jirapa Cox, Agent
- Simple Café LLC d/b/a Simple Café, 525 Broad St, Thomas Hartz, Agent
- RL KL Company Inc d/b/a SuWing's Chinese Restaurant, 743 North St, Ransi Lei, Agent
- Ovalle-Perez LLC d/b/a Taqueria El Gallo De Oro, 820 Williams St, Cynthia Perez, Agent
- Tristan Crist Magic Theatre LLC d/b/a Tristan Crist Magic Theatre, 100 N Edwards Blvd, Tristan Christ, Agent

WHEREAS, your Finance, Licensing, and Regulation Committee met on May 18, 2021, to consider the terms of the Liquor License renewal applications and, upon advisement from the Police Chief, recommends approval all of a licenses; now therefore

BE IT RESOLVED by the Common Council of the City of Lake Geneva that the proper city official(s) be hereby authorized and directed to issue the Liquor License to these businesses contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds.

Approved this 14th day of June, 2021.

Council Action: ☐ **Adopted** ☐ **Failed** **Vote** _____

Mayoral Action: ☐ **Accept** ☐ **Veto**

Charlene Klein, Mayor Date

Attest:

Lana Kropf, City Clerk Date

Aldi #56

OAK #56

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
-	-	-	-
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
-	-	-	-
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
-	-	-	-

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
ALDI, INC. (WISCONSIN)	9342 S. 13TH ST. OAK CREEK, WI 53154

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
JASPER	CANDICE	

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name	(First)	(Middle Name)
YOUNGSTROM	CHARLES	ERNEST
Vice President / Member Last Name	(First)	(Middle Name)
-	-	-
Secretary / Member Last Name	(First)	(Middle Name)
PFTMILLER	TERRY	EDWARD
Treasurer / Member Last Name	(First)	(Middle Name)
Directors / Managers Last Name	(First)	(Middle Name)
JASPER	CANDICE	
Directors / Managers Last Name	(First)	(Middle Name)
-	-	-

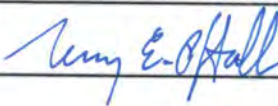
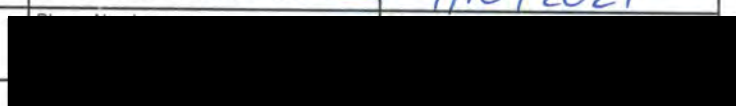
C. Business Information

- Trade Name ALDI #56 Business Phone Number 262-581-4107
- Address of Premises 2027 EAST GENEVA STREET Post Office & Zip Code LAKE GENEVA 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) SINGLE STORY BRICK BUILDING. ALCOHOL BEVERAGES WILL BE SOLD ON THE SALES FLOOR AND STORED IN THE BACKROOM. ALCOHOL SALES RECORDS WILL BE KEPT IN THE OFFICE AT THE STORE.

5. Legal description (omit if street address is given on previous page): GROCERY STORE

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) TERRY PFORTMILLER	Title / Member SECRETARY/TREASURER	Date 4/10/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Bruno's Liquors

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
BRUNO'S LLC	

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
SHARKUS	SAMUS	ELIOT	

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
SHARKUS	SAMUS	ELIOT	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

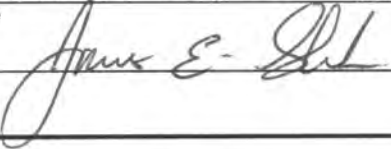
- Trade Name BRUNO'S LIQUORS Business Phone Number 262-248-6407
- Address of Premises 524 BROAD ST. Post Office & Zip Code LAKE GENEVA 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) THE ENTIRE BUILDING

Applicant's Wisconsin Seller's Permit Number	
456102715452303	
FEIN Number	
273223289	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd4/1/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3.** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(**Note:** Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) SHARKUS JAMES E.	Title / Member Owner	Date 4-8-2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company ☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
Queso LLC	

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
Borowiec	Zbigniew	J

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	
Borowiec	Zbigniew	J	
Vice President / Member Last Name	(First)	(Middle Name)	
Cheryl Borowiec	Cheryl	A	
Secretary / Member Last Name	(First)	(Middle Name)	
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name The Cheese Box Business Phone Number 262-248-3440
- Address of Premises 801 S Wells St Post Office & Zip Code Lake Geneva WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Retail Floor and adjacent Room

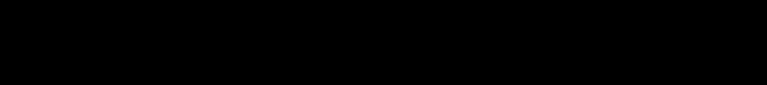
The Cheese Box

Applicant's Wisconsin Seller's Permit Number	
4561028621145102	
FEIN Number	
37-1759271	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/11/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Zbigniew J Borowiec	Title / Member owner	Date 3/21/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth

Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)
[REDACTED]	[REDACTED]	[REDACTED]
Full Name (Last)	(First)	(Middle Name)
[REDACTED]	[REDACTED]	[REDACTED]

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company
Cove Condominium Association, Inc

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
<u>McCarthy</u>	<u>Patrick</u>	<u>Joseph</u>

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)
<u>Patera</u>	<u>James</u>	
Vice President / Member Last Name	(First)	(Middle Name)
<u>Wadington</u>	<u>Sandra</u>	
Secretary / Member Last Name	(First)	(Middle Name)
<u>McCarthy</u>	<u>Patrick</u>	
Treasurer / Member Last Name	(First)	(Middle Name)
<u>Kane</u>	<u>Beth</u>	
Directors / Managers Last Name	(First)	(Middle Name)
<u>Letto</u>	<u>Robert</u>	
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

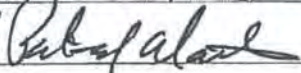
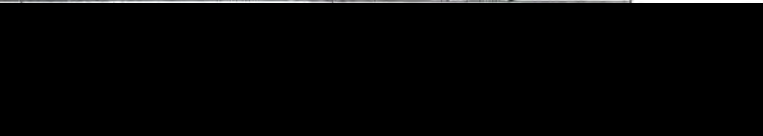
- Trade Name The Cove of Lake Geneva Business Phone Number 262-249-9460
- Address of Premises 111 Center St Post Office & Zip Code Lake Geneva 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) A. Gift Shop and Storage

The Cove (Class A Combo)

Applicant's Wisconsin Seller's Permit Number 456-1020042-03	
FEIN Number 39-1819821	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3. ☐ Yes ☒ No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) PATRICK J. M. CARTHY	Title / Member BOARD of Directors	Date 3/29/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 11, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Fairfield Inn & Suites

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company
1111 N Edwards Blvd, LLC

All corporations/organizations or limited liability companies applying for a liquor license must appoint an agent.

Agent Last Name: Chauncey First: Jill (Middle Name)

All Officer(s) Director(s) of Corporation and Members / Members:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Konrad	Jason		2617 Knob Hill Rd., Johnsburg, IL 60050
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Fairfield Inn & Suites Business Phone Number 262-348-9000
- Address of Premises 1111 N Edwards Blvd Post Office & Zip Code 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) packaged goods sold - guest can consume sealed beverages in their guestrooms, 1st floor sitting (lounge area and outdoor patio. Retail liquor services for special events.

Applicant's Wisconsin Seller's Permit Number <u>456-1029843930-02</u>	
FEIN Number <u>83-0543026</u>	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ <u>100-</u>
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ <u>500-</u>
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ <u>25-</u>
TOTAL FEE	\$ <u>625-</u>

pd 5/10/21

5. Legal description (omit if street address is given on previous page): see attached

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No

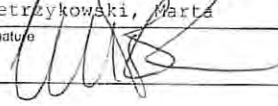
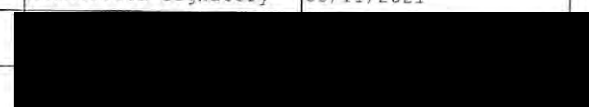
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Pietrzykowski, Marta	Title / Member Authorized Signatory	Date 05/11/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>May 11, 2021</u>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth

Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

[Redacted Section]

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company: SIMPLE SPIRITS INC
Address of Corporation / Limited Liability Company (if different from licensed premises): 797 S. WELLS STREET LG 53147

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name: SACHDEVA (First): RAJESH (Middle Name): _____

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>SACHDEVA</u>	<u>RAJESH</u>		
Vice President / Member Last Name	(First)	(Middle Name)	
Secretary / Member Last Name	(First)	(Middle Name)	
Treasurer / Member Last Name	(First)	(Middle Name)	
Directors / Managers Last Name	(First)	(Middle Name)	
Directors / Managers Last Name	(First)	(Middle Name)	

C. Business Information

1. Trade Name: GENEVA LIQUORS Business Phone Number: 262 248 5000
2. Address of Premises: 797 S. WELLS STREET LG Post Office & Zip Code: 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

All the liquor will be stored in the 797 S. Wells Street LG
Geneva Liquors & Beer Cooler
2500 SQ FT BUILDING PLUS 300 SQ FT BEER CAVE

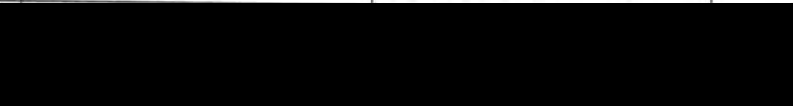
Geneva Liquors

Applicant's Wisconsin Seller's Permit Number	
456102977191803	
FEIN Number	
83-2443203	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/19

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☐ Yes ☒ No
- Profit or loss statement will be filed this month.
- April 2021.
- My CPA has already asked for extension
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
- [phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☐ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
- (Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) SAGIDEVA RAJESH	Title / Member OWNER	Date APRIL 8 - 21
Signature <i>[Signature]</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 9, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

Kelley Williamson Company

All corporations/organizations or limited liability companies apply liquor must appoint an agent.

Agent Last Name (First) (Middle Name)
Dorsey-Sterling Suzanne A

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Kelley's Market Business Phone Number 262-248-2305
- Address of Premises 350N Edwards Blvd Post Office & Zip Code Lake Geneva WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

See Attached Map

Kelley's Market

Applicant's Wisconsin Seller's Permit Number	
496-0000322069-03	
FEIN Number	
36-1314080	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 5/26/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3**. ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☒ Yes ☐ No
Owner Wally Griffin passed away - please see
Attached
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
 [phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
 (Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <u>Viederis Debbie</u>	Title / Member <u>Admin Assist</u>	Date <u>3/22/21</u>
Signature <u>Debbie Vieder</u>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>March 25, 2021</u>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Kwik Trip #219

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2021 ending: 06/30/2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of Lake Geneva City of ☐ City of

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company ☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

Applicant's Wisconsin Seller's Permit Number 456-0000287614-03	
FEIN Number 39-1036365	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$100.00
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$500.00
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$25.00
TOTAL FEE	\$625.00

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company Kwik Trip, Inc.	Address of Corporation / Limited Liability Company (if different from licensed premises) P.O. Box 2107, La Crosse, WI 54602
--	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name Meinen	(First) Laura	(Middle Name) Lee
---------------------------	------------------	----------------------

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name Zietlow	(First) Donald	(Middle Name) Paul
Vice President / Member Last Name	(First)	(Middle Name)
Secretary / Member Last Name	(First)	(Middle Name)
Treasurer / Member Last Name Wrobel	(First) Jeffrey	(Middle Name) James
Directors / Managers Last Name Zietlow	(First) Donald	(Middle Name) Paul
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

1. Trade Name KWIK TRIP 219 Business Phone Number 262-249-0523

2. Address of Premises 710 Williams St Post Office & Zip Code Lake Geneva 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premise description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) One-story frame construction with storage in lockable walk-in cooler & cabinetry.

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3.** Yes ☐ No ☒
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3** Yes ☐ No ☒
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** Yes ☐ No ☒

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** Yes ☒ No ☐

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? Yes ☒ No ☐
 [phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes ☒ No ☐
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes ☐ No ☒
12. Does the applicant owe municipal property taxes, assessments, or other fees? Yes ☐ No ☒
 (Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Zietlow, Donald P.	Title / Member President	Date 3-24-21
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk march 31, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth

Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company MAYA GENEVA INC	Address of Corporation / Limited Liability Company (if different from licensed premises)
--	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name DADHWAL	(First) VIKAS	(Middle Name)	
----------------------------	------------------	---------------	--

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name DADHWAL	(First) SHIKHA	(Middle Name)	
Vice President / Member Last Name	(First)	(Middle Name)	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name MAYA GENEVA INC Business Phone Number 2622482248
2. Address of Premises 605 WILLIAMS ST Post Office & Zip Code LAKE GENEVA WI 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) GAS STATION / CONVINCE

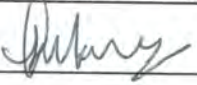
STORE / BEER COOLER / LIQUOR

Maya Geneva

Applicant's Wisconsin Seller's Permit Number	456102921698802
FEIN Number	814710508
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
(phone (608) 266-2776)
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) RAJHWAL SHIKHA	Title / Member OWNER	Date 04/16/21
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 19, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company ☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company New World Wine Shop Inc. Address of Corporation / Limited Liability Company (if different from licensed premises) 830 W Main St Lake Geneva WI 53147

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name First Middle Name Sibbins Jerry Thomas

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name New World Wine Shop Business Phone Number 262-812-4086
2. Address of Premises 830 W Main St Post Office & Zip Code Lake Geneva WI 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Retail Space and Storage Sales Floor + Stand up cooler
Partition Behind Cash out
Records kept in office file cabinet

New World Wine

Applicant's Wisconsin Seller's Permit Number 456-1028896518-02	
FEIN Number 47-3418492	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/14/21

OK

5. Legal description (omit if street address is given on previous page): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No

b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3** ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Jerry Sibbing I.	Title / Member President Scorp	Date 4/9/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 14, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company ☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
Midwest Fuel, Inc	501 Interchange N Lake Geneva WI

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)	
Consolino	JOHN	JOSEPH	

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	
Consolino	JOHN	JOSEPH	
Vice President / Member Last Name	(First)	(Middle Name)	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name NORTHside Mobil Business Phone Number 262-248-2910
- Address of Premises 501 Interchange N Post Office & Zip Code LAKE GENEVA, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Liquor Dept, SOLD at COUNTER, STORED in LIQUOR
DEPARTMENT, RECEIPTS in OFFICE.
SEE ATTACHED MAP

Northside Mobil

Applicant's Wisconsin Seller's Permit Number	
456-102738963902	
FEIN Number	
20-2273799	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/120

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Consolingo, John, J</i>	Title / Member <i>President</i>	Date <i>4/17/21</i>
Signature <i>John Consolingo</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>Apr. 120, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of } Lake Geneva
☐ Village of }
☒ City of }

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>QUICK AND SAVE, LLC.</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)
--	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>PATEL</u>	(First) <u>PRADIP</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
---------------------------------	--------------------------	---------------	--

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name <u>NARENDRA</u>	(First) <u>PATEL</u>	(Middle Name)	
Vice President / Member Last Name <u>ANITA</u>	(First) <u>PATEL</u>	(Middle Name)	
Secretary / Member Last Name	(First)	(Middle Name)	
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name Quick AND Save. Business Phone Number 262-203-5569.
608-359-5110.
2. Address of Premises 1231 GRANT ST, Post Office & Zip Code Lake Geneva, 53147.
3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
All Alcohol sold on Main Register. Half of the Alcohol store Next Register and half store in Cooler. Most of the extra Inventory in the Back Room.

Quick and Save

Applicant's Wisconsin Seller's Permit Number <u>456-1030187210-02</u>	
FEIN Number <u>83-2192427</u>	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/14/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☒ No
- _____

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) PATEL NARENDRA	Title / Member President	Date 4/14/21
Signature Narendra Patel		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 14, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company: Stinebrink's Lake Geneva Foods LLC
Address of Corporation / Limited Liability Company (if different from licensed premises): 100 E. Geneva St. Lake Geneva WI 53147

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name: Stinebrink (First) Mark (Middle Name) Edward

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Stinebrink	Mark	Edward	
Vice President / Member Last Name	(First)	(Middle Name)	
Stinebrink	Brett	Michael	
Secretary / Member Last Name	(First)	(Middle Name)	
Treasurer / Member Last Name	(First)	(Middle Name)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name: Stinebrink's Piggly Wiggly Business Phone Number: 262-248-8798
2. Address of Premises: 100 E Geneva St. Post Office & Zip Code: Lake Geneva 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Liquor Department in side of Store d stored in locked liquor cage.

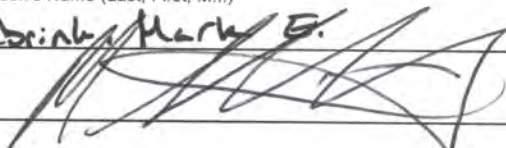
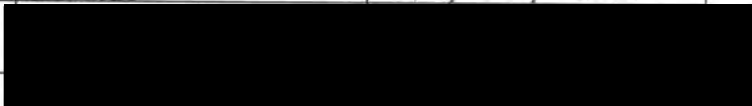
Stinebrink's Piggly Wiggly

Applicant's Wisconsin Seller's Permit Number 456-1026650040-82	
FEIN Number 26-3523874	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/12/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Stinebrink, Mary E.	Title / Member owner	Date 04/05/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 12, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

STOP-N-GO #1520

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2021 ending: 06/30/2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of Lake Geneva City of ☐ City of

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company ☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company Kwik Trip, Inc.	Address of Corporation / Limited Liability Company (if different from licensed premises) P.O. Box 2107, La Crosse, WI 54602
--	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name Kohn	(First) Brigett	(Middle Name) Marie
-------------------------	--------------------	------------------------

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name Zietlow	(First) Donald	(Middle Name) Paul
Vice President / Member Last Name	(First)	(Middle Name)
Secretary / Member Last Name	(First)	(Middle Name)
Treasurer / Member Last Name Wrobel	(First) Jeffrey	(Middle Name) James
Directors / Managers Last Name Zietlow	(First) Donald	(Middle Name) Paul
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

1. Trade Name STOP-N-GO 1520 Business Phone Number 262-248-4582

2. Address of Premises 896 S Wells St Post Office & Zip Code Lake Geneva 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premise description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) One-story building with storage in lockable walk-in cooler, on sales floor, behind sales counter.

Applicant's Wisconsin Seller's Permit Number 456-0000287614-03	
FEIN Number 39-1036365	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100.00
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500.00
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25.00
TOTAL FEE	\$ 625.00 pd 3/21/2

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3.** Yes ☐ No ☒
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3** Yes ☐ No ☒
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** Yes ☒ No ☐
New agent reported Jan. 2021
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** Yes ☒ No ☐
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? Yes ☒ No ☐
 [phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes ☒ No ☐
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes ☐ No ☒
12. Does the applicant owe municipal property taxes, assessments, or other fees? Yes ☐ No ☒
 (Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Zietlow, Donald P.	Title / Member President	Date 3-24-21
Signature <i>Donald P. Zietlow</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk March 31, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Target Corporation</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>1000 Nicollet Mall CC-1128 Minneapolis, MN 55403</u>
--	---

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Johnston</u>	(First) <u>Katherine</u>	(Middle Name) <u>Patricia</u>
------------------------------------	-----------------------------	----------------------------------

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name <u>Haaland</u>	(First) <u>Corey</u>	(Middle Name) <u>Lee</u>	
Vice President / Member Last Name <u>Brown-Wiese</u>	(First) <u>Janine</u>	(Middle Name) <u>Lisa</u>	
Secretary / Member Last Name	(First)	(Middle Name)	
Treasurer / Member Last Name	(First)	(Middle Name)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

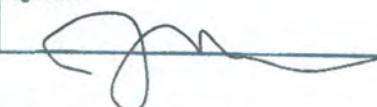
- Trade Name Target Store T-2348 Business Phone Number 262-248-5610
- Address of Premises 660 N Edwards Blvd Post Office & Zip Code Lake Geneva, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) one store building;
stored in grocery department aisles and coolers; sold at front checklanes

Target #T-2348

Applicant's Wisconsin Seller's Permit Number <u>456-000026531-04</u>	
FEIN Number <u>41-0215170</u>	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Brown-Wiese, Janine L.	Title / Member Vice President	Date 4/1/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of } Lake Geneva
☐ Village of }
☒ City of }

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Walgreen Co.</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>PO Box 901, Deerfield, IL 60015</u>
--	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Tiedke</u>	(First) <u>Suzanne</u>	(Middle Name) <u>M.</u>	[Redacted]
----------------------------------	---------------------------	----------------------------	------------

All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>See Attached</u>	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Walgreens #05600 Business Phone Number 262-248-7885
- Address of Premises 351 Edwards Blvd. Post Office & Zip Code Lake Geneva, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
Retail drug store with sundries in a one-story building - 15,795 square feet.

Walgreens #05600

Applicant's Wisconsin Seller's Permit Number <u>456-0000455404-05</u>	
FEIN Number <u>36-1924025</u>	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100.00
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500.00
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25.00
TOTAL FEE	\$ 625.00

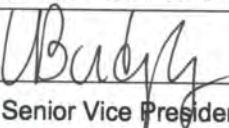
pd 1/15/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☒ Yes ☐ No
Officer Change

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
 [phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
 (Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Hora, Lisa - License Team Lead	Title / Member Senior Vice President	Date 4/7/21
Signature 		
Lisa Badgley, Senior Vice President		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2021 ending: 06/30/2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of } LAKE GENEVA
☐ Village of }
☒ City of }

County of WALWORTH Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☒ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Wal-Mart Stores East, LP</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>702 SW 8TH ST, LICENSING DEPT. 8916, BENTONVILLE, AR 72716-0500</u>
--	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>MURPHY</u>	(First) <u>ANITA</u>	(Middle Name) <u>CV</u>	
----------------------------------	-------------------------	----------------------------	--

All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>SEE ATTACHED LIST</u>	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name WALMART #910 Business Phone Number 262-248-2266
- Address of Premises 201 SOUTH EDWARDS BLVD. Post Office & Zip Code LAKE GENEVA, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
SEE ATTACHED PREMISES DESCRIPTION

Wal-Mart #910

Applicant's Wisconsin Seller's Permit Number <u>456-1020028180-05</u>	
FEIN Number <u>71-0862119</u>	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ <u>100</u>
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ <u>500</u>
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625</u>

pd 1/15/21

5. Legal description (omit if street address is given on previous page): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3 ☐ Yes ☒ No

b. Are **charges for any offenses presently pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain ☒ Yes ☐ No
CHANGE OF CORPORATE OFFICERS

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]

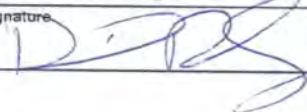
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) David Reading	Title / Member Assistant Secretary	Date 2-18-21
--	---------------------------------------	-----------------

Signature




TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company LAKE BEN, INC.	Address of Corporation / Limited Liability Company (if different from licensed premises) 214 BROAD ST. LAKE GENEVA WI 53147
---	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name BENNETT	(First) KARIN	(Middle Name) MARIE
----------------------------	------------------	------------------------

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name BENNETT	(First) BRUCE	(Middle Name) CHARLES
Vice President / Member Last Name BENNETT	(First) KARIN	(Middle Name) MARIE
Secretary / Member Last Name BENNETT	(First) KARIN	(Middle Name) MARIE
Treasurer / Member Last Name BENNETT	(First) BRUCE	(Middle Name) CHARLES
Directors / Managers Last Name	(First)	(Middle Name)
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

- Trade Name CORNERSTONE SHOP & GALLERY Business Phone Number 262-248-6988
- Address of Premises 214 BROAD ST. LG WI 53147 Post Office & Zip Code LG 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

RETAIL STORE 214 BROAD ST. LG. WI 53147

Cornerstone Shop & Gallery

Applicant's Wisconsin Seller's Permit Number 456-0000180942-03	
FEIN Number 39-1476289	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 525

pd 3/29/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3** *NA* ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☐ Yes ☒ No
- DID NOT SELL TO PUBLIC IN 2019*
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
- [phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
- (Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>BENNETT KARIN M.</i>	Title / Member <i>Vice President</i>	Date <i>3/25/21</i>
Signature <i>K Bennett</i>	Phone Number [REDACTED]	Street Address [REDACTED]

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>Mar 29, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
Lake Geneva School of Cooking LLC	727 Geneva St. Lake Geneva, WI 53147

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
BOGAN	JOHN	BERNARD

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
BOGAN	JOHN	BERNARD	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Lake Geneva School of Cooking LLC Business Phone Number 262 248-3933
- Address of Premises 727 Geneva St. Post Office & Zip Code Lake Geneva, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Retail area with-in the Lake Geneva School of Cooking.
Kitchen and Dining area for Cooking
Office and Basement for Storage

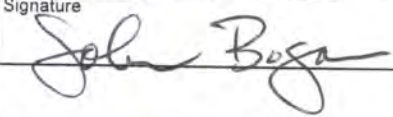
LG School of Cooking

Applicant's Wisconsin Seller's Permit Number	
456-102667 8393-03	
FEIN Number	
26-2852617	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☐ Class B beer	\$
☐ Class C wine	\$
☒ Class A liquor	\$ 500
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 525

pd 4/12/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3.** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) BOGAN, JOHN B.	Title / Member President	Date 4/8/21
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 12, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company Evergreen BP Operating Corp Address of Corporation / Limited Liability Company (if different from licensed premises) PO Box 183 Lake Geneva, WI 53147

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name Schwartz (First) Judith (Middle Name) Ann

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name	(First)	(Middle Name)
<u>Schwartz</u>	<u>David</u>	<u>Carl</u>
Vice President / Member Last Name	(First)	(Middle Name)
<u>Schwartz</u>	<u>Kelly</u>	<u>JO</u>
Secretary / Member Last Name	(First)	(Middle Name)
<u>Schwartz</u>	<u>Kelly</u>	<u>JO</u>
Treasurer / Member Last Name	(First)	(Middle Name)
<u>Schwartz</u>	<u>David</u>	<u>Carl</u>
Directors / Managers Last Name	(First)	(Middle Name)
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

- Trade Name Evergreen BP Business Phone Number 262-248-1515
- Address of Premises 300 Peller Rd Post Office & Zip Code Lake Geneva 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

At 300 Peller Rd in Beer Can Cooler /
Sales floor

Evergreen BP

Applicant's Wisconsin Seller's Permit Number <u>456-1020655137-03</u>	
FEIN Number <u>20-4065434</u>	
TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	\$ 100
☐ Class B beer	\$
☐ Class C wine	\$
☐ Class A liquor	\$
☒ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 125

pd 4/12

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Schwartz, Judith A</i>	Title / Member <i>Agent</i>	Date <i>3/25/2021</i>
Signature <i>Judith Schwartz</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>April 12, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

The Cove (Class B Combo)

Applicant's Wisconsin Seller's Permit Number 456-1020042-03	
FEIN Number 39-1819821	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 1.00
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 5.00
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

4/10/21

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
------------------	---------	---------------	--

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company Cove Condominium Association, Inc	Address of Corporation / Limited Liability Company (if different from licensed premises)
---	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name McCarthy, Patrick	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
---	---------	---------------	--

All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name Patera	(First) James	(Middle Name)
Vice President / Member Last Name Wadington	(First) Sandra	(Middle Name)
Secretary / Member Last Name McCarthy	(First) Patrick	(Middle Name)
Treasurer / Member Last Name Kane	(First) Beth	(Middle Name)
Directors / Managers Last Name Letto	(First) Robert	(Middle Name)
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

1. Trade Name The Cove of Lake Geneva Business Phone Number 262-249-9460
2. Address of Premises 111 Center St Post Office & Zip Code Lake Geneva 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) B. Indoor Pool, Outdoor Pool,

Meeting Rooms, and Storage

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3. ☐ Yes ☒ No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain ☐ Yes ☒ No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain ☒ Yes ☐ No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☒ Yes ☐ No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) PATRICK J. M. CARTHY	Title / Member BOARD of Directors	Date 3/29/2021
Signature <i>Patrick J. McCarthy</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 16, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal

Harbor Shores

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: 07/01/2021 ending: 06/30/2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth Aldermanic Dist. No. N/A
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

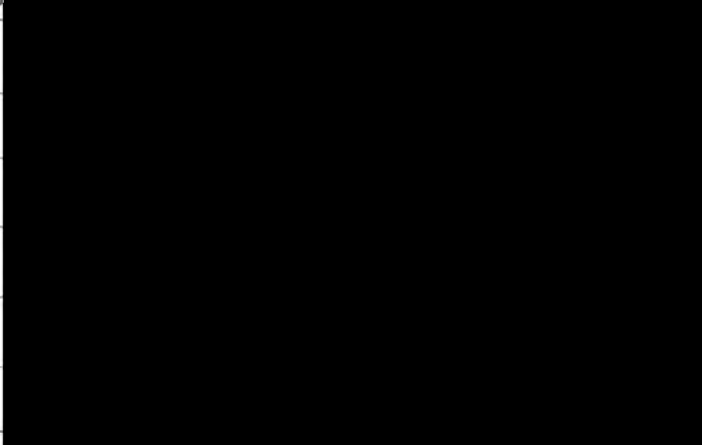
Applicant's Wisconsin Seller's Permit Number 456-0000172568-	
FEIN Number 39-199-47149	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)

Harbor Shores Hotel Management, Inc.

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)
Weaver	Samuel	
Vice President / Member Last Name	(First)	(Middle Name)
Eltoft	Kevin	
Secretary / Member Last Name	(First)	(Middle Name)
Walsh	George	
Treasurer / Member Last Name	(First)	(Middle Name)
Carini	Mark	
Agent Last Name	(First)	(Middle Name)
Stroh	Shelley	
Directors / Managers Last Name	(First)	(Middle Name)
Carstensen	Tammie	



- Trade Name Harbor Shores on Lake Geneva Business Phone Number 262-248-9181
- Address of Premises 300 Wrigley Drive Post Office & Zip Code 53147
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
Sold in Gino's East restaurant, hotel rooms (room service), meeting rooms and pool service
Alcohol stored in lower level storage office (Gino's East)
- Legal description (omit if street address is given above):
- (a) Was this premises licensed for the sale of liquor or beer during the past license year? ☒ Yes ☐ No
(b) If yes, under what name was license issued? Harbor Shores Hotel Management Inc

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** ☒ Yes ☐ No
Completed 7/29/2020
7. Is the applicant an employee or agent of, or acting on behalf of anyone except the named applicant? ☐ Yes ☒ No
If yes, explain.
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** ☐ Yes ☒ No
9. (a) **Corporate/limited liability company applicants only:** Insert state WI and date 09/06/19 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** ☐ Yes ☒ No
- (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? **If yes, explain.** ☐ Yes ☒ No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] ☒ Yes ☐ No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☒ Yes ☐ No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) <u>Bonnie Carstensen</u>	Title/Member <u>GM</u>	Date <u>4/8/2021</u>
Signature <u>Bonnie Carstensen</u>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 19, 2021</u>	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
American Legion Post 24	735 Henry St. Lake Geneva, WI 53147

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
SCHLEHLEIN	CHARLES	JOHN

All Officer(s) Director(s) of Corporation and Members / Manag

President / Member Last Name	(First)	(Middle Name)
JEGERSKI	LEONARD	
Vice President / Member Last Name	(First)	(Middle Name)
HIBBARD	TROY	
Secretary / Member Last Name	(First)	(Middle Name)
MILLER	ROBERT	
Treasurer / Member Last Name	(First)	(Middle Name)
SCHLEHLEIN	CHARLES	JOHN
Directors / Managers Last Name	(First)	(Middle Name)
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

- Trade Name American Legion Post 24 Business Phone Number 262 248-9767
- Address of Premises 735 Henry St Post Office & Zip Code LAKE GENEVA, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

ALCOHOL STORED IN BARROOM & LOWER LEVEL
ALCOHOL SERVED IN BARROOM, HALL & OUTDOOR RESTRICTED AREA
BEVERAGES STORED ON LOWER LEVEL

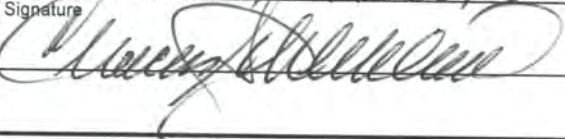
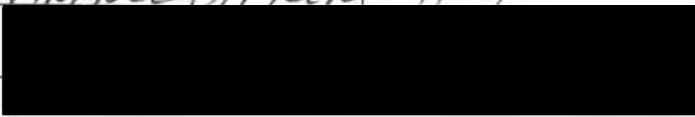
American Legion Post #24

Applicant's Wisconsin Seller's Permit Number	
456-0000612400-03	
FEIN Number	
39-0407795	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$
TOTAL FEE	\$ 625

pd 4/15/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) SCHLEHLEIN, CHARLES, J.	Title / Member FINANCE OFFICER	Date 4/10/21
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company: Stone Soup LLC
Address of Corporation / Limited Liability Company (if different from licensed premises): 327 Wrigley Dr. Lake Geneva 53147

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name: Lopez (First): Robert (Middle Name): K

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name: Baker House Business Phone Number: 262 248 4700
2. Address of Premises: 327 Wrigley Dr. Post Office & Zip Code: Lake Geneva 53147
3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

the Baker House (excluding 3rd Floor Residence) and Garden Area in front of House within the fenced area

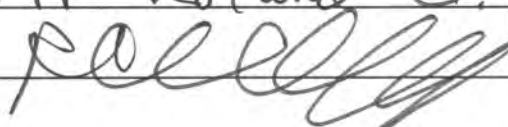
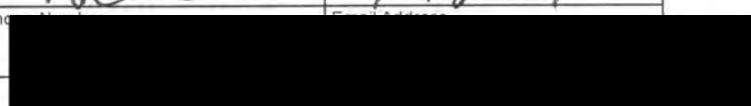
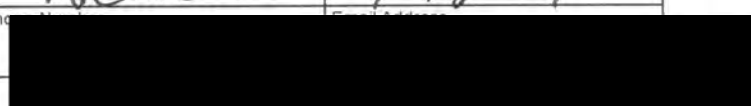
Baker House

Applicant's Wisconsin Seller's Permit Number	
456-1627045592-03	
FEIN Number	
27-1635015	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/19/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Wolff Roland C.	Title / Member Member	Date 4-18-21
Signature 	Phone 	Residence 

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 19, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth

Aldermanic Dist. No.
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

422 S Wells LTD

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
Lorenzi	Charles	B

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Celebration on Wells Business Phone Number 262-248-2555
- Address of Premises 422 S Wells St Lake Geneva Post Office & Zip Code 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

All of first floor - liquor stored in the basement

Celebration on Wells

Applicant's Wisconsin Seller's Permit Number	456-0000567764-03
FEIN Number	39-1631275
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☒ Reserve Class B liquor	\$ 500
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/12/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Loluzi Henry A</i>	Title / Member <i>Director of Operations</i>	Date <i>4/13/21</i>
Signature <i>Mari Lee</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>April 13, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company ☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
L & B Mainstreet, Inc	747 W Main St Lake Geneva WI 53147

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
Christenson	Jes	Rae

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)
Bush	Gregory	James
Vice President / Member Last Name	(First)	(Middle Name)
Bush	Jake	Edward
Secretary / Member Last Name	(First)	(Middle Name)
Christenson	Jes	Rae
Treasurer / Member Last Name	(First)	(Middle Name)
Bush	Grace	Anna
Directors / Managers Last Name	(First)	(Middle Name)
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

1. Trade Name Champs Sports Bar & Grill Business Phone Number 2622486008

2. Address of Premises 747 W Main St Lake Geneva Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☐ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Champs main inside floor, beer garden & upstairs in the loft

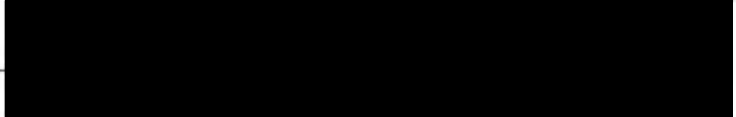
Champs

Applicant's Wisconsin Seller's Permit Number	
456-000033849703	
FEIN Number	
29-1534508	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

PA 415121

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Jessica Rae Christenson</i>	Title / Member <i>owner</i>	Date <i>4/8/21</i>
Signature <i>JR Christenson</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>April 13, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth

Aldermanic Dist. No.
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last) BASIL	(First) MARK	(Middle Name) D	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company Chubby Kitty LLC.	Address of Corporation / Limited Liability Company (if different from licensed premises)
--	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name BASIL	(First) MARK	(Middle Name) D	
--------------------------	-----------------	--------------------	--

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name BASIL	(First) MARK	(Middle Name) D	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name FAT CAT'S Business Phone Number 262 745 1213
2. Address of Premises 104 Broad St. Lib. WI 53147 Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 104 Broad St. Lib. WI 53147

Bar is on south side of building. All beer, liquor and wine is sold behind bar. Liquor, beer & wine stored behind bar downstairs in beer cooler and under staircase in storage room.

Fat Cat's

Applicant's Wisconsin Seller's Permit Number <u>456027472908202</u>	
FEIN Number <u>454497705</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/10/21

5. Legal description (omit if street address is given on previous page): Tavira
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <u>Basel Muma D</u>	Title / Member <u>Owner</u>	Date <u>4/16/21</u>
Signature <u>[Signature]</u>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>April 15, 2021</u>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company HOGS & KISSES, INC	Address of Corporation / Limited Liability Company (if different from licensed premises)
---	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name CHIRONIS	(First) LINDA	(Middle Name) M
-----------------------------	------------------	--------------------

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name CHIRONIS	(First) LINDA	(Middle Name) M
Vice President / Member Last Name	(First)	(Middle Name)
Secretary / Member Last Name CHIRONIS	(First) LINDA	(Middle Name) M
Treasurer / Member Last Name CHIRONIS	(First) LINDA	(Middle Name) M
Directors / Managers Last Name CHIRONIS	(First) LINDA	(Middle Name) M
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

- Trade Name HOGS & KISSES Business Phone Number 262-248-7447
- Address of Premises 149 BROAD STREET Post Office & Zip Code LAKE GENEVA, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) BRICK BUILDING @ 149 BROAD STREET IN LAKE GENEVA, WI. BAR, RESTAURANT, BASEMENT STORAGE ROOM, COOLERS, FREEZERS AND OFFICE.

Applicant's Wisconsin Seller's Permit Number 456000047935803	
FEIN Number 391353912	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625.00

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes are void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) LINDA CHIRONIS	Title / Member OFFICER	Date April 1, 2021
Signature <i>Linda Chironis</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk 4/1/2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
Capitol Geneva LLC	644 Wisconsin Dells Pkwy, Wisconsin Dells, WI

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
Schroeder	Stephen	James

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	
Getgen	Susan	Michele	
Vice President / Member Last Name	(First)	(Middle Name)	
Schroeder	Stephen	James	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name Lake City Social Business Phone Number (262) 248-7047

2. Address of Premises 111 Center St Lake Geneva WI Post Office & Zip Code Lake Geneva 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Main Restaurant Bar,
Lower Level Banquet Room (Map Room), Lower Level Retail Store, 3 Tier Outdoor Patio,
Main Level Dining, Lower Level Liquor Room (Storage), Lower Level Keg Cooler (Storage)
Lower Level Manager Office (Record Storage)

Lake City Social

Applicant's Wisconsin Seller's Permit Number 456-1027263323-03	
FEIN Number 27-2378492	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

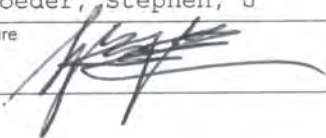
pa 4/15/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☒ Yes ☐ No
 dba change to "Lake City Social" effective 4/18/2021

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
 [phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
 (Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Schroeder, Stephen, J	Title / Member Owner/Partner	Date 04/15/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(If required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
<u>Sandal, Inc., DBA Lake Geneva Lanes</u>	<u>192 E. Main St., Lake Geneva WI 53147</u>

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
<u>Guske</u>	<u>Franklin</u>	<u>Delano</u>

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name	(First)	(Middle Name)	
<u>Guske</u>	<u>Anna</u>	<u>Christ</u>	
Vice President / Member Last Name	(First)	(Middle Name)	
<u>Urbahn</u>	<u>Jacquelyn</u>	<u>Ann</u>	
Secretary / Member Last Name	(First)	(Middle Name)	
<u>Guske</u>	<u>Anna</u>	<u>Christ</u>	
Treasurer / Member Last Name	(First)	(Middle Name)	
<u>Guske</u>	<u>Anna</u>	<u>Christ</u>	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>See Attached Form</u>			
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

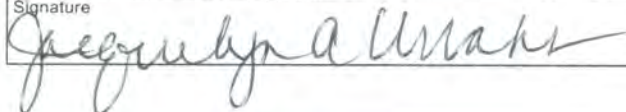
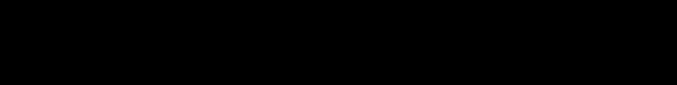
- Trade Name Lake Geneva Lanes Business Phone Number (262) 248-4805
- Address of Premises 192 E. Main St. Lake Geneva WI Post Office & Zip Code PO Box 366, 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) please see attached diagram
Building has 16 bowling lanes with a bar, kitchen and arcade area. Storage of alcohol
is in the bar area, liquor dry storage area on the main level and walk-in cooler in the
basement area. Basement also stores soda for soda system and liquor for liquor system.

Lake Geneva Lanes

Applicant's Wisconsin Seller's Permit Number <u>456-00000 60940-03</u>	
FEIN Number <u>39-1225711</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ <u>100-</u>
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ <u>500-</u>
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ <u>25-</u>
TOTAL FEE	\$ <u>625-</u>

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Urbahn, Jacquelyn A.	Title / Member Vice President	Date 04/01/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk Mar 31, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
Maxwell Pub, LLC	

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
Yopp	Kimberly	Ann

All Officer(s) Director(s) of Corporation and Members / Managers

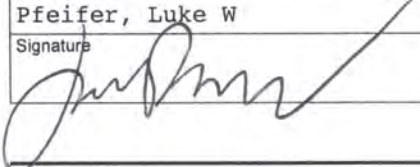
President / Member Last Name	(First)	(Middle Name)	
Pfeifer	Luke	Walter	
Vice President / Member Last Name	(First)	(Middle Name)	
Pfeifer	Monica	Janea	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Maxwell Mansion Business Phone Number 262-248-9711
- Address of Premises 304 S Wells / 421 Baker St Post Office & Zip Code Lake Geneva, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) See attached

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Pfeifer, Luke W	Title / Member Authorized Agent	Date 04/15/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 19, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Medusa Bar & Grill

Applicant's Wisconsin Seller's Permit Number <u>600-002765267-4</u>	
FEIN Number <u>20-4154247</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

ad 4/15/21

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

Medusa Grill & Bistro, LLC

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
<u>Anagnos</u>	<u>Gregory</u>	

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Medusa Grill & Bistro Business Phone Number 262-249-8644
- Address of Premises 501 Broad St Post Office & Zip Code Lake Geneva, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Restaurant w/ 2 Dining Rooms w/ Bars Office in Basement
Storage in Basement

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Anagnos, Gregory</i>	Title / Member <i>owner</i>	Date <i>4/14/21</i>
Signature <i>[Signature]</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>April 15, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

DCR Restaurant Group LLC

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name (First) (Middle Name)
Chad Bittner

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)
Bittner	Chad	
Vice President / Member Last Name	(First)	(Middle Name)
Bittner	Richard	
Secretary / Member Last Name	(First)	(Middle Name)

Next Door Pub

Applicant's Wisconsin Seller's Permit Number: 456-0002343182-02

FEIN Number: 20-3313403

TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

Ad 4116

C. Business Information

1. Trade Name: Next Door Pub: Pizzeria Business Phone Number: 262-248-9551

2. Address of Premises: 411 Interchange N. Post Office & Zip Code: Lake Geneva WI

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Restaurant, Bar, Storage room, Patio, Office, Outdoor waiting area, Basement, Fall Anniversary Party.

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>B. Huer, Chad</i>	Title / Member <i>President</i>	Date <i>4/15/21</i>
Signature <i>[Signature]</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>April 16, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of }
☐ Village of } Lake Geneva
☒ City of }

County of Walworth

Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)

(First)

(Middle Name)

Home Address (Street, City or Post Office, & Zip Code)

Full Name (Last)

(First)

(Middle Name)

Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company
Samson Enterprises LLC

All corporations/organizations or limited liability companies apply for liquor must appoint an agent.

Agent Last Name

(First)

(Middle Name)

Norgard

Michelle

Michalek

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name

(First)

(Middle Name)

Caravette

Daniel

Christoph

Vice President / Member Last Name

(First)

(Middle Name)

Secretary / Member Last Name

(First)

(Middle Name)

Home Address (Street, City or Post Office, & Zip Code)

Treasurer / Member Last Name

(First)

(Middle Name)

Home Address (Street, City or Post Office, & Zip Code)

Directors / Managers Last Name

(First)

(Middle Name)

Home Address (Street, City or Post Office, & Zip Code)

Directors / Managers Last Name

(First)

(Middle Name)

Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Northsiders Lake Geneva Business Phone Number 262-812-8285
- Address of Premises 642 West Main Street Post Office & Zip Code Lake Geneva, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
Restaurant, Bar, Patio, Basement Storage

Northsiders

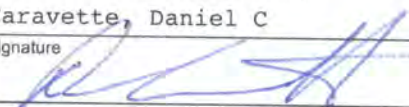
Applicant's Wisconsin Seller's Permit Number
456102699377803

FEIN Number
13-4282545

TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

5. Legal description (omit if street address is given on previous page): N/A
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Caravette, Daniel C	Title / Member Owner	Date 04/10/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 14, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company
OAKFIRE LLC.

All corporations/organizations or limited liability companies applying for a liquor license must appoint an agent.

Agent Last Name	(First)	(Middle Name)
SCOTNEY	DAVID	R

All Officer(s) Director(s) of Corporation and Members / Managers:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
SCOTNEY	DAVID	R	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name OAKFIRE Business Phone Number 262 812 8007
- Address of Premises 831 WRIGLEY DR Post Office & Zip Code LAKE GENEVA 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

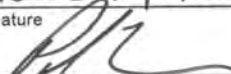
831 WRIGLEY DRIVE
1ST FLOOR, SECOND FLOOR, LOWER PATIO, UPPER PATIO, SIDEWALK
LIQUOR ROOM, COOLER, OFFICE

OAKfire

Applicant's Wisconsin Seller's Permit Number 456-1028656597-02	
FEIN Number 47-1614401	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) MECKLER, PAUL, G.	Title / Member OPERATIONS MANAGER	Date 4/14/21
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 14, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

POPEYES GALLEY & Grog, LTD.

All corporations/organizations or limited liability companies apply for liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
ANAGNOS	Dimitrios	

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)
ANAGNOS	Dimitrios	
Vice President / Member Last Name	(First)	(Middle Name)
ANAGNOS	Gregory	
Secretary / Member Last Name	(First)	(Middle Name)
ANAGNOS	Gregory	
Treasurer / Member Last Name	(First)	(Middle Name)
ANAGNOS	Dimitrios	
Directors / Managers Last Name	(First)	(Middle Name)
ANAGNOS	Dimitrios	
Directors / Managers Last Name	(First)	(Middle Name)
ANAGNOS	Gregory	

C. Business Information

- Trade Name POPEYE'S GALLEY & Grog LTD Business Phone Number (262) 248 4381
- Address of Premises 811 Wrigley Dr. Post Office & Zip Code LAKE GENEVA 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☐ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) SEE ATTACHED

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) DIMITRIUS ANAGNOS	Title / Member OWNER/CEO	Date 4/14/21
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company
GLENEAGLES LLC dba SOPRA

All corporations/organizations or limited liability companies applying for a liquor license must appoint an agent.

Agent Last Name (First) (Middle Name)
CUMMING ALASTAIR MUNRO

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
CUMMING	ALASTAIR	MUNRO	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
CUMMING	SIMON	MUNRO	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name SOPRA Business Phone Number 262 249 0800
2. Address of Premises 724 MAIN ST. Post Office & Zip Code LAKE GENEVA 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☐ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) SIDEWALK CAFE

RESTAURANT, BASEMENT BEHIND BAR
RECORDS in Basement.

Sopra

Applicant's Wisconsin Seller's Permit Number 456-1026406069-02	
FEIN Number 26-1269448	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/20

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) CUMMING, AUSTAIR M.	Title / Member AGENT	Date 4/19/21
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 20, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

The Bottle Shop

Applicant's Wisconsin Seller's Permit Number 456-1026436119-02	
FEIN Number 47-4458435	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

mercedes or bust, L.L.C.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
-----------------	---------	---------------	--

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	
Tomas	Elizabeth	A.	
Vice President / Member Last Name	(First)	(Middle Name)	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name The Bottle Shop Business Phone Number 262-348-9463
- Address of Premises 617 W. Main St. Post Office & Zip Code Lake Geneva 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Retail Store,
Wine Bar, lounge, store rooms, patio

5. Legal description (omit if street address is given on previous page): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3**

☐ Yes ☒ No

b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.**

☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain**

☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain**

☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit?
[phone (608) 266-2776]

☒ Yes ☐ No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement?

☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?

☒ Yes ☐ No

12. Does the applicant owe municipal property taxes, assessments, or other fees?

☐ Yes ☐ No

(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.)	Title / Member	Date
Jumas Elizabeth A	owner	4-15-2021
Signature		
Elizabeth Jumaz		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	Date reported to council / board	Date license granted
April 15, 2021		
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Thumbs Up

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

TwoThumbs Up LLC

All corporations/organizations or limited liability companies apply for liquor must appoint an agent.

Agent Last Name (First) (Middle Name)
Dawson Kimberly

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	
Dawson	Kimberly		
Vice President / Member Last Name	(First)	(Middle Name)	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Thumbs Up Business Phone Number 262-248-6111
- Address of Premises 260 Broad Street Post Office & Zip Code Lake Geneva WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Ground floor barroom; walk-in liquor closet (main level);
walk-in beer cooler (main level); keg cooler (basement)

Applicant's Wisconsin Seller's Permit Number	
456 102791995202	
FEIN Number	
46 2429666	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/15/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Dawson, Kimberly C	Title / Member Owner	Date 4/12/21
Signature K. Dawson		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of } Lake Geneva
☐ Village of }
☒ City of }

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company
LG Hospitality Group LLC

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name (First) (Middle Name)
Georgalus James

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	
<u>Romano</u>	<u>Thomas</u>	<u>Anthony</u>	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

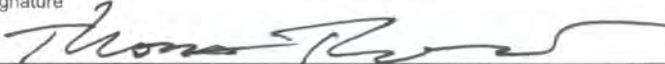
- Trade Name Tuscan Tavern and Grill Business Phone Number 1-262-248-0888
- Address of Premises 430 Broad St Post Office & Zip Code 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Dining room, 1st floor bar
1st floor storage, lower level storage, outdoor seating area, lower level bar

Tuscan Tavern & Grill

Applicant's Wisconsin Seller's Permit Number BCombo 17 <u>456192706172503</u>	
FEIN Number <u>27-2243807</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Romano, Thomas, A	Title / Member President	Date 03/28/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk Mar 31, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Barrique Bistro & Wine Bar

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth

Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company ☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
Beachside Hospitality, Inc	

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Trilla	Dana	M	

All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Trilla	Thomas	W	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Trilla	Dana	M	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

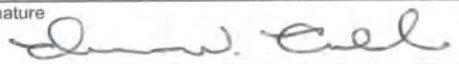
- Trade Name Barrique Bistro & Wine Bar Business Phone Number 262-248-1948
- Address of Premises 835 Wrigley Dr., Lake Geneva Post Office & Zip Code 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
1100 Sq/Ft Dining Room, Kitchen, 2 Bathrooms, Basement & Patio

Applicant's Wisconsin Seller's Permit Number 456-102813491802	
FEIN Number 46-2588851	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☒ Reserve Class B liquor	\$ 500
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 3/21/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Thomas W Trilla	Title / Member Owner	Date 03/25/2021
Signature 	Phone Number [REDACTED]	Email Address [REDACTED]@[REDACTED].COM

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk 3/26/2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company Address of Corporation / Limited Liability Company (if different from licensed premises)

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
LORENZI	Charles	B

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name	(First)	(Middle Name)	
MAKSYMCIUK	Linda		
Vice President / Member Last Name	(First)	(Middle Name)	
LORENZI	Charles	B	
Secretary / Member Last Name	(First)	(Middle Name)	
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Bella Vista Suites Business Phone Number 262-248-2100
- Address of Premises 335 Wrigley Dr. Post Office & Zip Code L.G. 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
Lobby areas - all public spaces -

Bella Vista Suites

Applicant's Wisconsin Seller's Permit Number	456-0000087500-03
FEIN Number	39-1946040
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☒ Reserve Class B liquor	\$ 500
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First M.I.) <i>Lorenz Charles B.</i>	Title / Member <i>VP BOO</i>	Date <i>4-12-21</i>
Signature <i>[Signature]</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>April 13, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

HARBORSIDE Pub & Grill LLC

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
CONDOS	SPYNO	GEORGE

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)
CONDOS	SPYNO	GEORGE
Vice President / Member Last Name	(First)	(Middle Name)
CONDOS	PATRICIA	LEE
Secretary / Member Last Name	(First)	(Middle Name)

Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name HARBOR SIDE Pub & Grill LLC Business Phone Number 262 248 3835
- Address of Premises 100 PEARSON STREET Post Office & Zip Code 53147
LAKE GENEVA
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Cement Block Structure - BASEMENT STORAGE
100 PEARSON STREET, Lake Geneva

HARBORSIDE Pub & Grill

Applicant's Wisconsin Seller's Permit Number 4561029969359-02	
FEIN Number 82-4462437	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☒ Reserve Class B liquor	\$ 500
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd 4/12

5. Legal description (omit if street address is given on previous page): NA
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <u>CONDOS SPYRO G</u>	Title / Member <u>PRESIDENT</u>	Date <u>4/1/21</u>
Signature <u>[Signature]</u>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>April 12, 2021</u>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Lake Aire Restaurant

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company
LAKE AIRE LLC

All corporations/organizations or limited liability companies apply liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
ARGIROPOULOS	GEORGE	D.

All Officer(s) Director(s) of Corporation and Members / Mana

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
ARGIROPOULOS	DEMETRIUS	G.	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
ARGIROPOULOS	GEORGE	D.	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

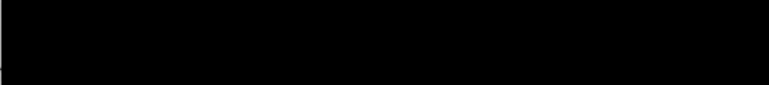
C. Business Information

- Trade Name LAKE AIRE RESTAURANT Business Phone Number 262-248-9913
- Address of Premises 804 W. MAIN ST. LAKE GENEVA Post Office & Zip Code WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) STORED IN BASEMENT AND DINING ROOM. SOLD IN DINING ROOM AND SIDEWALK CAFE.

Applicant's Wisconsin Seller's Permit Number <u>456-1028914898-02</u>	
FEIN Number <u>81-0928145</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☒ Reserve Class B liquor	\$ 500
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for any offenses presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) ARGIROPOULOS, GEORGE, D.	Title / Member VICE PRESIDENT	Date 4/5/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 12, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

B & B LAKE GENEVA LLC

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
SELBY	JULIE	P

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
SELBY	JULIE	P	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
SELBY	CURTIS	E	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

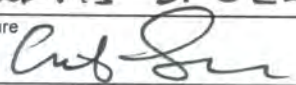
- Trade Name BOARD & BRUSH LAKE GENEVA Business Phone Number (262) 409-1639
- Address of Premises 262 CENTER ST. Post Office & Zip Code LAKE GENEVA, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Alcohol is stored in back of studio. Alcohol is sold during workshop hours and consumed on premises.

Board & Brush Lake Geneva

Applicant's Wisconsin Seller's Permit Number	
456-1028888977-02	
FEIN Number	
47-5316798	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 125

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Curtis E. SELBY	Title / Member VP	Date 4/12/21
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
<u>Jackson Wine LLC</u>	

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Jackson</u>	<u>Kathleen</u>	<u>Ann</u>	<u>401 Sheridan Springs Road</u>

All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Jackson</u>	<u>Kathleen</u>	<u>Ann</u>	<u>Same</u>
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Jackson</u>	<u>Douglas</u>	<u>Albert</u>	<u>Same</u>
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

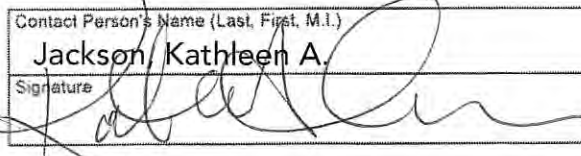
- Trade Name Studio Winery + Geneva Lake Distilling Business Phone Number 262-348-9100
- Address of Premises 401 Sheridan Springs Road Post Office & Zip Code 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
The entire lower level, including patio, of 401 Sheridan Springs Road. Records are stored in the office on the second level.

Applicant's Wisconsin Seller's Permit Number <u>456-0003399252-02</u>	
FEIN Number <u>26-1237633</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 125

pd 513

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3.** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☐ Yes ☒ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Jackson, Kathleen A.	Title / Member Member	Date 5/2/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk May 3 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
DCRB INCORPORATED	234 Broad St. LAKE Geneva WI 53147

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)	
GRUBER	Andrew		

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	
ESARCO	Ann		
Vice President / Member Last Name	(First)	(Middle Name)	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name AVANT CYCLE CAFE Business Phone Number (262) 203-5141
- Address of Premises 234 Broad St Post Office & Zip Code LAKE GENEVA WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

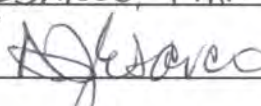
Avant Cycle Cafe

Applicant's Wisconsin Seller's Permit Number	
456 102970 428002	
FEIN Number	
83-2278727	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☒ Class C wine	\$ 100
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 225

pd 4/19/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) ESARCO, Ann	Title / Member President	Date 4.15.2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 19, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>The Candle Mercantile, LLC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)
--	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Doyle</u>	(First) <u>Elizabeth</u>	(Middle Name) <u>Rose</u>
---------------------------------	-----------------------------	------------------------------

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name <u>Doyle</u>	(First) <u>Elizabeth</u>	(Middle Name)
Vice President / Member Last Name <u>Myers</u>	(First) <u>Leigh Ann</u>	(Middle Name)
Secretary / Member Last Name	(First)	(Middle Name)
Treasurer / Member Last Name	(First)	(Middle Name)
Directors / Managers Last Name	(First)	(Middle Name)
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

- Trade Name The Candle Mercantile Business Phone Number 262-203-5557
- Address of Premises 870 W Main St. Post Office & Zip Code Lake Geneva, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Beer & Wine will be consumed throughout the candle studio (including the restroom), outdoor rocking chairs and on tables on the outdoor brick patio. We will have an outdoor cooler for beer/wine. The beer and wine will be stored in the back room, two refrigerators in the studio.

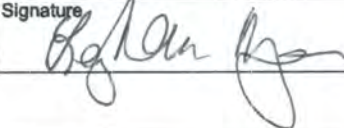
The Candle Mercantile

Applicant's Wisconsin Seller's Permit Number <u>456-1030367646-02</u>	
FEIN Number <u>83-4401693</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ <u>100</u>
☒ Class C wine	\$ <u>100</u>
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ <u>2.5</u>
TOTAL FEE	\$ <u>225</u>

pd 4/12/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Myers, Leigh Ann	Title / Member Member	Date 04/10/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 12, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of } Lake Geneva
☐ Village of }
☒ City of }

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>El Zacatecano LLC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)
---	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Orcelle</u>	(First) <u>Christina</u>	(Middle Name) <u>Marcia</u>	
-----------------------------------	-----------------------------	--------------------------------	--

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name <u>Orcelle</u>	(First) <u>Christina</u>	(Middle Name) <u>Marcia</u>	
Vice President / Member Last Name	(First)	(Middle Name)	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name El Zacatecano I Business Phone Number 812-8054
2. Address of Premises 627/629 Williams St Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Our store is divided into two separate buildings that are attached, in the left side back corner is our storage room where alcohol is stored. It is placed to sell in one of the front brick bridges.

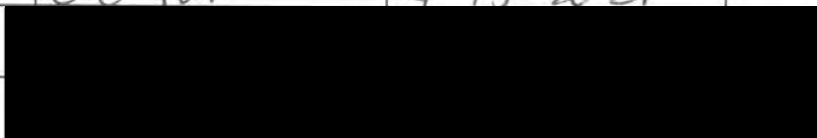
El Zacatecano

Applicant's Wisconsin Seller's Permit Number <u>436-1029214934-02</u>	
FEIN Number <u>84-4651926</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☒ Class C wine	\$ 100
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 225

pd 4/11/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☐ Yes ☒ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Rayelle Christian M</i>	Title / Member <i>owner</i>	Date <i>4-15-2021</i>
Signature <i>Rayelle Christian</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>Apr 19, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth

Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
------------------	---------	---------------	--

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
THE FARM STAND LLC	707 W MAIN ST, LAKE GENEVA, WI

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
Roberts	Daniel	R

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	
Roberts	Roberta	L	
Vice President / Member Last Name	(First)	(Middle Name)	
Roberts	Daniel	R	
Secretary / Member Last Name	(First)	(Middle Name)	
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name THE FARM STAND Business Phone Number 262-263-5844
- Address of Premises 707 W. MAIN ST Post Office & Zip Code LAKE GENEVA, WI 53114
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Alcohol will be sold at the bar and up front by entrance to the left. Sold from shelves. Stored on wine rack in back area for wine. All beer on shelves

The Farmstand

Applicant's Wisconsin Seller's Permit Number 456-1029491732-02	
FEIN Number 89-4526145	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☒ Class C wine	\$ 100
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ (225)

pd 4/8/21

5. Legal description (omit if street address is given on previous page): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3**

☐ Yes ☒ No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.**

☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain**

☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain**

☐ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit?
[phone (608) 266-2776]

☒ Yes ☐ No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement?

☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?

☐ Yes ☒ No

12. Does the applicant owe municipal property taxes, assessments, or other fees?
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

☐ Yes ☒ No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Robert L. Roberts</i>	Title / Member <i>Owner/Pres</i>	Date <i>4/1/21</i>
Signature <i>[Signature]</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of } Lake Geneva
☐ Village of }
☒ City of }

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Flat Iron Tap

Applicant's Wisconsin Seller's Permit Number <u>456-1039433 039-02</u>	
FEIN Number <u>81-5116545</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☒ Class C wine	\$ 100
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 225

pd 4/14/21

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

D+D Restaurant Group, INC

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
<u>Lindsey</u>	<u>John</u>	<u>Sherman</u>

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Wingate</u>	<u>DAVID</u>	<u>JAMES</u>	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

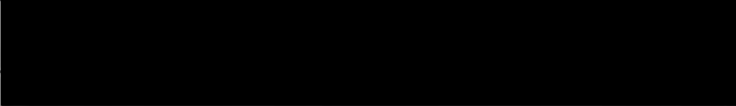
- Trade Name FLAT IRON TAP Business Phone Number 262-812-4064
- Address of Premises 150 Center Street Post Office & Zip Code LAKE GENEVA 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☐ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

FIRST FLOOR, DINING AREA, BAR, COCKTAILS, STAGE IN BASEMENT, BASEMENT COCKTAILS, RECORDS IN BASEMENT

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3.** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Iwingate, David James</i>	Title / Member <i>President</i>	Date <i>4/14/21</i>
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>April 14, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Geneva Theater

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

Plaza Media LLC

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name (First) (Middle Name)
Brannen Shad Anthony

All Officer(s) Director(s) of Corporation and Members / Managers:

President / Member Last Name	(First)	(Middle Name)	
<u>Brannen</u>	<u>Shad</u>	<u>Anthony</u>	
Vice President / Member Last Name	(First)	(Middle Name)	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

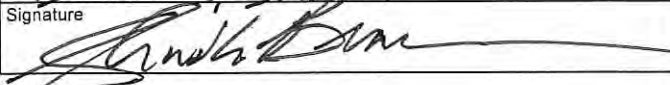
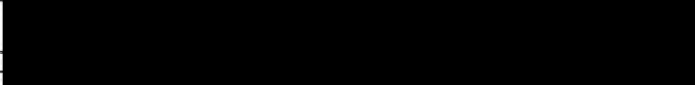
- Trade Name Geneva Theater Business Phone Number 262-240-1362
- Address of Premises 244 Broad St. Post Office & Zip Code Lake Geneva WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Throughout premises, including concessions area, meeting spaces and auditoriums.

Applicant's Wisconsin Seller's Permit Number	
<u>456-1027144852-03</u>	
FEIN Number	
<u>27-2452942</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☒ Class C wine	\$ 100
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 225

pd 4/23

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(**Note:** Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Branen, Sha A	Title / Member President	Date 4/15/21
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk Apr. 123, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>GREAT EGGS BREAKFAST BUNGALOW LLC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>200 COOK STREET #101 LAKE GENEVA WI</u>
---	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>OCHALEK</u>	(First) <u>JUSTIN</u>	(Middle Name) <u>TAYLOR</u>
-----------------------------------	--------------------------	--------------------------------

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name <u>OCHALEK</u>	(First) <u>JUSTIN</u>	(Middle Name) <u>TAYLOR</u>
Vice President / Member Last Name	(First)	(Middle Name)
Secretary / Member Last Name	(First)	(Middle Name)
Treasurer / Member Last Name	(First)	(Middle Name)
Directors / Managers Last Name <u>OCHALEK</u>	(First) <u>PAUL</u>	(Middle Name) <u>DAVID</u>
Directors / Managers Last Name	(First)	(Middle Name)

C. Business Information

- Trade Name GREAT EGGS Business Phone Number 262-812-4077
- Address of Premises 200 COOK STREET #101 Post Office & Zip Code LAKE GENEVA, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) FIRST FLOOR UNIT 101, KITCHEN, DINING ROOM, CLOSET AND OUTDOOR SEATING

Great Eggs

Applicant's Wisconsin Seller's Permit Number <u>456-102961267-02</u>	
FEIN Number <u>396-04-3135</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☒ Class C wine	\$ 100
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 225

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3.** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) OCHALEK, PAUL, D	Title / Member MANAGER	Date 4-13-21
Signature <i>Paul Ochalek</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 15, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

Happy Cafe restaurant inc

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name (First) (Middle Name)
ZHANG MINTING

All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

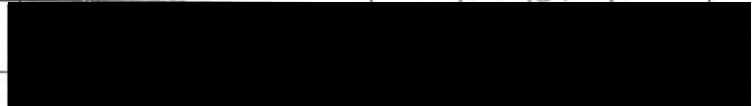
- Trade Name Happy Cafe Business Phone Number 262-248-8181
- Address of Premises 526 Swells St Post Office & Zip Code 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
Restaurant and storage located

Happy Cafe

Applicant's Wisconsin Seller's Permit Number <u>486-1027273310-03</u>	
FEIN Number <u>270069183</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☒ Class C wine	\$ 100
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 225

5. Legal description (omit if street address is given on previous page): in dining room kitchen fridge
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☒ Yes ☐ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <u>Liang Yongzhong</u>	Title / Member <u>owner</u>	Date <u>3/26/2021</u>
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>March 31, 2021</u>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Mama Cimino's

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company
MAMA CIMINO'S LLC

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name (First) (Middle Name)
Kerros Kerry J

All Officer(s) Director(s) of Corporation and Members / Manager(s)

President / Member Last Name	(First)	(Middle Name)	
CIMINO	NICK		
Vice President / Member Last Name	(First)	(Middle Name)	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Mama Cimino's LLC Business Phone Number 262-348-9077
- Address of Premises 131 Wale St Post Office & Zip Code Lake Geneva, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Main Dining Room, Front Desk Area

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☒ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Nick Cimino</i>	Title / Member <i>President</i>	Date <i>May 10, 2021</i>
Signature <i>Nick Cimino</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>May 10, 2021</i>	Date reported to council / board	Date license granted
License number-issued	Date license issued	Signature of Clerk / Deputy Clerk

(Submit to municipal clerk. Read instructions on page 3.)

Wisconsin Department of Revenue

5. Legal description (omit if street address is given on previous page): SEE ABOVE.

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☒ Yes ☐ No

Joshua John Guenser was elected CFO, Secretary and Treasurer of the Company.

Heidi Ann Yohn is appointed as new agent.

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Svenson, Scott T.	Title / Member Manager & CEO	Date 4/14/21
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 16, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Olympic Restaurant

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company Address of Corporation / Limited Liability Company (if different from licensed premises)
MARTINS OLYMPIC RESTAURANT LLC 748 W MAIN ST LAKE GENEVA WI 53147

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name (First) (Middle Name)
ZAVAZETA SOLANJA

All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name OLYMPIC RESTAURANT Business Phone Number 262 248 6341
- Address of Premises 748 W. MAIN ST. Post Office & Zip Code LAKE GENEVA WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

ALL ALCOHOL WILL BE KEPT IN ONE BUILDING (748 MAIN ST.) THE BUILDING CONSIST OF FRONT DINING AREA, STAFF REEF SECTION, KITCHEN, AND BASEMENT. ALCOHOL STORED FOR SALE IS KEPT IN STAFF SECTION UNDER. ALCOHOL INVENTORY STORED IN LOCKED ROOM IN BASEMENT.

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) ZAVALETA YOLANDA	Title / Member MANAGER OWNER	Date 4-27-2021
Signature Yolanda Zavaleta		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 29, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2021 ending: 06/30/2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of Lake Geneva

County of Walworth

Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Sabai Sabai Thai Cuisine

Applicant's Wisconsin Seller's Permit Number <u>456-1030151049-02</u>	
FEIN Number <u>823877988</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ <u>100</u>
☒ Class C wine	\$ <u>100</u>
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>225</u>

red 4/21/21

Agent's Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Sabai Sabai Thai Cuisine</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>306 Center St. Lake Geneva, WI 53147</u>
--	---

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>COX</u>	(First) <u>JIRAPA</u>	(Middle Name) <u>-</u>
-------------------------------	--------------------------	---------------------------

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name <u>Manapa Cox</u>	(First) <u>Jirapa</u>	(Middle Name) <u>-</u>	
Vice President / Member Last Name <u>Brewer</u>	(First) <u>Sumalee</u>	(Middle Name) <u>-</u>	
Secretary / Member Last Name	(First)	(Middle Name)	
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name sabai sabai Thai Cuisine Business Phone Number 262 212 4114

2. Address of Premises 306 Center St Lake Geneva Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

306 center st Lake Geneva WI 53147
in basement, 1st FL and deck.
2nd FL

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Cox JIPAPA	Title / Member VP	Date 4/21/2021
Signature Jinapa Cox		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 21, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Simple Café

Applicant's Wisconsin Seller's Permit Number	
456-1027064/96-03	
FEIN Number	
27-1037204	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☒ Class C wine	\$ 100
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 225

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

Simple Cafe, LLC

All corporations/organizations or limited liability companies applying for liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
Hartz	Thomas	Andrew

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Hartz	Thomas	Andrew	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Hartz	Lori		
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Simple Cafe Business Phone Number 262-248-3556
- Address of Premises 525 Broad St. Post Office & Zip Code Lake Geneva, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

525 Broad St., Basement, Dining Room, Kitchen, patio

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Hartz, Thomas A.</i>	Title / Member <i>Founding Partner</i>	Date <i>April 9, 2021</i>
Signature <i>Thomas A. Hartz</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>April 12, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of } Lake Geneva
☐ Village of }
☒ City of }

County of Walworth Aldermanic Dist. No. N/A
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>RLKL Company Inc</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)
--	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Lei</u>	(First) <u>Ransi</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
-------------------------------	-------------------------	---------------	--

All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>Lei</u>	(First) <u>Ransi</u>	(Middle Name)	
Vice President / Member Last Name <u>Lei</u>	(First) <u>Kelly</u>	(Middle Name)	
Secretary / Member Last Name <u>Lei</u>	(First) <u>Jianming</u>	(Middle Name)	
Treasurer / Member Last Name <u>Lei</u>	(First) <u>Jianming</u>	(Middle Name)	
Directors / Managers Last Name <u>same as president</u>	(First)	(Middle Name)	
Directors / Managers Last Name <u>same as VP</u>	(First)	(Middle Name)	

C. Business Information

- Trade Name Suwings Chinese Restaurant Business Phone Number 262-248-1178
- Address of Premises 743 North St. Post Office & Zip Code Lake Geneva, WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
Bar, Backroom, Dining Room, Office, Kitchen, sidewalk

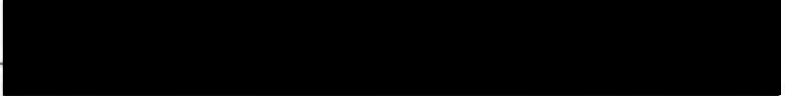
Suwings Chinese

Applicant's Wisconsin Seller's Permit Number <u>456-1029849437</u>	
FEIN Number <u>84-4884871</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☒ Class C wine	\$ 100
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ <u>225</u>

pd 4/19/21

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☐ Yes ☒ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Lei Jiaoming</i>	Title / Member <i>Secretary</i>	Date <i>4/10/21</i>
Signature <i>[Signature]</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>April 19, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company ☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
Ovalle - Perez LLC	820 Williams St Lake Geneva

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)
Perez	Cynthia	

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name	(First)	(Middle Name)
Ovalle	Eric	
President / Member Last Name	(First)	(Middle Name)
Perez	Francisco	H
Secretary / Member Last Name	(First)	(Middle Name)
Treasurer / Member Last Name	(First)	(Middle Name)
Directors / Managers Last Name	(First)	(Middle Name)
Perez	Cynthia	E
Directors / Managers Last Name	(First)	(Middle Name)

Taqueria El Gallo De Oro

Applicant's Wisconsin Seller's Permit Number	
406-1030365273	
FEIN Number	
83-1709227	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☒ Class C wine	\$ 100
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 225

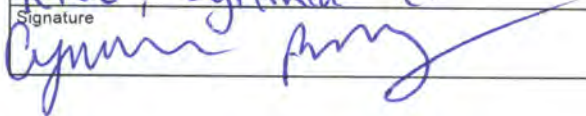
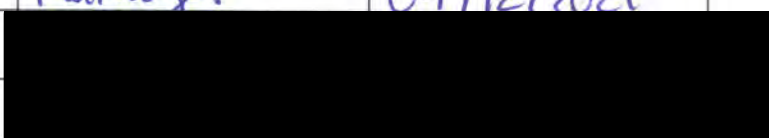
pd 4113

C. Business Information

- Trade Name Taqueria El Gallo De Oro Business Phone Number 202 729 4055
- Address of Premises 820 Williams St Post Office & Zip Code Lake Geneva WI 53147
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
We will serve drinks in our outdoor patio, bar/dining area.
We will store our product in our back storage room.

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Perez, Cynthia E.	Title / Member Manager	Date 04/12/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 13, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Lake Geneva

County of Walworth Aldermanic Dist. No. (if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company: Tristan Crist Magic Theatre LLC Address of Corporation / Limited Liability Company (if different from licensed premises): 100 N. Edwards Blvd. Lake Geneva WI

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name: Christ (First): Tristan (Middle Name): Samuel

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name: Tristan Crist Magic Theatre Business Phone Number: (262) 248-0505
2. Address of Premises: 100 N. Edwards Blvd. Post Office & Zip Code: Lake Geneva 53147
3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 5,000 sq foot

theatre including lobby, storage closets, stage, seating area and dressing rooms as well as a small outdoor patio area.

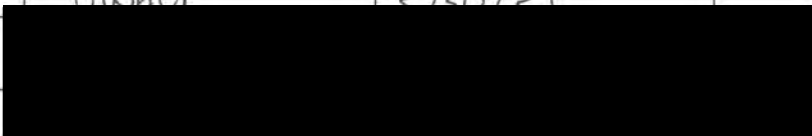
Tristan Crist Magic Theatre

Applicant's Wisconsin Seller's Permit Number	
456-1029715309-02	
FEIN Number	
82-4292838	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☒ Class C wine	\$ 100
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 225

pl 4/1

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Christ, Tristan, S</i>	Title / Member <i>owner</i>	Date <i>2/30/21</i>
Signature <i>[Signature]</i>		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>April 1, 2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of } Lake Geneva
☐ Village of }
☒ City of }

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☒ Limited Liability Company
☐ Partnership ☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company

Mangiamani Italiano LLC

All corporations/organizations or limited liability companies applying for a liquor license must appoint an agent.

Agent Last Name	(First)	(Middle Name)
<u>Webber</u>	<u>Eric</u>	<u>Lee</u>

All Officer(s) Director(s) of Corporation and Members / Managers

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Webber</u>	<u>Eric</u>	<u>Lee</u>	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name Cuoco Pazzo Eatz & Drinkz Business Phone Number 262-812-4050
2. Address of Premises 393 N. Edwards Blvd Post Office & Zip Code Lake Geneva 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

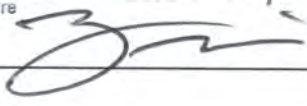
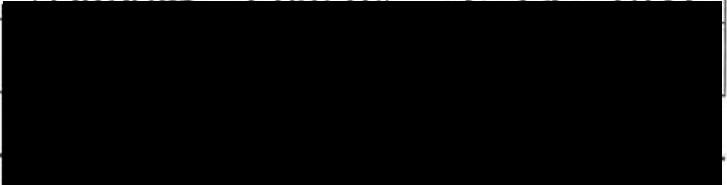
Patio, Basement, Bar, Dining Room, Party Room, Gazebo, Dry Storage
Beer & Wine cooler

Cuoco Pazzo Eatz & Drinkz

Applicant's Wisconsin Seller's Permit Number	
<u>456-1029545885-02</u>	
FEIN Number	
<u>47-2671461</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ 100
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ 500
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3**. ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Eric Webber, Eric L	Title / Member Owner / Manager	Date 4-21-2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 21, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Harry's Cafe

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2021 ending: 06 30 2022
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: ☐ Town of } Lake Geneva
☐ Village of }
☒ City of }

County of Walworth Aldermanic Dist. No. _____
(if required by ordinance)

Check one: ☐ Individual ☐ Limited Liability Company
☐ Partnership ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

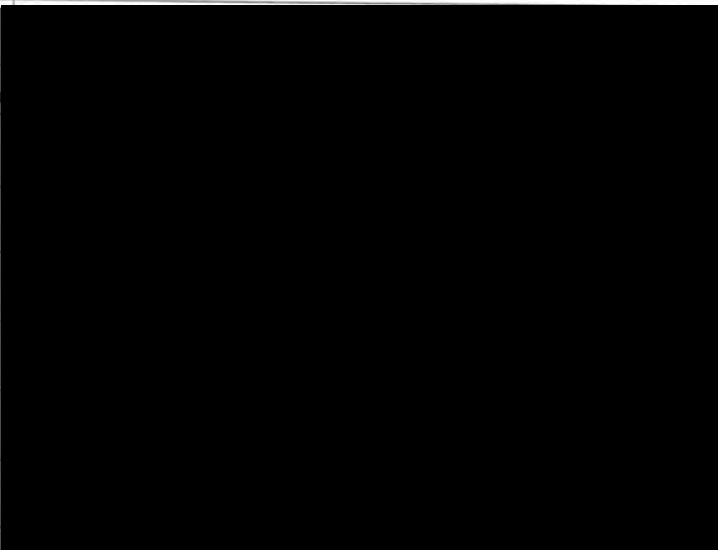
Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Harrys Cafe &Place Inc</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>808 Main Street Lake Geneva WI</u>
--	---

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Chironis</u>	(First) <u>James</u>	(Middle Name) <u>G</u>
------------------------------------	-------------------------	---------------------------

All Officer(s) Director(s) of Corporation and Members / Manager

President / Member Last Name <u>Chironis</u>	(First) <u>James</u>	(Middle Name) <u>G</u>
Vice President / Member Last Name <u>Chironis</u>	(First) <u>Harry</u>	(Middle Name) <u>S</u>
Secretary / Member Last Name <u>Chironis</u>	(First) <u>Harry</u>	(Middle Name) <u>S</u>
Treasurer / Member Last Name <u>Chironis</u>	(First) <u>James</u>	(Middle Name) <u>G</u>
Directors / Managers Last Name	(First)	(Middle Name)
Directors / Managers Last Name	(First)	(Middle Name)



C. Business Information

1. Trade Name Harrys Cafe Business Phone Number 262-248-3494
2. Address of Premises 808 Main Street Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes ☒ No ☐

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

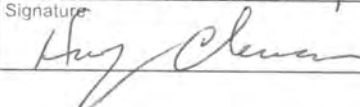
One story brick/records in office, storage (office-bar-basement-cafe kitchen-sidewalk

Applicant's Wisconsin Seller's Permit Number <u>456000060124103</u>	
FEIN Number <u>39150551</u>	
TYPE OF LICENSE REQUESTED	FEE
☐ Class A beer	\$
☒ Class B beer	\$ <u>100</u>
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☒ Class B liquor	\$ <u>500</u>
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625</u>

41221

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** ☐ Yes ☒ No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** ☐ Yes ☒ No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** ☐ Yes ☒ No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** ☒ Yes ☐ No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No
12. Does the applicant owe municipal property taxes, assessments, or other fees? ☐ Yes ☒ No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) Chivonis Harry S	Title / Member SECRETARY	Date 04/02/2021
Signature 		

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk April 12, 2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

LEASE

THIS INDENTURE, made this 1 day of June A.D., 20210, by and between THE CITY OF LAKE GENEVA, of the County of Walworth, and State of Wisconsin, Lessor, and LAKE GENEVA CHAMBER OF COMMERCE, INC., a Wisconsin non-profit organization, doing business as VISIT Lake Geneva ~~also known as THE GREATER LAKE GENEVA ASSOCIATION OF COMMERCE AND INDUSTRY~~, Lessee:

WITNESSETH, That the said lessor does hereby lease, demise and let unto the said lessee the following described premises situated in Walworth County, Wisconsin, to-wit:

Commencing at a point in the East line of Lake Street of the City of Lake Geneva, Walworth County, Wisconsin, that is S. 33° 30' E., 54.0 feet, from the centerline of the outlet stream of Lake Geneva, thence S. 33° 30' E., 112.65 feet along said street line, thence N. 56° 30' E., 73.28 feet, thence N. 24° 22' W., 82.16 feet, thence S. 76° 34' W., 91.89 feet to the place of beginning.

IT IS EXPRESSLY UNDERSTOOD by the parties hereto that the one-story brick building presently located on the above described premises may be removed by the lessee at any time that this Lease becomes ineffective or inoperative for any reason, and further that this building shall be considered personal property of ~~the Chamber of Commerce~~ VISIT Lake Geneva and not part of the real estate above described.

TO HOLD for the term of ten (10) years from the 1 day of May, A.D., 20201, at a rental of One Dollar (\$1.00) per annum, payable in installments of One Dollar (\$1.00) annually in advance, on the _____ day of _____ each year. The said premises are to be used for the purposes of a visitor information center ~~Chamber of Commerce office building~~ or any other lawful purpose.

~~IT IS FURTHER SPECIFICALLY UNDERSTOOD AND AGREED by the parties hereto that the lessee may assign this Lease as security for a loan to the CITIZENS NATIONAL BANK of Lake Geneva, Wisconsin, or its assigns.~~

The lessee agrees to pay said rent to the lessor, or its assigns, at the several times above stated, during the continuance of this lease; to comply with all laws, ordinances, rules and regulations relative to cleaning streets, gutters, sidewalks or alleys fronting or belonging to said premises, and any and all lawful orders, rules and regulations of proper health officers; to remove all ashes and rubbish from said premises within one month prior to termination of lease, and to quit and deliver up possession thereof peacefully and quietly to the lessor or its legal representatives, at the expiration of said term.

The lessor and lessee agree to the list of expenses and responsibilities as outlined and assigned on Exhibit "A" as attached to this Lease. ~~It is agreed that the lessee shall pay for all water furnished to the lessee, and the lessee shall pay for all electric current furnished to the lessee on said premises.~~

IT IS UNDERSTOOD AND AGREED by and between the parties aforesaid that the lessor or its legal representatives may at all proper times enter said premises for the purpose of viewing the same or to exhibit same to subsequent tenant or purchaser.

IT IS FURTHER UNDERSTOOD AND AGREED that if the lessee, or its assigns, shall fail to pay the rent at the times above stated, or shall use said premises or any part thereof contrary to the conditions herein contained, or shall violate any of the terms or conditions hereof, or shall willfully or maliciously do injury to the same, this lease shall, at the option of the lessor, be void as to the lessee, and

the lessor, or its legal representatives, shall be entitled to the immediate possession of said premises, without hindrance or delay, and to a recovery of all damages sustained by the acts of the lessee.

And the said lessee further covenants and agrees to pay and discharge all reasonable costs, attorney's fees and expenses that shall be made and incurred by the said lessor in enforcing the covenants and agreements of this lease.

And the covenants herein contained shall bind the parties and their respective successors and assigns, and the term "lessor" and "lessee", when used herein, shall be taken to mean either the singular or the plural, as the context may require.

IN WITNESS WHEREOF said parties have hereunto set their hands and seals the day and year first above written.

IN PRESENCE OF:

THE CITY OF LAKE GENEVA

Charlene Klein, Mayor

ATTEST: _____
Lana Kropf, City Clerk

IN PRESENCE OF:

President

Secretary

LAKE GENEVA CHAMBER OF COMMERCE, INC.

d/b/a VISIT Lake Geneva

David Sekeres, Chairperson

ATTEST: _____
Stephanie Klett, President & CEO

STATE OF WISCONSIN)
) SS
WALWORTH COUNTY)

Personally came before me, this 1 day of June A.D., 20201. CHARLENE KLEIN, Mayor, and LANA KROPF, City Clerk, of the above named CITY OF LAKE GENEVA, to me known to be the persons who executed the foregoing instrument, and to me known to be such Mayor and City Clerk of said City of Lake Geneva, and acknowledged that they executed the foregoing instrument as such officers as the deed of said City of Lake Geneva, by its authority.

Notary Public, Walworth County, Wis.
My Commission Expires:_____

STATE OF WISCONSIN)
) SS
WALWORTH COUNTY)

Personally came before me, this 1 day of June A.D., 20201. David Sekeres, ChairpersonXXXXXXXX, President, and Stephanie Klett, President & CEO XXXXXXXXXXXX, Secretary, of the above named LAKE GENEVA CHAMBER OF COMMERCE, INC., d/b/a VISIT Lake Geneva to me known to be the persons who executed the foregoing instrument, and to me known to be such Chairperson and President & CEO President and Secretary of said corporation, and acknowledged that they executed the foregoing instrument as such officers as the deed of said Corporation, by its authority.

Notary Public, Walworth County, Wis.
My Commission Expires:_____

ASSIGNMENT

The ~~LAKE GENEVA CHAMBER OF COMMERCE, INC.~~, by its President, ~~XXXXXXXXXX~~, and its Secretary, ~~XXXXXXXXXX~~, does, hereby, in consideration of a promissory note and the funds advanced thereupon, assign to ~~CITIZENS NATIONAL BANK~~ of Lake Geneva all its rights and privileges under a Lease Between the ~~CITY OF LAKE GENEVA~~ and ~~LAKE GENEVA CHAMBER OF COMMERCE, INC.~~, for that period of time until the note referred to above is paid in full.

The Lease is attached hereto and incorporated herein by reference.

DATED at Lake Geneva, Wisconsin, this _____ day of _____ A. D., 2020

LAKE GENEVA CHAMBER OF COMMERCE, INC.

By: _____, President

Printed Name Goes Here

Attest: _____, Secretary

IN PRESENCE OF:

Exhibit “A”

Designation of responsibilities for the Visitor Center Building (201 Wrigley Drive) lease agreement:

Water and sewer charges for the entire building (offices and public restrooms) are paid by the City of Lake Geneva.

The City of Lake Geneva is responsible for the cleaning and maintenance of the public restrooms attached to the Visitor Center.

Any repairs to the interior or exterior of the building (excluding the public restroom portion) are the responsibility of VISIT Lake Geneva.

Any landscaping, brush removal, etc. immediately around the building is the responsibility of Visit Lake Geneva.

Sidewalk snow removal in front of the Visitor Center is responsibility of Visit Lake Geneva

Snowplowing of the parking lot directly north of the Visitor Center building lot is the responsibility of the City of Lake Geneva.

Any other utility bills related to the building are the responsibility of Visit.

- Gas
- Electric
- Phone
- Internet
- Etc.

LEASE

THIS INDENTURE, made this 14th day of June A.D., 2021, by and between THE CITY OF LAKE GENEVA, of the County of Walworth, and State of Wisconsin, Lessor, and LAKE GENEVA CHAMBER OF COMMERCE, INC., a Wisconsin non-profit organization, doing business as VISIT Lake Geneva Lessee:

WITNESSETH, That the said lessor does hereby lease, demise and let unto the said lessee the following described premises situated in Walworth County, Wisconsin, to-wit:

Commencing at a point in the East line of Lake Street of the City of Lake Geneva, Walworth County, Wisconsin, that is S. 33° 30' E., 54.0 feet, from the centerline of the outlet stream of Lake Geneva, thence S. 33° 30' E., 112.65 feet along said street line, thence N. 56° 30' E., 73.28 feet, thence N. 24° 22' W., 82.16 feet, thence S. 76° 34' W., 91.89 feet to the place of beginning.

IT IS EXPRESSLY UNDERSTOOD by the parties hereto that the one-story brick building presently located on the above described premises may be removed by the lessee at any time that this Lease becomes ineffective or inoperative for any reason, and further that this building shall be considered personal property of VISIT Lake Geneva and not part of the real estate above described.

TO HOLD for the term of ten (10) years from the 1st day of May, A.D., 2021, at a rental of One Dollar (\$1.00) per annum, payable in installments of One Dollar (\$1.00) annually in advance, on the 1st day of May each year. The said premises are to be used for the purposes of a visitor information center or any other lawful purpose.

The lessee agrees to pay said rent to the lessor, or its assigns, at the several times above stated, during the continuance of this lease; to comply with all laws, ordinances, rules and regulations relative to cleaning streets, gutters, sidewalks or alleys fronting or belonging to said premises, and any and all lawful orders, rules and regulations of proper health officers; to remove all ashes and rubbish from said premises within one month prior to termination of lease, and to quit and deliver up possession thereof peacefully and quietly to the lessor or its legal representatives, at the expiration of said term.

The lessor and lessee agree to the list of expenses and responsibilities as outlined and assigned on **Exhibit "A"** as attached to this Lease.

IT IS UNDERSTOOD AND AGREED by and between the parties aforesaid that the lessor or its legal representatives may at all proper times enter said premises for the purpose of viewing the same or to exhibit same to subsequent tenant or purchaser.

IT IS FURTHER UNDERSTOOD AND AGREED that if the lessee, or its assigns, shall fail to pay the rent at the times above stated, or shall use said premises or any part thereof contrary to the conditions herein contained, or shall violate any of the terms or conditions hereof, or shall willfully or maliciously do injury to the same, this lease shall, at the option of the lessor, be void as to the lessee, and the lessor, or its legal representatives, shall be entitled to the immediate possession of said premises, without hindrance or delay, and to a recovery of all damages sustained by the acts of the lessee.

And the said lessee further covenants and agrees to pay and discharge all reasonable costs, attorney's fees and expenses that shall be made and incurred by the said lessor in enforcing the covenants and agreements of this lease.

And the covenants herein contained shall bind the parties and their respective successors and assigns, and the term “lessor” and “lessee”, when used herein, shall be taken to mean either the singular or the plural, as the context may require.

IN WITNESS WHEREOF said parties have hereunto set their hands and seals the day and year first above written.

IN PRESENCE OF:

IN PRESENCE OF:

THE CITY OF LAKE GENEVA

Charlene Klein, Mayor

ATTEST:_____

Lana Kropf, City Clerk

LAKE GENEVA CHAMBER OF COMMERCE, INC.

d/b/a VISIT Lake Geneva

David Sekeres, Chairperson ,

ATTEST:_____

Stephanie Klett, President & CEO ,

STATE OF WISCONSIN)
) SS
WALWORTH COUNTY)

Personally came before me, this 14 day of June A.D., 2021. CHARLENE KLEIN, Mayor, and LANA KROPF, City Clerk, of the above named CITY OF LAKE GENEVA, to me known to be the persons who executed the foregoing instrument, and to me known to be such Mayor and City Clerk of said City of Lake Geneva, and acknowledged that they executed the foregoing instrument as such officers as the deed of said City of Lake Geneva, by its authority.

Notary Public, Walworth County, Wis.
My Commission Expires:_____

STATE OF WISCONSIN)
) SS
WALWORTH COUNTY)

Personally came before me, this 14 day of June A.D., 2021. David Sekeres, Chairperson, and Stephanie Klett, President & CEO , of the above named LAKE GENEVA CHAMBER OF COMMERCE, INC., d/b/a VISIT Lake Geneva to me known to be the persons who executed the foregoing instrument, and to me known to be such Chairperson and President & CEO , and acknowledged that they executed the foregoing instrument as such officers as the deed of said Corporation, by its authority.

Notary Public, Walworth County, Wis.
My Commission Expires:_____

Exhibit “A”

Designation of responsibilities for the Visitor Center Building (201 Wrigley Drive) lease agreement:

Water and sewer charges for the entire building (offices and public restrooms) are paid by the City of Lake Geneva.

The City of Lake Geneva is responsible for the cleaning and maintenance of the public restrooms attached to the Visitor Center.

Any repairs to the interior or exterior of the building (excluding the public restroom portion) are the responsibility of VISIT Lake Geneva.

Any landscaping, brush removal, etc. immediately around the building is the responsibility of Visit Lake Geneva.

Sidewalk snow removal in front of the Visitor Center is responsibility of Visit Lake Geneva

Snowplowing of the parking lot directly north of the Visitor Center building lot is the responsibility of the City of Lake Geneva.

Any other utility bills related to the building are the responsibility of Visit.

- Gas
- Electric
- Phone
- Internet
- Etc.

APPLICATION AND CERTIFICATE FOR PAYMENT

Invoice #: 27304

To City of Lake Geneva
Owner: 626 Geneva Street

Project: 4453- The Riviera

Application No. : 8

Distribution to :
☐ Owner
☐ Architect
☐ Contractor
☐

Lake Geneva, WI 53147

Period To: 5/28/2021

From Contract: MSI General Corporation
PO Box 7
Oconomowoc, WI 53066

Via Architect: Anne E. Krogstad, AIA

Project Nos: 4453

Contract For: Building Improvements

Contract

CONTRACTOR'S APPLICATION FOR PAYMENT

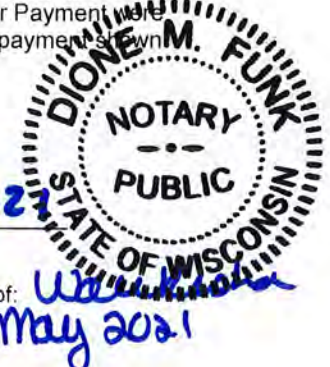
Application is made for payment, as shown below, in connection with the Contract.
Continuation Sheet is attached.

1. Original Contract Sum	\$1,906,306.00
2. Net Change By Change Order	\$0.00
3. Contract Sum To Date	\$1,906,306.00
4. Total Completed and Stored To Date	\$1,868,136.00
5. Retainage:	
a. 0.00% of Completed Work	\$0.00
b. 0.00% of Stored Material	\$0.00
Total Retainage	\$0.00
6. Total Earned Less Retainage	\$1,868,136.00
7. Less Previous Certificates For Payments	\$1,767,413.55
8. Current Payment Due	\$100,722.45
9. Balance To Finish, Plus Retainage	\$38,170.00

CHANGE ORDER SUMMARY	Additions	Deductions
Total changes approved in previous months by Owner	\$0.00	\$0.00
Total Approved this Month	\$0.00	\$0.00
TOTALS	\$0.00	\$0.00
Net Changes By Change Order	\$0.00	

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information, and belief, the work covered by this Application for Payment has been completed in accordance with the Contract Documents. That all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: MSI General Corporation

By: [Signature] Date: 5-26-21State of: Wisconsin
Subscribed and sworn to before me this 26th
Notary Public: Dione M. Funk
My Commission expires: 08/23/21County of: Waushara
day of May 2021

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information, and belief, the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED \$ 100,722.45

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

ARCHITECT:

By: [Signature] Date: 5/26/21

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment, and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

CONTINUATION SHEET

Application and Certification for Payment, containing

Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Application No. : 8

Application Date : 05/28/21

To: 05/28/21

Architect's Project No.: 4453

Invoice # : 27304

Contract : 4453- The Riviera

A Item No.	B Description of Work	C Scheduled Value	D Work Completed		F Materials Presently Stored (Not in D or E)	G Total Completed and Stored To Date (D+E+F)	H % (G / C)	I Balance To Finish (C-G)	Retainage
			From Previous Application (D+E)	This Period In Place					
1	The Riviera	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2001	Change Order #1	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2002	Change Order #2	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2003	Change Order #3	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2004	Change Order #4	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2005	Change Order #5	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2006	Change Order #6	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2007	Change Order #7	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2003-106	CO3 Supervision	1,700.00	1,700.00	0.00	0.00	1,700.00	100.00%	0.00	
2003-185	CO3 Insurance	164.00	164.00	0.00	0.00	164.00	100.00%	0.00	
2003-190	CO3 Project Management	625.00	625.00	0.00	0.00	625.00	100.00%	0.00	
2003-200	CO3 Marine Survey	9,500.00	9,500.00	0.00	0.00	9,500.00	100.00%	0.00	
2003-244	CO3 Asbestos Testing	4,600.00	4,600.00	0.00	0.00	4,600.00	100.00%	0.00	
2004-106	CO4 Supervision	49,271.00	47,996.00	1,275.00	0.00	49,271.00	100.00%	0.00	
2004-109	CO4 Pavers Protection - Allowance	7,500.00	6,750.00	0.00	0.00	6,750.00	90.00%	750.00	
2004-110	CO4 State Permits including Historical Review	16,251.00	12,000.00	0.00	0.00	12,000.00	73.84%	4,251.00	
2004-112	CO4 Construction Electric	6,999.00	6,027.00	0.00	0.00	6,027.00	86.11%	972.00	
2004-113	CO4 Temp Heat - Allowance	15,000.00	14,369.00	0.00	0.00	14,369.00	95.79%	631.00	
2004-114	CO4 Winter Conditions - Allowance	2,001.00	1,500.00	0.00	0.00	1,500.00	74.96%	501.00	
2004-117	CO4 Job Trailer	1,800.00	1,800.00	0.00	0.00	1,800.00	100.00%	0.00	
2004-118	CO4 Dumpsters	6,050.00	5,552.00	0.00	0.00	5,552.00	91.77%	498.00	
2004-121	CO4 General Cleaning	10,500.00	10,500.00	0.00	0.00	10,500.00	100.00%	0.00	
2004-122	CO4 Final Cleaning	8,499.00	8,499.00	0.00	0.00	8,499.00	100.00%	0.00	
2004-125	CO4 Temp Fence	6,000.00	5,050.00	0.00	0.00	5,050.00	84.17%	950.00	
2004-126	CO4 Temp Storage Trailers	2,001.00	1,500.00	0.00	0.00	1,500.00	74.96%	501.00	
2004-127	CO4 Temp Railings	1,500.00	1,125.00	0.00	0.00	1,125.00	75.00%	375.00	
2004-129	CO4 Temp Toilets	600.00	530.00	0.00	0.00	530.00	88.33%	70.00	
2004-130	CO4 Knox Box	750.00	750.00	0.00	0.00	750.00	100.00%	0.00	
2004-133	CO4 Reproduction	1,002.00	977.00	0.00	0.00	977.00	97.50%	25.00	
2004-135	CO4 UPS - Allowance	501.00	476.00	0.00	0.00	476.00	95.01%	25.00	
2004-137	CO4 Barriers & Enclosures	3,300.00	3,300.00	0.00	0.00	3,300.00	100.00%	0.00	
2004-138	CO4 Street Cleaning/Snow Removal	6,000.00	4,500.00	0.00	0.00	4,500.00	75.00%	1,500.00	

CONTINUATION SHEET

Application and Certification for Payment, containing

Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Application No. : 8

Application Date : 05/28/21

To: 05/28/21

Architect's Project No.: 4453

Invoice # : 27304

Contract : 4453- The Riviera

A Item No.	B Description of Work	C Scheduled Value	D Work Completed		F Materials Presently Stored (Not in D or E)	G Total Completed and Stored To Date (D+E+F)	H % (G / C)	I Balance To Finish (C-G)	Retainage
			From Previous Application (D+E)	This Period In Place					
2004-139	CO4 Scaffolding/Shoring	153,380.00	146,872.00	0.00	0.00	146,872.00	95.76%	6,508.00	
2004-143	CO4 Temp Walk-off Mats	1,002.00	750.00	0.00	0.00	750.00	74.85%	252.00	
2004-144	CO4 Finishes Protection - Allowance	4,002.00	3,279.00	0.00	0.00	3,279.00	81.93%	723.00	
2004-146	CO4 As-Built CD's	1,500.00	750.00	0.00	0.00	750.00	50.00%	750.00	
2004-155	CO4 Job Sign	1,500.00	1,500.00	0.00	0.00	1,500.00	100.00%	0.00	
2004-156	CO4 Temp Signage	750.00	50.00	0.00	0.00	50.00	6.67%	700.00	
2004-185	CO4 Insurance	16,683.00	16,683.00	0.00	0.00	16,683.00	100.00%	0.00	
2004-187	CO4 Structural Steel Design	7,500.00	6,600.00	0.00	0.00	6,600.00	88.00%	900.00	
2004-190	CO4 Project Management	26,000.00	25,740.00	0.00	0.00	25,740.00	99.00%	260.00	
2004-243	CO4 Demolition	25,000.00	25,000.00	0.00	0.00	25,000.00	100.00%	0.00	
2004-400	CO4 Masonry Tuckpointing	309,701.00	309,701.00	0.00	0.00	309,701.00	100.00%	0.00	
2004-500	CO4 Structural Steel - Fabrications	8,000.00	2,444.00	3,800.00	0.00	6,244.00	78.05%	1,756.00	
2004-600	CO4 Carpentry	8,000.00	0.00	8,000.00	0.00	8,000.00	100.00%	0.00	
2004-750	CO4 Roofing Clay Tile/Conc Tile	488,855.00	488,855.00	0.00	0.00	488,855.00	100.00%	0.00	
2004-800	CO4 Glass & Glazing	470,040.00	398,246.00	71,794.00	0.00	470,040.00	100.00%	0.00	
2004-900	CO4 Painting	15,000.00	15,000.00	0.00	0.00	15,000.00	100.00%	0.00	
2005-106	CO5 Supervision Savings from Seawall/ACM Surveys	-630.00	-630.00	0.00	0.00	-630.00	100.00%	0.00	
2005-145	CO5 Builders Risk Certificate	1,595.00	1,595.00	0.00	0.00	1,595.00	100.00%	0.00	
2005-800	CO5 Glass & Glazing - Net Change	-3,755.00	-3,755.00	0.00	0.00	-3,755.00	100.00%	0.00	
2006-100	CO6 Credit Unused Project Requirements To Date	-18,101.00	-18,101.00	0.00	0.00	-18,101.00	100.00%	0.00	
2006-750	CO6 Credit Unused Roof Underlayment	-1,710.00	-1,710.00	0.00	0.00	-1,710.00	100.00%	0.00	
2007-400	CO7 Masonry Credit Not Lowering Windows etc....	-58,723.00	-58,723.00	0.00	0.00	-58,723.00	100.00%	0.00	
2007-800	CO7 Credit Not Lowering Windows	-15,732.00	-15,732.00	0.00	0.00	-15,732.00	100.00%	0.00	
2003-9996	CO3 Perf Bond	820.00	820.00	0.00	0.00	820.00	100.00%	0.00	
2003-9999	CO3 Contractors Fee	1,327.00	1,327.00	0.00	0.00	1,327.00	100.00%	0.00	
2004-1520	CO4 Plumbing	5,000.00	4,317.00	0.00	0.00	4,317.00	86.34%	683.00	
2004-1600	CO4 Electrical	5,000.00	1,300.00	0.00	0.00	1,300.00	26.00%	3,700.00	
2004-9996	CO4 Performance Bond	32,100.00	32,100.00	0.00	0.00	32,100.00	100.00%	0.00	
2004-9997	CO4 Arch/Engineering	101,546.00	98,500.00	3,046.00	0.00	101,546.00	100.00%	0.00	
2004-9998	CO4 Contingency	169,244.00	161,496.00	0.00	0.00	161,496.00	95.42%	7,748.00	
2004-9999	CO4 Contractor's Fee	157,058.00	146,064.00	7,853.00	0.00	153,917.00	98.00%	3,141.00	

CONTINUATION SHEET

Page 4 of 4

Application and Certification for Payment, containing
Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Application No. : 8

Application Date : 05/28/21

To: 05/28/21

Architect's Project No.: 4453

Invoice # : 27304

Contract : 4453- The Riviera

A Item No.	B Description of Work	C Scheduled Value	D	E	F	G	% (G / C)	H	I
			Work Completed		Materials Presently Stored (Not in D or E)	Total Completed and Stored To Date (D+E+F)		Balance To Finish (C-G)	Retainage
			From Previous Application (D+E)	This Period In Place					
2006-9998	CO6 Credit Unused Contingency	-108,000.00	-108,000.00	0.00	0.00	-108,000.00	100.00%	0.00	
2008-9999	CO8 Credit GC Savings	-59,760.00	-59,760.00	0.00	0.00	-59,760.00	100.00%	0.00	
									</

WAIVER OF LIEN

May 28, 2021

For value received, we hereby waive all rights and claims for lien onland and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corporation contractor,
for building improvements at The Riviera – PHASE I

same being situated in Walworth county, described as

The Riviera
812 Wrigley Drive
Lake Geneva, WI

for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, to date thru invoice #27304, subject to payment of same.

MSI General Corporation

Susan C. Butler

Susan C. Butler,
Executive Vice President - CFO

4453

PARTIAL WAIVER OF LIEN

DATE:

MAY 11 2001

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for CITY OF LAKE GENEVA owner,
by MSI General Corporation contractor,
for CRUISE CRUIZING Type of work,
same being situated in Wauwatosa County, State of Wisconsin, described as

RIVIERA

812 WAIGLER DRIVE

LAKE GENEVA, WI 53147

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name:

Ackman Construction

Signature: (Officer of the Company)

Robert S. Ackman

Title

Comptroller

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
 COUNTY)

PROJECT:

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

11 day of May, 2021

Notary Public, State of Wisconsin

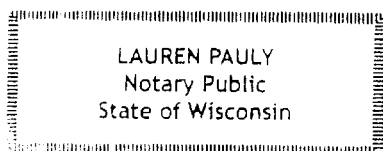
My Commission Expires: 06-22-2024

(Company Name)

BY:
Signature (Officer of Company)

Title:

PLEASE HAVE NOTARIZED



**FINAL
WAIVER OF LIEN
LABOR AND MATERIALS**

May 11, 2021

200396

STATE OF MISSOURI
COUNTY OF ST. LOUIS ,

To All Whom it may Concern:

Whereas, we the undersigned, WINCO WINDOW COMPANY, INC. has been employed by ACKMAN GLASS & MIRROR to furnish ALUMINUM WINDOWS for the building known as RIVIERA 2ND RELEASE for FIFTY SIX THOUSAND EIGHT HUNDRED FIFTY SEVEN AND 00/100, do hereby waive and release any and all lien, and claim or right to lien on said above described building and premises under the Statutes of the State of WISCONSIN relating to Mechanics' Liens, on account of labor or materials, or both, furnished by the undersigned to or on account of the said ACKMAN GLASS & MIRROR.

WINCO WINDOW

M. Elia Macon
check Mfr.

APPLICATION AND CERTIFICATE FOR PAYMENT

Invoice #: 27303

To City of Lake Geneva
Owner: 626 Geneva StreetProject: 4453A- The Riviera Phase II - Interior
Remodel & MEP Work

Application No.: 7

Distribution to:

☐ Owner
☐ Architect
☐ Contractor
☐
☐

Lake Geneva, WI 53147

Period To: 5/28/2021

From Contracto MSI General Corporation
PO Box 7

Via Architect: Anne N Krogstad, AIA

Oconomowoc, WI 53066

Project Nos: 4453A

Contract For: Phase II-Interior Remodel/MEPs

Contract

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract.
Continuation Sheet is attached.

1. Original Contract Sum	\$4,424,460.00
2. Net Change By Change Order	\$0.00
3. Contract Sum To Date	\$4,424,460.00
4. Total Completed and Stored To Date	\$4,339,798.00
5. Retainage:	
a. 0.00% of Completed Work	\$0.00
b. 0.00% of Stored Material	\$0.00
Total Retainage	\$0.00
6. Total Earned Less Retainage	\$4,339,798.00
7. Less Previous Certificates For Payments	\$3,551,032.55
8. Current Payment Due	\$788,765.45
9. Balance To Finish, Plus Retainage	\$84,662.00

CHANGE ORDER SUMMARY	Additions	Deductions
Total changes approved in previous months by Owner	\$0.00	\$0.00
Total Approved this Month	\$0.00	\$0.00
TOTALS	\$0.00	\$0.00
Net Changes By Change Order	\$0.00	

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information, and belief, the work covered by this Application for Payment has been completed in accordance with the Contract Documents. That all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: MSI General Corporation

By: Susan Butler Date: 5-26-21State of: Wisconsin
Subscribed and sworn to before me this 26th
Notary Public: Dione M. Funk
My Commission expires: 08/03/21County of: Waukesha
day of May, 2021

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information, and belief, the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED \$ 788,765.45

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

ARCHITECT:

By: Anne Krogstad Date: 5-26-21

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment, and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

CONTINUATION SHEET

Application and Certification for Payment, containing

Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Application No. : 7

Application Date : 05/28/21

To: 05/28/21

Architect's Project No.: 4453A

Invoice # : 27303

Contract : 4453A- The Riviera Phase II - Interior Remodel & MEP Work

A Item No.	B Description of Work	C Scheduled Value	D Work Completed		F Materials Presently Stored (Not in D or E)	G Total Completed and Stored To Date (D+E+F)	H % (G / C)	I Balance To Finish (C-G)	Retainage
			From Previous Application (D+E)	This Period In Place					
1	The Riviera Phase II - Interior Remodel & MEP Work	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2001	Change Order #1	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2002	Change Order #2	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2003	Change Order #3	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2004	Change Order #4	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2005	Change Order #5	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2006	Change Order #6	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	
2001-106	CO1 Supervision	100,700.00	97,375.00	3,325.00	0.00	100,700.00	100.00%	0.00	
2001-110	CO1 State Permit Including Historical Review	8,750.00	0.00	0.00	0.00	0.00	0.00%	8,750.00	
2001-113	CO1 Temp Heat - Allowance	7,500.00	7,500.00	0.00	0.00	7,500.00	100.00%	0.00	
2001-114	CO1 Winter Conditions - Allowance	5,000.00	801.00	476.00	0.00	1,277.00	25.54%	3,723.00	
2001-117	CO1 Job Trailer - Allowance	3,600.00	2,660.00	800.00	0.00	3,460.00	96.11%	140.00	
2001-118	CO1 Dumpsters	13,200.00	13,200.00	0.00	0.00	13,200.00	100.00%	0.00	
2001-119	CO1 Concrete Testing	2,000.00	0.00	0.00	0.00	0.00	0.00%	2,000.00	
2001-121	CO1 General Cleaning	21,000.00	15,750.00	0.00	0.00	15,750.00	75.00%	5,250.00	
2001-122	CO1 Final Cleaning	8,500.00	0.00	4,250.00	0.00	4,250.00	50.00%	4,250.00	
2001-125	CO1 Temp Fence - Allowance	3,500.00	2,000.00	560.00	0.00	2,560.00	73.14%	940.00	
2001-126	CO1 Temp Storage Trailers	2,000.00	935.00	1,000.00	0.00	1,935.00	96.75%	65.00	
2001-127	CO1 Temp Railings	3,500.00	1,575.00	1,925.00	0.00	3,500.00	100.00%	0.00	
2001-129	CO1 Temp Toilets	1,500.00	1,153.00	0.00	0.00	1,153.00	76.87%	347.00	
2001-130	CO1 Knox Box - Allowance	850.00	34.00	0.00	0.00	34.00	4.00%	816.00	
2001-133	CO1 Reproduction	800.00	720.00	0.00	0.00	720.00	90.00%	80.00	
2001-135	CO1 UPS - Allowance	500.00	450.00	0.00	0.00	450.00	90.00%	50.00	
2001-137	CO1 Barriers/Enclosures	3,650.00	975.00	0.00	0.00	975.00	26.71%	2,675.00	
2001-139	CO1 Scaffolding/Shoring	60,000.00	60,000.00	0.00	0.00	60,000.00	100.00%	0.00	
2001-143	CO1 Temp Walk Off Mats	1,000.00	0.00	0.00	0.00	0.00	0.00%	1,000.00	
2001-144	CO1 Finishes Protection Allowance	6,000.00	300.00	0.00	0.00	300.00	5.00%	5,700.00	
2001-146	CO1 As-Built CD's	1,500.00	0.00	1,500.00	0.00	1,500.00	100.00%	0.00	
2001-155	CO1 Job Sign	1,500.00	0.00	1,500.00	0.00	1,500.00	100.00%	0.00	
2001-156	CO1 Temp Signage	750.00	0.00	750.00	0.00	750.00	100.00%	0.00	
2001-185	CO1 Insurance	31,310.00	31,310.00	0.00	0.00	31,310.00	100.00%	0.00	
2001-187	CO1 Structural Steel Final Design	3,750.00	0.00	3,750.00	0.00	3,750.00	100.00%	0.00	

CONTINUATION SHEET

Application and Certification for Payment, containing

Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Application No. : 7

Application Date : 05/28/21

To: 05/28/21

Architect's Project No.: 4453A

Invoice # : 27303

Contract : 4453A- The Riviera Phase II - Interior Remodel & MEP Work

A Item No.	B Description of Work	C Scheduled Value	D Work Completed		F Materials Presently Stored (Not in D or E)	G Total Completed and Stored To Date (D+E+F)	H % (G / C)	I Balance To Finish (C-G)	Retainage
			From Previous Application (D+E)	This Period In Place					
2001-190	CO1 Project Management	49,250.00	49,250.00	0.00	0.00	49,250.00	100.00%	0.00	
2001-200	CO1 Site Concrete Removal/Demo	36,000.00	12,600.00	23,400.00	0.00	36,000.00	100.00%	0.00	
2001-242	CO1 Relay Glazed Block	25,000.00	16,086.00	8,914.00	0.00	25,000.00	100.00%	0.00	
2001-243	CO1 Selective Non-Masonry Demo	68,315.00	68,315.00	0.00	0.00	68,315.00	100.00%	0.00	
2001-245	CO1 Asbestos Abatement	11,450.00	9,000.00	0.00	0.00	9,000.00	78.60%	2,450.00	
2001-260	CO1 Asphalt Patching	2,400.00	0.00	0.00	0.00	0.00	0.00%	2,400.00	
2001-280	CO1 Landscaping - Allowance	2,500.00	0.00	2,500.00	0.00	2,500.00	100.00%	0.00	
2001-285	CO1 Brick Pavers	9,300.00	0.00	9,300.00	0.00	9,300.00	100.00%	0.00	
2001-300	CO1 Remove and Replace Front Stairs	110,000.00	1,600.00	108,400.00	0.00	110,000.00	100.00%	0.00	
2001-301	CO1 Structural Glazed Tile Demo/Re-work	100,000.00	97,494.00	2,506.00	0.00	100,000.00	100.00%	0.00	
2001-500	CO1 Metal Stairs & Railings	40,000.00	40,000.00	0.00	0.00	40,000.00	100.00%	0.00	
2001-600	CO1 Carpentry Rough	2,564.00	0.00	2,564.00	0.00	2,564.00	100.00%	0.00	
2001-602	CO1 Carpentry Finish	17,686.00	0.00	17,686.00	0.00	17,686.00	100.00%	0.00	
2001-603	CO1 Wood Blocking - Window Treatments - Allowance	5,000.00	0.00	5,000.00	0.00	5,000.00	100.00%	0.00	
2001-607	CO1 Wood Trim/Crown - Allowance	12,500.00	0.00	12,500.00	0.00	12,500.00	100.00%	0.00	
2001-641	CO1 Millwork/Cabinetry	39,260.00	14,000.00	25,260.00	0.00	39,260.00	100.00%	0.00	
2001-711	CO1 Waterproofing	2,500.00	2,500.00	0.00	0.00	2,500.00	100.00%	0.00	
2001-790	CO1 Caulking/Joint Sealants	6,000.00	0.00	6,000.00	0.00	6,000.00	100.00%	0.00	
2001-800	CO1 Mirrors and Door Lites	3,465.00	3,465.00	0.00	0.00	3,465.00	100.00%	0.00	
2001-801	CO1 Storefront Concourse	13,444.00	13,444.00	0.00	0.00	13,444.00	100.00%	0.00	
2001-806	CO1 Automatic Entrances	7,150.00	0.00	7,150.00	0.00	7,150.00	100.00%	0.00	
2001-810	CO1 Hollow Metal Hardware/Wood Doors/Custom Doors	160,000.00	85,000.00	67,000.00	0.00	152,000.00	95.00%	8,000.00	
2001-836	CO1 Roll Down Security Gates	20,000.00	20,000.00	0.00	0.00	20,000.00	100.00%	0.00	
2001-900	CO1 Painting	84,400.00	50,640.00	33,760.00	0.00	84,400.00	100.00%	0.00	
2001-901	CO1 Paint Touch-up	5,000.00	0.00	2,500.00	0.00	2,500.00	50.00%	2,500.00	
2001-921	CO1 Plaster	138,400.00	133,559.00	4,841.00	0.00	138,400.00	100.00%	0.00	
2001-925	CO1 Drywall Patching	17,760.00	17,760.00	0.00	0.00	17,760.00	100.00%	0.00	
2001-951	CO1 Ceiling Insulation - Allowance	30,630.00	29,600.00	1,030.00	0.00	30,630.00	100.00%	0.00	
2001-955	CO1 Wood Flooring and Wood Shoe	53,473.00	0.00	53,473.00	0.00	53,473.00	100.00%	0.00	
2001-960	CO1 Terrazzo Restoration	54,400.00	54,400.00	0.00	0.00	54,400.00	100.00%	0.00	
2001-965	CO1 Floor Prep	7,500.00	6,750.00	750.00	0.00	7,500.00	100.00%	0.00	

CONTINUATION SHEET

Application and Certification for Payment, containing

Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Application No. : 7

Application Date : 05/28/21

To: 05/28/21

Architect's Project No.: 4453A

Invoice #: 27303

Contract : 4453A- The Riviera Phase II - Interior Remodel & MEP Work

A Item No.	B Description of Work	C Scheduled Value	D E Work Completed		F Materials Presently Stored (Not in D or E)	G Total Completed and Stored To Date (D+E+F)	H % (G / C)	I Balance To Finish (C-G)	Retainage
			From Previous Application (D+E)	This Period In Place					
2001-966	CO1 Soft Flooring	2,955.00	0.00	0.00	0.00	0.00	0.00%	2,955.00	
2001-981	CO1 Epoxy Floors	3,674.00	0.00	3,674.00	0.00	3,674.00	100.00%	0.00	
2001-1000	CO1 Toilet Partitions & Accessories	19,225.00	13,900.00	0.00	0.00	13,900.00	72.30%	5,325.00	
2001-1025	CO1 Fire Extinguishers	1,800.00	1,680.00	120.00	0.00	1,800.00	100.00%	0.00	
2001-1035	CO1 Flag Poles/Roof Work	14,960.00	14,960.00	0.00	0.00	14,960.00	100.00%	0.00	
2001-1042	CO1 Interior/Exterior Signage	37,695.00	18,848.00	18,847.00	0.00	37,695.00	100.00%	0.00	
2001-1047	CO1 Awnings With Added Allowance	43,655.00	43,655.00	0.00	0.00	43,655.00	100.00%	0.00	
2001-1104	CO1 Audio/Visual Equipment	112,462.00	108,402.00	4,060.00	0.00	112,462.00	100.00%	0.00	
2001-1220	CO1 Window Treatments With Added Allowance	65,195.00	65,195.00	0.00	0.00	65,195.00	100.00%	0.00	
2001-1420	CO1 Elevator Remove and Replace	113,000.00	113,000.00	0.00	0.00	113,000.00	100.00%	0.00	
2001-1520	CO1 Plumbing With Demo/Floor Scan	105,644.00	105,644.00	0.00	0.00	105,644.00	100.00%	0.00	
2001-1545	CO1 Site Plumbing With Trench Drain	231,283.00	208,155.00	23,128.00	0.00	231,283.00	100.00%	0.00	
2001-1550	CO1 Fire Protection	139,953.00	135,055.00	4,898.00	0.00	139,953.00	100.00%	0.00	
2001-1554	CO1 Fire Alarm System	35,000.00	35,000.00	0.00	0.00	35,000.00	100.00%	0.00	
2001-1580	CO1 HVAC	543,730.00	543,730.00	0.00	0.00	543,730.00	100.00%	0.00	
2001-1600	CO1 Electrical	207,825.00	207,825.00	0.00	0.00	207,825.00	100.00%	0.00	
2001-1660	CO1 Data/Telecommunications	30,300.00	28,300.00	0.00	0.00	28,300.00	93.40%	2,000.00	
2001-1663	CO1 Security/Camera Systems	30,000.00	28,000.00	0.00	0.00	28,000.00	93.33%	2,000.00	
2001-9996	CO1 Performance Bond	6,968.00	6,968.00	0.00	0.00	6,968.00	100.00%	0.00	
2001-9997	CO1 Arch/Engineering	189,964.00	186,165.00	3,799.00	0.00	189,964.00	100.00%	0.00	
2001-9998	CO1 Contingency	379,928.00	354,025.00	25,085.00	0.00	379,110.00	99.78%	818.00	
2001-9999	CO1 Contractor's Fee	298,876.00	251,056.00	41,842.00	0.00	292,898.00	98.00%	5,978.00	
2002-9999	Owner Change Order #2	83,586.00	64,029.00	19,557.00	0.00	83,586.00	100.00%	0.00	
2003-9999	Owner Change Order #3	274,816.00	236,575.00	25,113.00	0.00	261,688.00	95.22%	13,128.00	
2004-9999	Owner Change Order #4	-5,092.00	-4,018.00	-1,074.00	0.00	-5,092.00	100.00%	0.00	
2005-9999	Owner Change Order #5	1,736.00	0.00	1,736.00	0.00	1,736.00	100.00%	0.00	
2006-9999	Owner Change Order #6	31,100.00	9,579.00	20,199.00	0.00	29,778.00	95.75%	1,322.00	
2007-9999	Owner Change Order #7	-3,485.00	0.00	-3,485.00	0.00	-3,485.00	100.00%	0.00	
Grand Totals		4,424,460.00	3,737,929.00	601,869.00	0.00	4,339,798.00	98.09%	84,662.00	0.00

WAIVER OF LIEN

May 28, 2021

For value received, we hereby waive all rights and claims for lien onland and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,

by MSI General Corporation contractor,

for Interior remodel and MEP work at The Riviera – PHASE II

same being situated in Walworth county, described as

The Riviera

812 Wrigley Drive

Lake Geneva, WI

for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, to date thru invoice #27303, subject to payment of same.

MSI General Corporation



Susan C. Butler,
Executive Vice President - CFO

PARTIAL WAIVER OF LIEN

DATE: 5/10/2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for CITY OF LAKE GENEVA owner,
by MSI General Corporation contractor,
for SELECTIVE INTERIOR DEMO/ MASONRY WORK Type of work,
same being situated in WAUWATOSH County, State of Wisconsin, described as
RIVIERA PHASE II
812 WRIAGLEY DR
LAKE GENEVA, WI 53147

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: CORPORATE CONTRACTORS, INC


Signature: (Officer of the Company)

PRESIDENT
Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
WALWORTH COUNTY)

PROJECT: RUIERA PHASE II
812 WILGLEY DR
LAKE GENEVA, WI
53147

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

CORPORATE CONTRACTORS, INC (no subcontractors hired)

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

18th day of May, 2021

Jessica L. Daniels
Notary Public, State of Wisconsin

My Commission Expires: 1/8/2025

CORPORATE CONTRACTORS, INC.
(Company Name)

BY: [Signature]
Signature (Officer of Company)

Title: PRESIDENT

PLEASE HAVE NOTARIZED

Jessica L. Daniels
NOTARY PUBLIC
State of Wisconsin
My Commission Expires 1/08/2025

PARTIAL WAIVER OF LIEN

DATE: 5/25/2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corporation contractor,
for Metal fabrication of stainless steel counter tops Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera Phase II, 812 Wrigley Drive, Lake Geneva, WI 53147

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: Duwe Metal Products, Inc.



Marc Lauret, CPA

Signature: (Officer of the Company)

Executive Vice President / Treasurer

Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
Walworth COUNTY)

PROJECT: Riviera Phase 2
812 Wrigley Drive
Lake Geneva, WI 53147

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

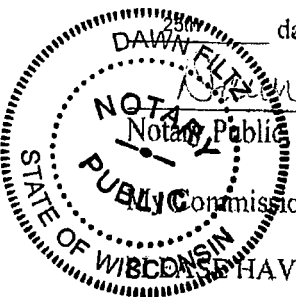
All material taken from fully paid inventory.

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

25th day of May, 2021

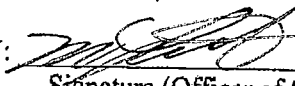
 Dawn Filtz
Notary Public State of Wisconsin

Commission Expires: 4/28/22

ALL HAVE NOTARIZED

Duwe Metal Products, Inc.

(Company Name)

BY:  Marc Lauret, CPA
Signature (Officer of Company)

Title: Executive Vice President / Treasurer

WAIVER OF LIEN

4/30/2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto, for City of Lake Geneva owner, by MSI General Corporation contractor, for Carpentry Type of work, same being situated in Lake Geneva County, State of Wisconsin, described as The Riviera - Phase 2
812 Wrigley Drive
Lake Geneva, WI
for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, to date.

Robert W. Nelson Inc.

Robert Nelson
Signature: (Officer of company)

president
Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
Lake County COUNTY)

PROJECT: The Riviera - Phase 2

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me
this 26 day of May, 2021

Kimberly Kleinschmidt
Notary Public, State of Wisconsin

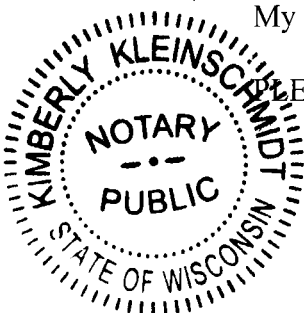
Robert W. Nelson Inc.
(Company Name)

By: Ronald Nelson
Signature (Officer or Authorized Party)

My Commission Expires: 8/6/23

Title: president

PLEASE HAVE NOTARIZED



PARTIAL WAIVER OF LIEN

Date: April 26, 2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corp contractor,
for Carpentry Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera Phase II
812 Wrigley Drive
Lake Geneva, WI

for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, to date.

Hepp's Quality Restoration, LLC.

Monica C. Hepp
Signature: (Officer of Company)

Manager
Title

LIEN WAIVER CERTIFICATION

(to be executed by owner or principal officer)

STATE OF WISCONSIN)
Walworth COUNTY)SS

PROJECT: The Riviera Phase II
812 Wrigley Drive
Lake Geneva, WI 53147

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

n/a

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

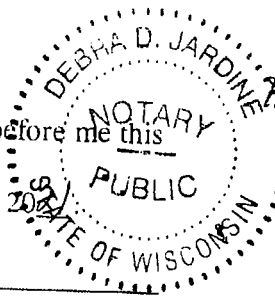
4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

25 day of May, 2021

Debra D. Jardine
Notary Public, State of Wisconsin

My Commission Expires: 06/12/2022



Hepp's Quality Restoration, LLC
(Company Name)

BY: Monica C. Hepp
Signature (Officer of Company)

Manager
Title

PLEASE HAVE NOTARIZED.

4453A

PARTIAL WAIVER OF LIEN

DATE: May 11 2020

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corporation contractor,
for Crash - Blazing Type of work,
same being situated in Walworth County, State of Wisconsin, described as
Exhibit Phase 2
312 W. Main St
Lake Geneva W. 53147

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: Ashman Bros

[Signature]
Signature: (Officer of the Company)

Representative
Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
LAKE COUNTY)

PROJECT:

The Green Bay Project

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

Allen T. Finner
Owner

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

11 day of May, 2021

Lauren Pauly
Notary Public, State of Wisconsin

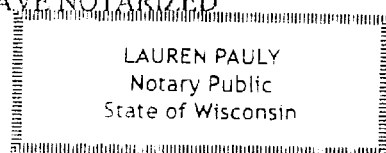
My Commission Expires: 06-22-2024

MSI General Corporation
(Company Name)

BY: Allen T. Finner
Signature (Officer of Company)

Title: Owner

PLEASE HAVE NOTARIZED



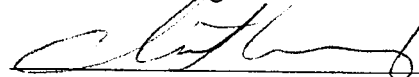
WAIVER OF LIEN

5/4/2021

For value received, we hereby waive all rights and claims for lien onland and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,
for City of Lake Geneva owner,
by MSI General Corporation contractor,
for painting & caulking Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera - Phase II
812 Wrigley Drive
Lake Geneva, WI

for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, to date.

Certa Pro Painting


Signature: (Officer of company)

OWNER
Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN) PROJECT: Riviera - Phase II
)
WALWORTH COUNTY)

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me
this 05 day of 21, 2021

Geno Farina
Notary Public, State of Wisconsin

Certa Pro Painting
(Company Name)

By: *[Signature]*
Signature (Officer or Authorized Party)

My Commission Expires: April 13th 2021

Title: owner

PLEASE HAVE NOTARIZED

GENO FARINA
Notary Public
State of Wisconsin

PARTIAL WAIVER OF LIEN

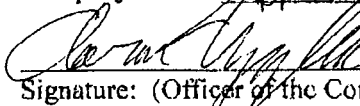
DATE: 4-26-2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corporation contractor,
for LATH + Plaster Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera Phase 2
812 Wrigley DR.
Lake Geneva WI 53147

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: Applewood Plastering


Signature: (Officer of the Company)

Corporate Secretary
Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)

Walworth COUNTY)

PROJECT: Riviera Phase 2

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

N/A

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

26 day of April, 2021

Donna Mae McGrath
Notary Public, State of Wisconsin

My Commission Expires: 3-11-2023

PLEASE HAVE NOTARIZED

Appkwood Plastering
(Company Name)

BY: [Signature]
Signature (Officer of Company)

Title: Corporate Secretary

DONNA MAE MCGRATH
Notary Public
State of Wisconsin

WAIVER OF LIEN

4/26/2021

For value received, we hereby waive all rights and claims for the lien on land and on buildings about to be erected, being erected, erected, altered, or repaired and to he appurtenances thereunto,

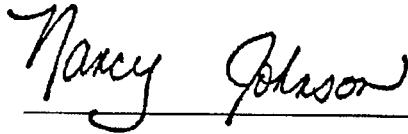
For: City of Lake Geneva

By: MSI General Corporation

For: Material & labor for metal studs, wall insulation & drywall
same as being situated in Walworth County, State of Wisconsin, described as:

The Riviera Phase II
812 Wrigley Drive
Lake Geneva, WI 53147

for all labor performed and for all material furnished from fully paid stock for the erection, construction, alteration or repair of said building and appurtenances, to date.

A handwritten signature in black ink, reading "Nancy Johnson", written over a horizontal line.

Applewood Drywall Service Inc.

LIEN WAIVER CERTIFICATE

STATE OF WISCONSIN

Project: The Riviera Phase II

Waukesha County

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company
2. That attached hereto is a billing or draw request regarding a project (named above for MSI GENERAL Corporation, herein call MSI, which requests that MSI make payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)
BSI/TAMARACK

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the Undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

Monday, April 26, 2021

Kimberly M Schreiber

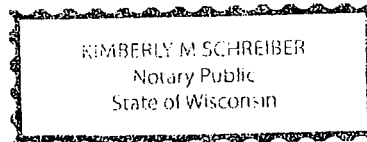
Applewood Drywall Service, Inc.

By: Nancy Johns

Title: Corporate Secretary

My commission Expires: 01/26/22

Please have notarized.



TAMARACK MATERIALS INC

RECEIPT AND WAIVER OF MECHANIC'S LIEN RIGHTS

DATE: 4/26/21

Check Only One

X as Partial payment for labor, skill and material furnished

 as full and final payment for all labor, skill and material furnished or to be furnished to the following described real property:(legal description, street address or project name)

*The Riviera
812 Wrigley Dr
Lake Geneva, WI 53147*

and for value received hereby waives all rights acquired by the undersigned to file or record mechanic's liens against said real property for labor, skill or material furnished to said real property (only for the amount paid if partial payment is checked. The undersigned affirms that all material furnished by the undersigned has been paid for, and all subcontractors employed by the undersigned have been paid in full, EXCEPT:

Customer:

Applewood Drywall

Tamarack Materials Inc



BRIAN DOWNING
MANAGER

9300 James Ave South
Minneapolis, Minnesota 55431
507-280-0742

PARTIAL WAIVER OF LIEN

DATE: April 12, 2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corporation contractor,
for Insulation Type of work,
same being situated in Walworth County, State of Wisconsin, described as
Riviera - Phase 2
812 Wrigley Drive
Lake Geneva, WI

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: Builders Insulation

Vicki Stout
Signature: (Officer of the Company)

Vicki Stout, Authorized Agent
Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
 _____ COUNTY)

PROJECT:

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

12 day of April, 2021

Vicki Stout
Notary Public, State of Wisconsin

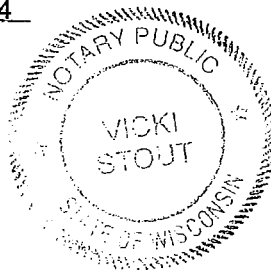
Builders Insulation
(Company Name)

BY: Deanna J. Ewert
Signature (Officer of Company)

Title: Deanna J. Ewert / Authorized Agent

My Commission Expires: 10/16/2024

PLEASE HAVE NOTARIZED

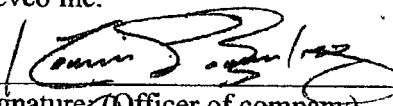


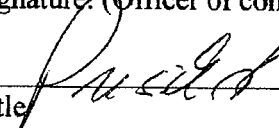
WAIVER OF LIEN

5/3/2021

For value received, we hereby waive all rights and claims for lien onland and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto, for City of Lake Geneva owner, by MSI General Corporation contractor, for terrazzo restoration and floor prep Type of work, same being situated in Walworth County, State of Wisconsin, described as The Riviera - Phase II 812 Wrigley Drive Lake Geneva, WI for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, to date.

Kevco Inc.


Signature: (Officer of company)

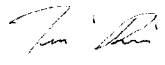

Title

WAIVER OF LIEN

4/27/2021

For value received, we hereby waive all rights and claims for lien onland and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,
for City of Lake Geneva owner,
by MSI General Corporation contractor,
for toilet partitions & accessories Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera - Phase II
812 Wrigley Drive
Lake Geneva, WI
for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, in full.

Best Specialties



Signature: (Officer of company)

PRESIDENT

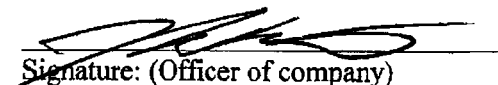
Title

WAIVER OF LIEN

5/6/2021

For value received, we hereby waive all rights and claims for lien onland and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,
for City of Lake Geneva owner,
by MSI General Corporation contractor,
for audio/visual equipment Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera - Phase II
812 Wrigley Drive
Lake Geneva, WI
for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, to date.

Professional Audio Design


Signature: (Officer of company)

Principal
Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
Milwaukee COUNTY)

PROJECT: **Riviera - Phase II**

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

None - All Stock

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me
this 19 day of May, 2021

Kim Leonard
Notary Public, State of Wisconsin

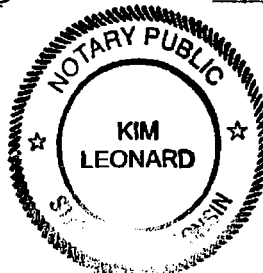
My Commission Expires: 1-5-22

PLEASE HAVE NOTARIZED

Professional Audio Design
(Company Name)

By: [Signature]
Signature (Officer or Authorized Party)

Title: Parviz



PARTIAL WAIVER OF LIEN

DATE: 5/26/2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for CITY OF LAKE GENEVA owner,
by MSI General Corporation contractor,
for PLUMBING Type of work,
same being situated in _____ County, State of Wisconsin, described as

Riviera Phase 2
812 WILLEY DRIVE
LAKE GENEVA, WI

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: Joe DePolak Plumbing

X Bill DePolak
Signature: (Officer of the Company)

President
Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
waushara COUNTY)

PROJECT: Riviera Phase 2
812 Wrigley Drive
Lake Geneva, WI

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

Able

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

26th day of May, 2021

Sandra A. Hanson
Notary Public, State of Wisconsin

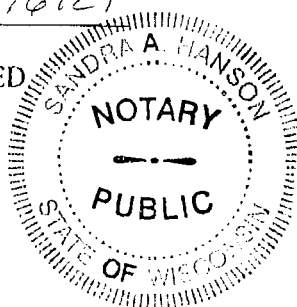
My Commission Expires: 9/6/21

PLEASE HAVE NOTARIZED

Joe DeBelak Plumbing
(Company Name)

BY: Bill Haul
Signature (Officer of Company)

Title: President



HAJOCA CORPORATION

District Credit Office
4085 McDonald Dr, Dubuque, IA 52003
Phone 800.280.3710 Fax 563.583.0031

www.hajoca.com



Waiver

May 26, 2021

STATE OF IOWA

COUNTY OF DUBUQUE

TO ALL WHOM IT MAY CONCERN:

WHEREAS, We, the undersigned Able Distributing-Div. of Hajoca Corp., have been employed by

Joe DeBelak Plumbing and Heating
W143 N9358 Henry Stark Rd
Menomonee Falls, WI 53051

to furnish materials for the building or other improvements upon the premises known as

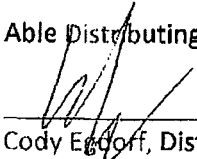
The Riviera Phase 2
812 Wrigley Drive
Lake Geneva, WI

NOW, THEREFORE, KNOW YE, That We, the undersigned for and in consideration of Payment in Full through 4/30/21 the receipt whereof is hereby acknowledged, hereby waive and release any and all lien, or claim or right of lien on said above described building and premises under Statutes, relating to Mechanics Lien, on account of materials furnished to DeBelak Plumbing and Heating for said building or premises.

GIVEN Under our hand and seal this 26th day of May, 2021.

Able Distributing- Div of Hajoca Corp.

By


Cody Eggert, District Credit Manager

Able Distributing
Division of Hajoca Corp.

PARTIAL WAIVER OF LIEN

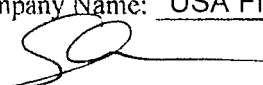
DATE: 5/10/2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corporation contractor,
for Fire Suppression Type of work,
same being situated in Walworth County, State of Wisconsin, described as
Riviera Phase 2
812 Wrigley Dr
Lake Geneva, WI 53147

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: USA Fire Protection Inc.


Signature: (Officer of the Company)

Sarah Grudich / Office Manager
Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
Waukesha COUNTY)

PROJECT: Riviera Phase 2

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

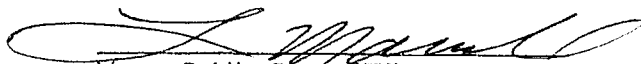
ALL MATERIAL FROM FULLY PAID STOCK

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

10th day of May, 2021


Notary Public, State of Wisconsin

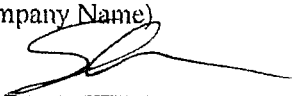
My Commission Expires: 8/20/2024

PLEASE HAVE NOTARIZED

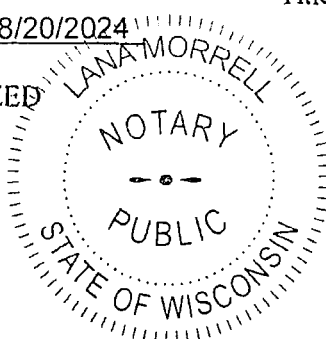
USA Fire Protection Inc.

(Company Name)

BY:


Signature (Officer of Company)

Title: Sarah Grudich / Office Manager



PARTIAL WAIVER OF LIEN

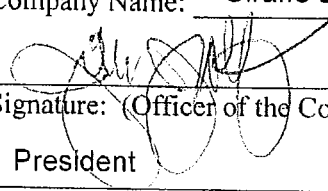
DATE: April 26, 2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corporation contractor,
for Electric Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera Phase II Fire Alarm
812 Wrigley Drive
Lake Geneva, WI 53147

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: Giraffe Electric II Inc


Signature: (Officer of the Company)

President

Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
Walworth COUNTY)

PROJECT:

The Riviera Phase II Fire Alarm

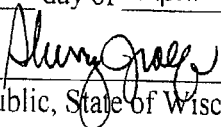
The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this
26th day of April, 20 21


Notary Public, State of Wisconsin

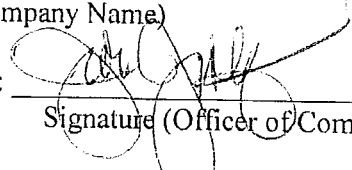
My Commission Expires: 05/07/2023

PLEASE HAVE NOTARIZED

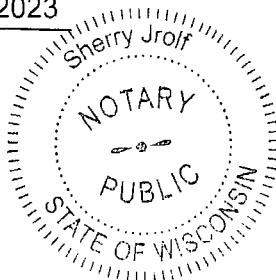
Giraffe Electric II Inc

(Company Name)

BY:


Signature (Officer of Company)

Title: President



PARTIAL WAIVER OF LIEN

DATE: 4.25.21

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corporation contractor,
for HVAC Type of work,
same being situated in Walworth County, State of Wisconsin, described as
the Riviera Phase II
812 Wrigley Drive
Lake Geneva, WI

for ~~all~~ work performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: Pure Mechanical

Jason Hull
Signature: (Officer of the Company)

President
Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
 Walworth COUNTY)

PROJECT: The Riviera - Phase II

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

Columbia
FAP
Fluid Handling
Vyron

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

29 day of April, 2021

Ashley Klawitter
Notary Public, State of Wisconsin

My Commission Expires: 11/23/24

Pure Mechanical

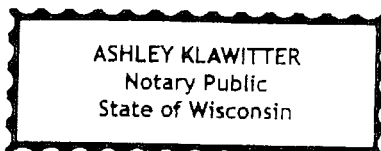
(Company Name)

BY: Jason Hull

Signature (Officer of Company)

Title: President

PLEASE HAVE NOTARIZED



N8 W22275 Johnson Dr.
Waukesha, WI 53186

P: (414) 897-8012
F: (414) 897-8013

pure-hvac.com
pure-electric.com



PARTIAL WAIVER OF LIEN

April 25, 2021

FOR VALUE RECEIVED, We hereby waive partial rights and claims for lien on land and on buildings about to be erected, being erected, altered or repaired and to the appurtenances thereunto,

Owner: City of Lake Geneva

For: The Riviera – Phase II

By: Columbia Pipe

For: Equipment

Same being situated in Walworth County, State of Wisconsin, described as:

812 Wrigley Dr.

Lake Geneva, WI

For all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, except, none.

Julie Tenerelli / Credit Manager

Columbia Pipe

N8 W22275 Johnson Dr.
Waukesha, WI 53186

P: (414) 897-8012
F: (414) 897-8013

pure-hvac.com
pure-electric.com



FINAL WAIVER OF LIEN

April 25, 2021

FOR VALUE RECEIVED, We hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, altered or repaired and to the appurtenances thereunto,

Owner: City of Lake Geneva

For: The Riviera – Phase II

By: Forced Air Products

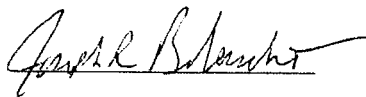
For: Equipment

Same being situated in Walworth County, State of Wisconsin, described as:

812 Wrigley Dr.

Lake Geneva, WI

For all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, except, none.

 (FAP)

Forced Air Products

N8 W22275 Johnson Dr.
Waukesha, WI 53186

P: (414) 897-8012
F: (414) 897-8013

pure-hvac.com
pure-electric.com



FINAL WAIVER OF LIEN

April 25, 2021

FOR VALUE RECEIVED, We hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, altered or repaired and to the appurtenances thereunto,

Owner: City of Lake Geneva

For: The Riviera – Phase II

By: Fluid Handling

For: Equipment

Same being situated in Walworth County, State of Wisconsin, described as:

812 Wrigley Dr.

Lake Geneva, WI

For all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, except, none.

Christy Schley 5/4/21

Fluid Handling

N8 W22275 Johnson Dr.
Waukesha, WI 53186

P: (414) 897-8012
F: (414) 897-8013

pure-hvac.com
pure-electric.com



PARTIAL WAIVER OF LIEN

May 10, 2021

FOR VALUE RECEIVED, We hereby waive partial rights and claims for lien on land and on buildings about to be erected, being erected, altered or repaired and to the appurtenances thereunto,

Owner: City of Lake Geneva

For: The Riviera – Phase II

By: Vyron Corporation

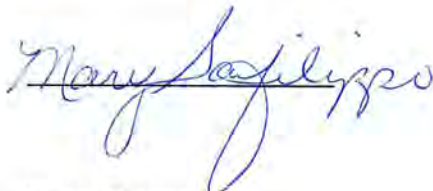
For: Equipment

Same being situated in Walworth County, State of Wisconsin, described as:

812 Wrigley Dr.

Lake Geneva, WI

For all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, except, none.



Vyron Corporation

N8 W22275 Johnson Dr.
Waukesha, WI 53186

P: (414) 897-8012
F: (414) 897-8013

pure-hvac.com
pure-electric.com



PARTIAL WAIVER OF LIEN

April 25, 2021

FOR VALUE RECEIVED, We hereby waive partial rights and claims for lien on land and on buildings about to be erected, being erected, altered or repaired and to the appurtenances thereunto,

Owner: City of Lake Geneva

For: The Riviera – Phase II

By: Air Associates

For: Equipment

Same being situated in Walworth County, State of Wisconsin, described as:

812 Wrigley Dr.

Lake Geneva, WI

For all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, except, none.

Air Associates

N8 W22275 Johnson Dr.
Waukesha, WI 53186

P: (414) 897-8012
F: (414) 897-8013

pure-hvac.com
pure-electric.com



PARTIAL WAIVER OF LIEN

April 5, 2021

FOR VALUE RECEIVED, We hereby waive partial rights and claims for lien on land and on buildings about to be erected, being erected, altered or repaired and to the appurtenances thereunto,

Owner: City of Lake Geneva

For: The Riviera – Phase II

By: Rundle Spence

For: Equipment

Same being situated in Walworth County, State of Wisconsin, described as:

812 Wrigley Dr.

Lake Geneva, WI

For all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, except, none.

Rundle Spence

PARTIAL WAIVER OF LIEN

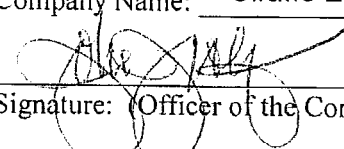
DATE: April 26, 2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corporation contractor,
for Electric Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera Phase II Electric
812 Wrigley Drive
Lake Geneva, WI 53147

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: Giraffe Electric II Inc


Signature: (Officer of the Company)

President

Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
Walworth COUNTY)

PROJECT:

The Riviera Phase II Electric

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

26th day of April, 2021

Sherry Jroff
Notary Public, State of Wisconsin

My Commission Expires: 05/07/2023

PLEASE HAVE NOTARIZED

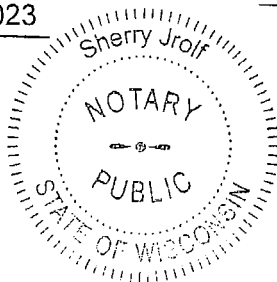
Giraffe Electric II Inc

(Company Name)

BY: [Signature]

Signature (Officer of Company)

Title: President



PARTIAL WAIVER OF LIEN

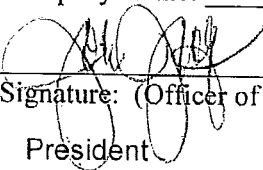
DATE: April 26, 2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corporation contractor,
for Electric Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera Phase II Low Voltage
812 Wrigley Drive
Lake Geneva, WI 53147

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: Giraffe Electric II Inc


Signature: (Officer of the Company)

President

Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
 Walworth COUNTY)

PROJECT:
The Riviera Phase II Low Voltage

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this
 26th day of April, 2021

Sherry Jrolf
Notary Public, State of Wisconsin

Giraffe Electric II Inc

(Company Name)

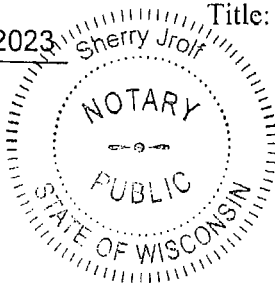
BY: *[Signature]*

Signature (Officer of Company)

Title: President

My Commission Expires: 05/07/2023

PLEASE HAVE NOTARIZED



PARTIAL WAIVER OF LIEN

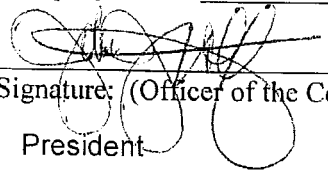
DATE: April 26, 2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corporation contractor,
for Electric Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera Phase II Camera/Security
812 Wrigley Drive
Lake Geneva, WI 53147

for all labor performed and for all material furnished for the erection, construction, alternation or repair of said building and appurtenances, to date.

Company Name: Giraffe Electric II Inc


Signature: (Officer of the Company)

President

Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
Walworth COUNTY)

PROJECT:
The Riviera Phase II Camera/Security

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

26th day of April, 2021

Sherry Jroff
Notary Public, State of Wisconsin

My Commission Expires: 05/07/2023

PLEASE HAVE NOTARIZED

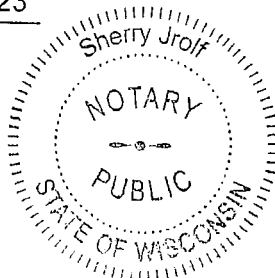
Giraffe Electric II Inc

(Company Name)

BY: [Signature]

Signature (Officer of Company)

Title: President



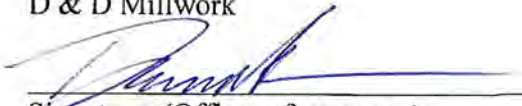
WAIVER OF LIEN

5/4/2021

For value received, we hereby waive all rights and claims for lien onland and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto, for City of Lake Geneva owner, by MSI General Corporation contractor, for _____ Type of work, same being situated in Lake Geneva County, State of Wisconsin, described as
The Riviera - Phase 2
812 Wrigley Drive
Lake Geneva, WI

for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, to date.

D & D Millwork


Signature: (Officer of company)

OWNER
Title

LIEN WAIVER CERTIFICATION

STATE OF WISCONSIN)
)
_____ COUNTY)

PROJECT: **The Riviera - Phase 2**

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or principal officer of the company designated below, herein called Company,
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me
this 25 day of May, 2021

Kimberly Kleinschmidt
Notary Public, State of Wisconsin

My Commission Expires: 8/6/23

PLEASE HAVE NOTARIZED

D & D Millwork
(Company Name)

By: [Signature]
Signature (Officer or Authorized Party)

Title: Owner



WAIVER OF LIEN

May 25, 2021

For value received, we hereby waive rights and claims for lien on land and on buildings about to be erected, being erected, altered or repaired and to the appurtenances thereunto, for D & D Millwork by BOETHM-MADISON LUMBER for 8/4 Red Oak at 1014 Sapele Mahogany same being situated in Jefferson County, State of Wisconsin, described as D & D Millwork N 8019 Ski Slide Rd 16x12, WI 53036 for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, except, NONE

Tracey Clark
Secretary of Boehm-Madison

PARTIAL WAIVER OF LIEN

Date: April 20, 2021

For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by MSI General Corp contractor,
for Brick-It Veneer Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera Phase II
812 Wrigley Drive
Lake Geneva, WI

for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, to date.

Hepp's Quality Restoration, LLC.

Monica C. Hepp
Signature: (Officer of Company)

Manager
Title

LIEN WAIVER CERTIFICATION

(to be executed by owner or principal officer)

STATE OF WISCONSIN)
Walworth COUNTY)SS)

PROJECT: *The Riviera Phase II*
812 Wrigley Drive
Lake Geneva, WI
53147

The undersigned, being duly sworn on oath, states and deposes as follows:

1. That he is the owner or a principal officer of the company designated below, herein called Company.
2. That attached hereto is a billing or draw request regarding a project (named above) for MSI General Corporation, herein called MSI, which requests that MSI make a payment to the undersigned for labor or materials furnished on said project.
3. That with respect to the work, labor, services and materials covered by such billing or draw request, the following and no others, furnished or supplied labor, materials or services: (List Suppliers)

JK Construction

That all of the above suppliers have been paid to date and/or in full as to the matters described in the attached billing or draw request and that their lien waivers are attached hereto, together with the lien waiver of the Company.

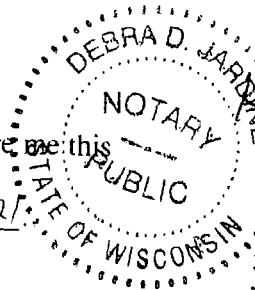
4. That this affidavit is made for the purpose of inducing MSI to make payment to the Company, the undersigned acknowledging that any misstatement of fact herein constitutes a criminal offense.

Subscribed and sworn to before me this

25 day of May, 2021

Debra D. Jardine
Notary Public, State of Wisconsin

My Commission Expires: 06/12/2022



Hepp's Quality Restoration, LLC
(Company Name)

BY: *Monica C. H3*
Signature (Officer of Company)

Manager
Title

PLEASE HAVE NOTARIZED.

WAIVER OF LIEN

Date: April 20, 2021

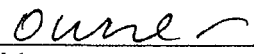
For value received, we hereby waive all rights and claims for lien on land and on buildings about to be erected, being erected, erected, altered or repaired and to the appurtenances thereunto,

for City of Lake Geneva owner,
by Hepp's Quality Restoration, LLC contractor,
for Brick-It Veneer Type of work,
same being situated in Walworth County, State of Wisconsin, described as
The Riviera Phase II
812 Wrigley Drive
Lake Geneva, WI

for all labor performed and for all material furnished for the erection, construction, alteration or repair of said building and appurtenances, in Full.

JK Construction


Signature: (Officer of Company)


Title



MSI General Corporation
PO Box 7
Oconomowoc, WI 53066

Proposed Owner Change Order #2

5/26/21

Job #4453A

Riviera Phase 2

2	Separate Minimal Services to Each Tenant Space			Complete	
	Joe DeBelak - Sanitary - 8 - 3" stubs plus sawcut/pourback	\$6,362	\$7,253	2/28/21	\$7,253.00
	Joe DeBelak - Water - 7 - Valve Stubs, 1" CPVC Pipe/Fittings	\$7,700	\$8,778	2/28/21	\$8,778.00
	Joe DeBelak - Vent - PVC Vent Pipe, Coring, Firestops	\$5,397	\$6,153	2/28/21	\$6,153.00
	Giraffe Electric - 100 amp Panel; 125 amp - 3 ph for Concess.	\$13,560	\$15,458	2/28/21	\$15,458.00
	Project Requirements	\$0	\$0		
	Grand Total:		\$37,642		
3	Two (2) Foot Wash Stations Northwest of Entrance			Complete	
	Joe DeBelak - Plumbing for Two (2) Footwash Stations	\$7,661	\$8,734	5/28/21	\$8,734.00
	Hassinger - Concrete Patching Allowance - Handle with Site	\$0	\$0		
	Asphalt Patching Allowance - Handle with Site Work	\$0	\$0		
	Sub - Description	\$0	\$0		
	Project Requirements	\$0	\$0		
	Grand Total:		\$8,734		
4	Plumbing - Needed Upgrades for Future Operations			Complete	
	Replace Hot Water Softener with Whole Building Softener	\$17,701	\$20,179	3/31/21	\$20,179.00
	Replace and Upsize Grease Interceptor - Up to 125 Gallon	\$7,891	\$8,996	3/31/21	\$8,996.00
	Repipe/Replace Kitchen Waste Piping/Redirect DW & Sinks	\$5,620	\$6,407	3/31/21	\$6,407.00
	Demo/Cap/Abandon 5 Interior Hose Bibs per DPW	\$694	\$791	3/31/21	\$791.00
	Project Requirements	\$0	\$0		
	Grand Total:		\$36,373		
5	HVAC Changes/Upgrades For Future Operations			Complete	
	Vestibule 100 - 2 Air Curtains; 2 Radiant Ceiling Panels	\$14,395	\$16,410	4/31/21	\$5,586.00
				5/28/21	\$10,823.00
	Gas Main Change - New Meter Location, New Gas Main	\$3,248	\$3,703	4/31/21	\$3,703.00
	Exhaust Fans - Elevator, AV Room, Projector Enclosure	\$3,707	\$4,226	4/31/21	\$4,226.00
	Ceiling Cassette Units - Add Outside Air, Add Break Metal	\$10,971	\$12,507	4/31/21	\$12,507.00
	Boiler - Increase Size for Heat Below 4 Pavilions;	\$18,931	\$21,581	4/31/21	\$21,581.00
	Vent Boiler Thru Chimney vs. Side Wall	\$6,198	\$7,066	4/31/21	\$7,066.00
	Omit Air Conditioning in Concourse	(\$10,000)	(\$11,400)	4/31/21	-\$11,400.00
	Giraffe Electric - Wiring for Above and 2nd Floor Ballroom Pnl	\$34,760	\$39,626	3/31/21	\$14,225.00
				4/31/21	\$25,401.00
	Project Requirements	\$0	\$0		
	Grand Total:		\$93,719		
6	Omit the Balcony Stair Replacement			Complete	
	Badger Railing - Omit the Balcony Stair Replacement	(\$40,000)	(\$45,600)	3/31/21	-\$45,600.00
	CertaPro - Still Refresh the Paint on the Existing Stair	\$0	\$0		
	Project Requirements	\$0	\$0		
	Grand Total:		(\$45,600)		
7	Omit the Motorized Shades in the Ballroom			Complete	
	BSI - Cancel Contract for Motorized Shades	(\$45,195)	(\$51,522)	3/31/21	-\$51,522.00
	Giraffe Electric - Credit for the Wiring of the Motorized Shades	(\$14,000)	(\$15,960)	3/31/21	-\$15,960.00
	Project Requirements	\$0	\$0		
	Grand Total:		(\$67,482)		
8	AV Conduit Raceway System and Junction Boxes			Complete	
	Giraffe - AV Conduit System and Junction Boxes	\$17,720	\$20,201	2/28/21	\$20,201.00
	Sub - Description	\$0	\$0		
	Project Requirements	\$0	\$0		
	Grand Total:		\$20,201		
	Included on 4/30/21 Billing				\$68,670.00
	Included on 3/31/21 Billing				-\$62,484.00
	Included on 2/28/21 Billing				\$57,843.00
	Included on 5/28/21 Billing				\$19,557.00



MSI General Corporation
PO Box 7
Oconomowoc, WI 53066

Proposed Owner Change Order #3B

3/8/21

Job #4453A

Riviera Phase 2

Pricing for the proposed revisions are listed below. This information is for informational purposes only. The proposed revisions are not approved and will not be implemented in the field until an Owner Change Order has been signed.

9 Re-Engineer vs. Reconstruct the Front Entry Stairs		Complete	
Badger - Eliminate the Shoring	(\$15,140)	(\$17,260)	4/30/21 -\$17,260.00
JH Hassinger - Eliminate the Demo and Repour of the Stairs	(\$89,940)	(\$102,532)	5/28/21 -\$102,532.00
Demo Allowance for Bottom 3 Treads and Repour	\$8,000	\$9,120	5/28/21 \$9,120.00
Pure Mechanical - Radiant Tubes - No Change Anticipated	\$0	\$0	
Giraffe Electric - Electrical Work - No Change Anticipated	\$0	\$0	
CMR - Allowance for 4" Shotcrete - Not to Exceed	\$53,360	\$60,830	5/28/21 \$60,830.00
Builder's Insulation - R-28 - 4" Applied	\$3,259	\$3,715	5/28/21 \$1,987.00
Allowance for Recoat the Top Surface and Caulk	\$10,000	\$11,400	
Project Requirements - Misc. - Refund Bond Cost to JHH	\$3,000	\$3,420	5/28/21 \$3,420.00
Grand Total:		(\$31,306)	
10 Walls - Salvaged & Glazed Tile, Brick - Reduced Scope		Complete	
Added Demo - Block	\$0	\$0	
Added Demo - Brick	\$0	\$0	
Added New Glazed Block -	\$0	\$0	
Added 4" Back-up Block Walls - (for brick and block)	\$0	\$0	
Infill of Two (2) Door Openings (Suite to Suite)	\$0	\$0	
Cut-in and Tooth In New Door Openings (Hallway)	\$0	\$0	
Added New Brick Walls - new Brick Walls - Vestibule	\$0	\$0	
Total of All of Above Items	\$178,795	\$203,826	3/31/21 \$160,358.00
			4/30/21 \$8,909.00
			5/28/21 \$34,559.00
Credit for Additional Reductions to Scope of Work - 8 +/- Areas	(\$22,500)	(\$25,650)	5/28/21 -\$25,650.00
Grand Total:		\$178,176	
11 Millwork Changes, Upgrades and		Complete	
First Floor Restrooms - Upgrade Quartz Tops to Cambria	\$1,140	\$1,300	5/28/21 \$1,300.00
FFR - Upgrade Exterior Support Aprons from Plam to Teak	\$2,150	\$2,451	5/28/21 \$2,451.00
Second Floor Restrooms - Upgrade Quartz to Cambria	\$1,320	\$1,505	5/28/21 \$1,505.00
SFR - Upgrade Exterior Support Aprons	\$1,775	\$2,024	5/28/21 \$2,024.00
Bar - Add (2) Radius Ends, Cambria Upgrade, Added SS, FRP	\$2,860	\$3,260	5/28/21 \$3,260.00
Ice Bins, Sink(s), Trash Receptacles, 2 Draft Beer Coolers	\$8,715	\$9,935	5/28/21 \$9,935.00
Security Desk - Add Radius Corners, Upgrade Tops Cambria	\$2,575	\$2,936	5/28/21 \$2,936.00
Project Requirements	\$0	\$0	
Grand Total:		\$23,410	
12 Omit Rolling Coiling Security Grilles at Concession Areas		Complete	
Wilde - Omit the Four (4) Coiling Security Grilles	(\$18,618)	(\$21,225)	3/31/21 -\$21,225.00
Project Requirements	\$0	\$0	
Grand Total:		(\$21,225)	
13 Omit the Awnings from Scope of Work		Complete	
Bauer Sign - Omit Awnings from Scope of Work	(\$43,655)	(\$49,767)	3/31/21 -\$49,767.00
Project Requirements	\$0	\$0	
Grand Total:		(\$49,767)	
14 Acoustical Ceiling Tile - Add Acoustical Ceilings Back to Project		Complete	
2x2 Vinyl Covered Sheetrock in Restrooms/Wet Areas	\$0	\$0	
2x2 Ultima Healthzone in 9/16 Grid in 2nd Floor Suite 1	\$0	\$0	
Total of Acoustical Ceiling Work	\$21,250	\$24,225	3/31/21 \$12,113.00
			5/28/21 \$12,113.00

Project Requirements		\$0	\$0		
Grand Total:			\$24,225		
15 Plumbing Changes as Follows				Complete	
Relocate Mop Sink from Room 100A to Closet 111A	\$2,569	\$2,929	3/31/21	\$2,197.00	
			4/30/21	\$732.00	
PR2 Changes - Credit Concession 110; RR Change; Icemakers	\$1,268	\$1,446	3/31/21	\$1,085.00	
			4/30/21	\$361.00	
2nd Floor Lav Faucet Upgrades	\$683	\$779	3/31/21	\$584.00	
			4/30/21	\$195.00	
Replace 2 Damage Spigots; Upgrade Floor Drains to Sand Trap	\$2,393	\$2,728	3/31/21	\$2,046.00	
			4/30/21	\$682.00	
Upgrade EWC to HAWS Unit with Bottle Filler	\$2,235	\$2,548	3/31/21	\$1,911.00	
			4/30/21	\$637.00	
Plumbing Work for Bar Changes	\$5,592	\$6,375	3/31/21	\$4,780.00	
			4/30/21	\$1,594.00	
Project Requirements		\$0	\$0		
Grand Total:			\$16,804		
16 Miscellaneous HVAC and Electrical Changes				Complete	
Pure Mechanical - Replace the 4 Exhaust Fans Upper Ballroom	\$4,940	\$5,632	5/28/21	\$5,632.00	
Giraffe Electric - Wiring for the 4 Exhaust Fan Replacements	\$800	\$912	4/30/21	\$912.00	
Upgrade Finish of Air Curtains from SS to Powder Baked	\$1,950	\$2,223	5/28/21	\$2,223.00	
Project Requirements	\$0	\$0			
Grand Total:			\$8,767		
17 Options for Emergency Power Backup				Complete	
Option 1 - Inverter - Ballroom and Mail Level Emergency Fixt.	\$25,760	\$29,366	4/30/21	\$29,366.00	
Option 2 - Generator - Emergency Lighting Only (\$55,000)	\$0	\$0			
Option 3 - Generator - Entire Building (\$280,000)	\$0	\$0			
Project Requirements	\$0	\$0			
Grand Total:			\$29,366		
18 Upper Clerestory Brick Repair to Make Watertight				Complete	
Renaissance - Remove and Replace Tile/Flashing for Repairs	\$37,000	\$42,180	3/31/21	\$6,327.00	
			4/30/21	\$35,853.00	
Badger - Scaffolding - Using On-Site Scaffolding	\$21,700	\$24,738	3/31/21	\$3,710.00	
			4/30/21	\$21,028.00	
Brick-it Materials	\$5,009	\$5,710	3/31/21	\$857.00	
			4/30/21	\$4,853.00	
Labor and Incidentals - Allowance - Not to Exceed	\$45,000	\$51,300	3/31/21	\$7,695.00	
			4/30/21	\$43,605.00	
Project Requirements		\$0	\$0		
Grand Total:			\$123,928		
19 Additional Miscellaneous Credits/Deducts				Complete	
Reverse CO2, Item 5.2 - Gas Meter to Stay in Existing Loc.	(\$3,248)	(\$3,703)	3/31/21	-\$3,703.00	
ACM Removal Savings	(\$2,450)	(\$2,793)	3/31/21	-\$2,793.00	
Remove Elevator Sump Pit Waterproofing from Scope - Pump	(\$2,500)	(\$2,850)	3/31/21	-\$2,850.00	
Omit 2 of the 4 Flag Poles -	(\$5,980)	(\$6,817)	3/31/21	-\$6,817.00	
Plumbing - Credit the Extra Allowance for Added Scanning	(\$10,000)	(\$11,400)	3/31/21	-\$11,400.00	
Project Requirements	\$0	\$0			
Grand Total:			(\$27,563)		
Included on 4/30/21 Billing				\$131,467.00	
Included on 3/31/21 Billing				\$105,108.00	
				\$25,113.00	



MSI General Corporation
PO Box 7
Oconomowoc, WI 53066

Proposed Owner Change Order #4

3/8/21

Job #4453A

Riviera Phase 2

Pricing for the proposed revisions are listed below. This information is for informational purposes only. The proposed revisions are not approved and will not be implemented in the field until an Owner Change Order has been signed.

				Approved	Rejected
				Complete	
20	Gage Marine Water Meter				
	Joe DeBelak Plumbing - 146' 1" Cold Hard Water to Rm 114	\$5,455	\$6,219	4/30/21	\$6,219.00
	Project Requirements	\$0	\$0		
	Grand Total:		\$6,219		
21A	Hand Dryer Half Wall - Option 1 - Quartz Panels and Tops				
	RJ Wood - Quartz Panels and Tops - Furnished and Installed	\$4,550	\$5,187	5/28/21	\$5,187.00
	Project Requirements	\$0	\$0		
	Grand Total:		\$5,187		
22	Rolling Counter Shutters vs. Bifold Doors @ Concession Spaces				
	D&D Millwork - Credit Bifold Doors	(\$20,000)	(\$22,800)	5/28/21	-\$22,800.00
	Wilde - Rolling Counter Shutters	\$12,508	\$14,259	5/28/21	\$14,259.00
	Project Requirements	\$0	\$0		
	Grand Total:		(\$8,541)		
23	Increase Gas Pipe Size and Pressure				
	Pure Mechanical - Increase the Gas Pipe Size to 2 Lb.	\$2,000	\$2,280	5/28/21	\$2,280.00
	Project Requirements	\$0	\$0		
	Grand Total:		\$2,280		
24	Omit the Remaining Two (2) Flag Poles				
	Deduct Total Allowance Per Contract	(\$14,960)	(\$17,054)	4/30/21	-\$17,054.00
	Previous Credit per Change Order 3	\$5,980	\$6,817	4/30/21	\$6,817.00
	Project Requirements	\$0	\$0		
	Grand Total:		(\$10,237)		
				Included on 4/30/21 Billing	-\$4,018.00
				Included on 5/28/21 Billing	-\$1,074.00



Proposed Owner Change Order #5

3/31/21

MSI General Corporation
PO Box 7
Oconomowoc, WI 53066

Job #4453A

Riviera Phase 2

Pricing for the proposed revisions are listed below. This information is for informational purposes only. The proposed revisions are not approved and will not be implemented in the field until an Owner Change Order has been signed.

				Approved	Rejected
				Complete	
26	Upgrades to Scope of Trench Drain			5/28/21	
	Works Plumbing - 60' of SS, 2 Catch Basins, 2 Cleanouts	\$25,075	\$28,586	5/28/21	\$28,586.00
	Works Plumbing - 20' of Trench Drain Per Base	(\$4,573)	(\$5,213)	5/28/21	-\$5,213.00
	Project Requirements	\$0	\$0		
	Grand Total:		\$23,372		
28	Upgrade Cores for Locksets to City of Lake Geneva Stand.			5/28/21	\$4,575.00
	Builders Hardware - 37 Cores and 4 Deadlocks	\$4,013	\$4,575	5/28/21	\$4,575.00
	Project Requirements	\$0	\$0		
	Grand Total:		\$4,575		
29	Install Plaster System Below the Four Pavilions			5/28/21	\$16,293.00
	Applewood Drywall and Plaster	\$14,292	\$16,293	5/28/21	\$16,293.00
	Project Requirements	\$0	\$0		
	Grand Total:		\$16,293		
30	Plaster for Walls Where Glazed Tile Removed			5/28/21	\$4,500.00
	Applewood Plastering	\$3,947	\$4,500	5/28/21	\$4,500.00
	Project Requirements	\$0	\$0		
	Grand Total:		\$4,500		
31	Stainless Steel Countertops and Cap at Concessions			5/28/21	\$14,679.00
	DUWE Metals	\$12,876	\$14,679	5/28/21	\$14,679.00
	Project Requirements	\$0	\$0		
	Grand Total:		\$14,679		
32	Credits and Savings				
	Shot Crete Buyout (\$53,360 - \$44,133)	(\$9,227)	(\$10,519)	5/28/21	-\$10,519.00
	Savings From Project Requirements Phase II	(\$24,750)	(\$28,215)	5/28/21	-\$28,215.00
	Savings From Project Requirements Phase I - Last 25% CO8	(\$19,920)	(\$22,709)	5/28/21	-\$22,709.00
	Fire Extinguisher Savings (Act. \$1,590 - Allow. \$1,800)	(\$210)	(\$239)	5/28/21	-\$239.00
	Project Requirements	\$0	\$0		
	Grand Total:		(\$61,682)		
			Included on 5/28/21 Billing		\$1,736.00



Proposed Owner Change Order #6

3/31/21

MSI General Corporation
PO Box 7
Oconomowoc, WI 53066

Job #4453A

Riviera Phase 2

Pricing for the proposed revisions are listed below. This information is for informational purposes only. The proposed revisions are not approved and will not be implemented in the field until an Owner Change Order has been signed.

				Approved Complete	Rejected
33	Provide Allowance Adjustment for Draperies				
	Actual Cost of Draperies - Fabricut - As Approved by Com.	\$28,403	\$32,379	4/30/21	\$32,379.00
				5/28/21	-\$1,322.00
	Less the Remaining Allowance for Draperies (as accent)	(\$20,000)	(\$22,800)	4/30/21	-\$22,800.00
	Sub - Description	\$0	\$0		
	Sub - Description	\$0	\$0		
	Project Requirements	\$0	\$0		
	Grand Total:		\$9,579		
34	Flooring				
	Kevco-Patterned Epoxy-Vest. 100, Hall 105, South Concourse	\$18,878	\$21,521	5/28/21	\$21,521.00
	- See Plans/Rendering - This is being done due to the	\$0	\$0		
	Deterioration of the Terrazzo. Too Thin to Grind and Polish	\$0	\$0		
	Sub - Description	\$0	\$0		
	Project Requirements	\$0	\$0		
	Grand Total:		\$21,521		
				Included on 4/30/21 Billing	\$9,579.00
				Included on 5/28/21 Billing	\$20,199.00



Proposed Owner Change Order #7

3/31/21

MSI General Corporation
PO Box 7
Oconomowoc, WI 53066

Job #4453A

Riviera Phase 2

Pricing for the proposed revisions are listed below. This information is for informational purposes only. The proposed revisions are not approved and will not be implemented in the field until an Owner Change Order has been signed.

				Approved	Rejected
				Complete	
35	Wainscot and Trim at Elevator and Ductwork Shaft				
	Nelson Carpentry - Provide Wainscot on Elevator - 4 Sides	\$16,590	\$16,211	5/28/21	\$16,211.00
	Provide Wainscot on Mechanical Shaft - 3 Sides	\$0	\$0		
	Project Requirements	\$0	\$0		
Grand Total:			\$16,211		
33	Omit Cove Details For Draperies - Wall Mount Drapes				
	Credit Rough Blocking Allowance for Cove	(\$5,000)	(\$5,700)	5/28/21	-\$5,700.00
	Credit Finish Carpentry Cove Allowance	(\$12,500)	(\$14,250)	5/28/21	-\$14,250.00
	Fabricut Draperies - Wall Mount Hardware vs. Ceiling Mount	\$223	\$254	5/28/21	\$254.00
	Project Requirements	\$0	\$0		
Grand Total:			(\$19,696)		
			Included on 5/28/21 Billing		-\$3,485.00

Report Criteria:

Report type: Summary

Check.Check number = 76344-76345,76415-76447

Check.Type = {<>} "Adjustment"

Bank.Bank account = "043230"

Check Issue Date	Check Number	Vendor Number	Payee	Amount
05/18/2021	76344	5428	CITY OF LAKE GENEVA POLICE DEPT	122.95
05/19/2021	76345	3495	CITY OF LAKE GENEVA	18,000.00
05/21/2021	76415	2104	AT&T	1,908.72
05/21/2021	76416	2108	AT&T LONG DISTANCE	38.48
05/21/2021	76417	2138	BAKER & TAYLOR	277.39
05/21/2021	76418	6173	COOK'S ILLUSTRATED	14.95
05/21/2021	76419	2424	DUNN LUMBER	15.33
05/21/2021	76420	6174	DWELL	19.95
05/21/2021	76421	5709	FEH DESIGN	19,190.95
05/21/2021	76422	3775	GENEVA LAKES CARPET CLEANING	100.00
05/21/2021	76423	6093	INGRAM LIBRARY SERVICES	2,869.03
05/21/2021	76424	2884	LAKE GENEVA UTILITY	75.00
05/21/2021	76425	5225	NETTESHEIM, GLEN	2,387.83
05/21/2021	76426	3233	RHYME BUSINESS PRODUCTS	395.26
05/21/2021	76427	2662	SEAN HINZPETER	93.00
05/21/2021	76428	5278	SPRINGHORN, KARL	1,494.00
05/21/2021	76429	3384	STOP STICK	470.00
05/21/2021	76430	5793	THE KNOT WORLDWIDE INC.	367.47
05/21/2021	76431	4918	TIME WARNER CABLE	179.97
05/21/2021	76432	5874	UNIQUE	62.65
05/21/2021	76433	6168	URBAN BOYS INC	125.00
05/21/2021	76434	5021	VORPAGEL SERVICE INC	1,281.57
05/21/2021	76435	6175	WAUKESHA COUNTY TREASURER	240.00
05/21/2021	76436	5071	WE ENERGIES	3,068.24
05/21/2021	76437	5002	VERMEER WISCONSIN INC	673.47
05/26/2021	76438	2046	ALLIANT ENERGY	110.98
05/26/2021	76439	2104	AT&T	573.89
05/26/2021	76440	2277	CHICAGO TRIBUNE	132.66
05/26/2021	76441	2424	DUNN LUMBER	10.95
05/26/2021	76442	2625	HALL, KAREN	310.00
05/26/2021	76443	3062	NORTHWIND PERENNIAL FARM	635.00
05/26/2021	76444	3225	RELIANT FIRE APPARATUS INC	404,081.00
05/26/2021	76445	5326	STEPHANIE LYNN LAKE GENEVA LLC	5,332.00
05/26/2021	76446	4975	US CELLULAR	643.69
05/26/2021	76447	6179	GLENN MILLER PRODUCTIONS INC.	3,500.00
Grand Totals:				468,801.38

Summary by General Ledger Account Number

GL Account	Debit	Credit	Proof
11-00-00-21100	.00	10,687.04-	10,687.04-
11-00-00-44120	25.00	.00	25.00
11-12-00-52210	86.78	.00	86.78

GL Account	Debit	Credit	Proof
11-15-10-53200	310.00	.00	310.00
11-15-10-53990	45.99	.00	45.99
11-16-10-52210	895.27	.00	895.27
11-16-10-52240	1,022.60	.00	1,022.60
11-21-00-52210	974.28	.00	974.28
11-21-00-53120	122.95	.00	122.95
11-21-00-53310	93.00	.00	93.00
11-21-00-53420	470.00	.00	470.00
11-21-00-54150	3,881.83	.00	3,881.83
11-22-00-52210	246.90	.00	246.90
11-22-00-52240	296.87	.00	296.87
11-24-00-44300	100.00	.00	100.00
11-24-00-52620	58.73	.00	58.73
11-32-10-52210	327.12	.00	327.12
11-32-10-52240	601.81	.00	601.81
11-32-13-54200	673.47	.00	673.47
11-51-10-52240	353.75	.00	353.75
11-52-00-52260	75.00	.00	75.00
11-52-01-52240	25.69	.00	25.69
40-00-00-21100	.00	22,363.03-	22,363.03-
40-54-10-10100	18,000.00	.00	18,000.00
40-54-10-52210	95.04	.00	95.04
40-55-10-52210	107.46	.00	107.46
40-55-10-52240	628.65	.00	628.65
40-55-20-52210	31.88	.00	31.88
40-55-30-53000	3,500.00	.00	3,500.00
42-00-00-21100	.00	172.48-	172.48-
42-34-50-52210	172.48	.00	172.48
43-00-00-21100	.00	404,081.00-	404,081.00-
43-22-00-17010	404,081.00	.00	404,081.00
47-00-00-21100	.00	5,699.47-	5,699.47-
47-00-00-57210	2,666.00	.00	2,666.00
47-00-00-57212	2,666.00	.00	2,666.00
47-70-00-57155	367.47	.00	367.47
48-00-00-21100	.00	339.06-	339.06-
48-00-00-52210	89.21	.00	89.21
48-00-00-52220	110.98	.00	110.98
48-00-00-52240	138.87	.00	138.87
61-00-00-21100	.00	1.41-	1.41-
61-00-00-53110	1.41	.00	1.41
62-00-00-21100	.00	15.88-	15.88-
62-00-00-92100	15.88	.00	15.88
99-00-00-21100	.00	25,442.01-	25,442.01-
99-00-00-52160	19,190.95	.00	19,190.95
99-00-00-52210	196.32	.00	196.32
99-00-00-53500	26.28	.00	26.28
99-00-00-53600	1,916.57	.00	1,916.57
99-00-00-54100	2,406.99	.00	2,406.99
99-00-00-54110	277.39	.00	277.39
99-00-00-54120	167.56	.00	167.56
99-00-00-54140	462.04	.00	462.04
99-00-00-55000	340.00	.00	340.00
99-00-00-55100	62.65	.00	62.65

GL Account	Debit	Credit	Proof
99-00-00-55320	395.26	.00	395.26
Grand Totals:	468,801.38	468,801.38	nn
Grand Totals:	468,801.38	468,801.38	.00

Dated:

6/1/2021

Mayor:

Chris Kean

City Council:

John K. Kean

Ken Howell

Joan Yunker

City Recorder:

Report Criteria:

Report type: Summary

Check.Check number = 76344-76345,76415-76447

Check.Type = {<>} "Adjustment"

Bank.Bank account = "043230"

Report Criteria:

Detail report.

Invoices with totals above \$0.00 included.

Only unpaid invoices included.

Invoice.Batch =

"06022021","06022021A","P06112021","P06112021A","P06112021B","P06112021C","F06112021","F06112021A","F06112021B"

Invoice Detail.GL account (2 Characters) = {<>} "61"

Invoice Detail.GL account (2 Characters) = {<>} "62"

Invoice Number	Invoice Date	Description	GL Account and Title	Net Invoice Amount
AMY'S SHIPPING EMPORIUM				
50996	04/06/2021	UPS-GLOBAL APPLIANCE	11-22-00-53120 POSTAGE EXPENSE	11.20
50996	04/06/2021	UPS-MALEK & ASSOC	11-22-00-53120 POSTAGE EXPENSE	11.14
50996	04/06/2021	UPS-GUETZKE & ASSOC	11-22-00-53120 POSTAGE EXPENSE	11.14
51256	04/14/2021	UPS-SJ CARLSON	11-22-00-53120 POSTAGE EXPENSE	12.22
51304	04/15/2021	UPS-MALEK & ASSOC	11-22-00-53120 POSTAGE EXPENSE	13.81
51304	04/15/2021	UPS-FOSTER COACH	11-22-00-53120 POSTAGE EXPENSE	20.32
51842	05/04/2021	UPS-ZOLL MEDICAL	11-22-00-53120 POSTAGE EXPENSE	17.57
Total AMY'S SHIPPING EMPORIUM:				97.40
APHE LLC				
5672	05/12/2021	CPR CARDS/CLASS	11-22-00-56100 CPR CLASS PAY	30.00
Total APHE LLC:				30.00
ATLAS LOCI,LLC				
14127	12/11/2020	LIFE JACKETS	50-22-00-58000 FIRE EQUIPMENT PURCHASES	779.75
14130	12/15/2020	LIFE JACKETS	50-22-00-58000 FIRE EQUIPMENT PURCHASES	191.50
Total ATLAS LOCI,LLC:				971.25
AURORA HEALTH CARE				
1057355	04/12/2021	BLOOD DRAWS	11-21-00-53800 PD SPECIAL INVESTIGATIONS	150.00
1243305	05/02/2021	PRE-EMPLOYMENT EXAMS	11-22-00-58400 PRE-EMPLOYMENT TESTING	288.00
1336254	05/10/2021	BLOOD DRAWS	11-21-00-53800 PD SPECIAL INVESTIGATIONS	75.00
867	05/17/2021	EMP CLINIC-APR	11-10-20-51320 HEALTH AND DENTAL ADMIN CHGS	3,075.00
Total AURORA HEALTH CARE:				3,588.00
BAY LOCK SERVICE				
41604	05/21/2021	LOCKER ROOM LOCK	11-16-10-52400 CITY HALL BUILDING REPAIRS	270.00
Total BAY LOCK SERVICE:				270.00
BOUND TREE MEDICAL LLC				
84034522	04/23/2021	EMS MED SUPPLIES	11-22-00-58100 EMS EQUIPMENT/SUPPLIES	16.23
84041340	04/29/2021	NARCAN-SQUADS	11-21-00-53420 PD SPECIAL EQUIPMENT	296.04
84048070	05/05/2021	EMS MED SUPPLIES	11-22-00-58100 EMS EQUIPMENT/SUPPLIES	303.57
Total BOUND TREE MEDICAL LLC:				615.84
BUMPER TO BUMPER AUTO PARTS				
662-440743	05/13/2021	SPRAYER-#51	11-52-00-53620 GROUNDS FERTILIZER/WEED CONTR	4.19
Total BUMPER TO BUMPER AUTO PARTS:				4.19

Invoice Number	Invoice Date	Description	GL Account and Title	Net Invoice Amount
BUTENUTH, JACOB				
REFUND5/21/2	05/27/2021	JACOB BUTENUTH	40-55-10-23530 SECURITY DEPOSITS-UPPER RIV	1,000.00
REFUND5/21/2	05/27/2021	SETUP AND SECURITY-BUTEN	40-55-10-46740 UPPER RIVIERA REVENUE	325.75
Total BUTENUTH, JACOB:				674.25
CDW GOVERNMENT INC				
C233957	04/23/2021	ANTIVIRUS-SQUADS	11-21-00-53610 PD EQUIP MAINT SERV COSTS	202.16
C363017	05/27/2021	WEBCAMS-SECURITY	43-22-00-17010 FD CAPITAL PROJECTS	1,198.68
C578507	04/30/2021	ADAPTERS FOR SQUADS	11-21-00-53420 PD SPECIAL EQUIPMENT	297.06
C710651	05/04/2021	SRO-COMPUTER	11-21-00-53160 CRIME PREVENTION PROGRAM	1,197.74
D103851	05/12/2021	RIV BALLROOM/OFFICE-INTER	47-70-00-57155 TOURISM MUNICIPAL DEVELOPMENT	276.34
D232950	05/15/2021	RIV BALLROOM/OFFICE-INTER	47-70-00-57155 TOURISM MUNICIPAL DEVELOPMENT	111.36
Total CDW GOVERNMENT INC:				3,283.34
CORNERSTONE COMMUNICATIONS, INC.				
6213	05/06/2021	NEW PHONE SYSTEM	50-00-00-58000 MISC/COMP EQUIP PURCHASES	1,856.25
Total CORNERSTONE COMMUNICATIONS, INC.:				1,856.25
CULLIGAN OF BURLINGTON				
APR 2021	04/30/2021	SOLAR SALT	40-55-20-53600 RIV MAINTENANCE SERVICE COSTS	217.00
Total CULLIGAN OF BURLINGTON:				217.00
DIVE RESCUE INTERNATIONAL				
INV184951	03/16/2021	DRY SUIT,H2O EXHAUST VALVE	11-21-00-53420 PD SPECIAL EQUIPMENT	1,646.35
Total DIVE RESCUE INTERNATIONAL:				1,646.35
DUNN LUMBER				
721139	04/22/2021	(2) POWER STRIPS	11-21-00-52620 PD COMMUNICATION SYS MAINT FEE	16.98
722371	04/23/2021	OSB SHEATHING-FLASHOVER	11-22-00-54120 TUITION REIMB PER CONTRACT	3,096.72
744779	05/14/2021	TOOL HLR,HOOK-JANITOR CLO	40-55-10-53500 BLDG MAINT SUPPLIES-UPPER RIV	23.84
744798	05/14/2021	CLEVIS,KNIFE,HOOK-TREE CR	11-32-13-54300 TREE & BRUSH OPER SUPPLIES	39.97
744933	05/14/2021	SHELVING STUDS	40-55-10-53500 BLDG MAINT SUPPLIES-UPPER RIV	21.92
748259	05/18/2021	MOP HANDLE-VETS PARK	11-52-01-53500 BLDG MAINT & REPAIR	8.99
748581	05/18/2021	PAINT-WEST END VANDALISM	11-52-00-53500 BLDG MAINT SUPPLIES-PARKS	38.49
749412	05/19/2021	BRAKE HANDEL	11-32-13-54300 TREE & BRUSH OPER SUPPLIES	34.99
749432	05/19/2021	BOARDS-TRK #25	11-32-10-53510 VEHICLE/EQUIPMENT MAINTENANCE	76.08
749519	05/19/2021	FLYWHEEL BOLTS	11-52-00-53520 GROUNDS MAINT SUPPLIES	1.99
749585	05/19/2021	NUTS,BOLTS-ZONE SIGNS	42-34-50-52500 KIOSK REPAIRS/SUPPLIES	4.99
750262	05/19/2021	BATTERIES	11-16-10-53500 CITY HALL BLDG MAINT SUPPLIES	6.49
751225	05/20/2021	DUCT TAPE	11-32-10-53400 OPERATING SUPPLIES-STREET DEPT	5.99
Total DUNN LUMBER:				3,377.44
ELDER, SETH				
REIMB 5/24/21	05/24/2021	PARK KIOSK TEST/SCHED SW	42-34-50-53100 OFFICE SUPPLIES	34.82
REIMB 5/24/21	05/24/2021	PARK KIOSK TEST/SCHED SW	40-54-10-46730 BEACH REVENUE	18.96
REIMB 5/24/21	05/24/2021	PARK KIOSK TEST/SCHED SW	42-34-50-46410 PARKING APP NET COLLECTIONS	.83
REIMB 5/24/21	05/24/2021	PARK KIOSK TEST/SCHED SW	11-00-00-24210 SALES TAX PAYABLE	1.09
Total ELDER, SETH:				55.70

Invoice Number	Invoice Date	Description	GL Account and Title	Net Invoice Amount
ELKHORN CHEMICAL CO INC				
633527	05/20/2021	GARBAGE BAGS	40-55-10-52400 UPPER RIVIERA REPAIRS	270.06
633527	05/20/2021	GARBAGE BAGS,LINERS	40-55-20-53500 BLDG MAINT SUPPLIES-LOWER RIV	266.24
Total ELKHORN CHEMICAL CO INC:				536.30
FAIRWYN SB INC				
1520 COBBLE	05/21/2021	1520 COBBLESTONE LN	11-00-00-23540 DEVELOPER DEPOSITS	3,500.00
545 RIDGEVIE	05/21/2021	545 RIDGEVIEW CT	11-00-00-23540 DEVELOPER DEPOSITS	3,500.00
Total FAIRWYN SB INC:				7,000.00
FEDERAL SIGNAL CORP				
7716333	03/30/2021	SOLAR PANEL-STORM SIREN	11-29-00-58000 FIRE SIRENS	484.64
7716334	03/30/2021	COMP UPGRADE-STORM SIRE	11-29-00-58000 FIRE SIRENS	16.00
Total FEDERAL SIGNAL CORP:				500.64
FORD OF LAKE GENEVA				
30044	04/20/2021	FLOOR LINERS-#207	11-21-00-53610 PD EQUIP MAINT SERV COSTS	109.95
30045	04/20/2021	FLOOR LINERS-#207	11-21-00-53610 PD EQUIP MAINT SERV COSTS	109.95
75368	03/17/2021	ELECTRICAL REPAIR-#205	11-21-00-53610 PD EQUIP MAINT SERV COSTS	368.62
75394	03/19/2021	OIL CHANGE/INSPECT-CAR #2	11-22-00-52400 EQUIPMENT REPAIRS-FIRE DEPT	32.79
75731	04/28/2021	BRAKE PADS,ROTORS-#206	11-21-00-53610 PD EQUIP MAINT SERV COSTS	1,173.27
75774	04/28/2021	OIL CHG/AIR BAG REPAIR-#205	11-21-00-53610 PD EQUIP MAINT SERV COSTS	172.13
75816	04/28/2021	TIRE REPAIR-#206	11-21-00-53610 PD EQUIP MAINT SERV COSTS	30.95
75925	05/10/2021	OIL CHANGE-#200	11-21-00-53610 PD EQUIP MAINT SERV COSTS	30.09
75927	05/10/2021	OIL CHANGE-#201	11-21-00-53610 PD EQUIP MAINT SERV COSTS	33.65
75961	05/12/2021	OIL CHANGE-#207	11-21-00-53610 PD EQUIP MAINT SERV COSTS	33.65
Total FORD OF LAKE GENEVA:				2,095.05
GENERAL COMMUNICATIONS, INC.				
291373	03/02/2021	PORTABLE RADIOS	11-21-00-58100 EQUIPMENT OUTLAY	3,425.10
291686	03/12/2021	FIRE TONES-SERVICE CALL	11-21-00-53420 PD SPECIAL EQUIPMENT	150.00
292063	03/22/2021	FIRST NET INSTALL	11-21-00-52210 PD TELEPHONE EXPENSE	750.00
292817	04/13/2021	FIRST NET INSTALL	11-21-00-52210 PD TELEPHONE EXPENSE	4,300.00
293177	04/20/2021	FIRST NET INSTALL	11-21-00-52210 PD TELEPHONE EXPENSE	290.00
293537	04/29/2021	DISPATCH SIGNAL TOWERS	11-21-00-52620 PD COMMUNICATION SYS MAINT FEE	1,950.00
Total GENERAL COMMUNICATIONS, INC.:				10,865.10
GENEVA AUTO BODY				
WM000642460	03/08/2021	INS CLAIM DEDUCTIBLE-#203	11-10-00-52450 EXPENSES SUBJECT TO INS CLAIM	2,500.00
WM000642460	03/08/2021	INS CLAIM DEDUCTIBLE-#203	11-10-00-52450 EXPENSES SUBJECT TO INS CLAIM	14,775.90
Total GENEVA AUTO BODY:				17,275.90
GENEVA ONLINE INC				
1114143	05/03/2021	EMAIL SVC-APR	11-21-00-52210 PD TELEPHONE EXPENSE	39.00
Total GENEVA ONLINE INC:				39.00
GFL ENVIRONMENTAL INC.				
V20000012302	05/15/2021	ST SWEEPINGS DISPOSAL	11-36-00-52960 SOLID WASTE-STREET DEPT	789.07

Invoice Number	Invoice Date	Description	GL Account and Title	Net Invoice Amount
Total GFL ENVIRONMENTAL INC.:				789.07
GRAND MISSION				
051821.1	05/18/2021	PHLOWFEST MARKETING-MIC	47-70-00-57150 PROMOTIONAL GRANT	2,000.00
Total GRAND MISSION:				2,000.00
ITU ABSORB TECH INC				
7694722	05/14/2021	MATS,DUST MOP	40-55-10-52400 UPPER RIVIERA REPAIRS	97.86
7703283	05/27/2021	MATS	11-16-10-53600 CITY HALL MAINT SERVICE COSTS	125.97
Total ITU ABSORB TECH INC:				223.83
JAMES IMAGING SYSTEMS INC				
1066787	04/19/2021	TOSH ES3555C-APR	11-21-00-55310 COPY MACHINE & SHREDDING SVC	129.31
1066788	04/19/2021	TOSH ES357-APR	11-21-00-55310 COPY MACHINE & SHREDDING SVC	40.29
Total JAMES IMAGING SYSTEMS INC:				169.60
JOHNS DISPOSAL SERVICE INC				
646003	05/13/2021	2 YD DUMPSTER	48-00-00-53600 CEM MAINT SERVICE EXP	159.00
Total JOHNS DISPOSAL SERVICE INC:				159.00
KAPUR & ASSOCIATES INC				
106506	02/22/2021	ENG SVCS-VISTAS OF LG	11-00-00-13910 A/R BILL OUTS	561.00
106507	02/22/2021	ENG SVCS-STONERIDGE PHS II	11-00-00-13910 A/R BILL OUTS	10,483.58
106512	02/22/2021	ENG SVCS-SYMPHONY BAY PH	11-00-00-13910 A/R BILL OUTS	7,547.56
106513	02/22/2021	ENG SVCS-PLAS-TECH	11-00-00-13910 A/R BILL OUTS	49.00
106514	02/22/2021	ENG SVCS-300 PELLER RD BP	11-00-00-13910 A/R BILL OUTS	40.00
106515	02/22/2021	ENG SVCS-KWIK TRIP WELLS S	11-00-00-13910 A/R BILL OUTS	98.00
106516	02/22/2021	BLOOMFIELD RD-TAP GRANT	43-52-00-53100 TAP GRANT CAPITAL PROJECTS	207.50
106517	02/22/2021	LG GIS REQUESTS	11-69-30-52120 OUTSIDE PROFESSIONAL PLANNING	83.00
106535	02/23/2021	2020 LG PAVING PROGRAM	43-32-10-17010 2020/2021 STREET IMP PROGRAM	2,164.00
106537	02/23/2021	2021 LG ST PROGRAM	43-32-10-17010 2020/2021 STREET IMP PROGRAM	7,339.00
106538	02/23/2021	ENG SVCS-SNAKE RD	43-32-10-17010 2020/2021 STREET IMP PROGRAM	2,473.00
106544	02/23/2021	2021 LG PLAN REVIEW	11-00-00-13910 A/R BILL OUTS	209.00
Total KAPUR & ASSOCIATES INC:				31,254.64
LAKE GENEVA ANIMAL HOSPITAL				
598974	04/30/2021	PICKUP/BOARD	11-21-00-52910 CARE OF STRAY ANIMALS	50.00
Total LAKE GENEVA ANIMAL HOSPITAL:				50.00
LAKE GENEVA BID				
2020 HOLIDAY	05/19/2021	FINAL PYMT-2020 BID HOL GRA	47-70-00-57150 PROMOTIONAL GRANT	2,000.00
Total LAKE GENEVA BID:				2,000.00
LAKE GENEVA JAYCEES				
FIREWORKS-2	06/01/2021	FIREWORKS CONTRIBUTION-2	40-54-10-57800 VENETIAN FESTIVAL FIREWORKS	10,000.00
Total LAKE GENEVA JAYCEES:				10,000.00

Invoice Number	Invoice Date	Description	GL Account and Title	Net Invoice Amount
LAKE GENEVA UTILITY				
1520 COBBLE	04/19/2021	1520 COBBLESTONE LN	45-00-00-24520 WATER IMPACT FEES	1,690.00
1520 COBBLE	04/19/2021	1520 COBBLESTONE LN	45-00-00-24530 SEWER IMPACT FEES	1,865.00
1825 MILLER	05/06/2021	1825 MILLER CT	45-00-00-24520 WATER IMPACT FEES	1,690.00
1825 MILLER	05/06/2021	1825 MILLER CT	45-00-00-24530 SEWER IMPACT FEES	1,865.00
545 RIDGEVIE	04/19/2021	545 RIDGEVIEW CT	45-00-00-24520 WATER IMPACT FEES	1,690.00
545 RIDGEVIE	04/19/2021	545 RIDGEVIEW CT	45-00-00-24530 SEWER IMPACT FEES	1,865.00
Total LAKE GENEVA UTILITY:				10,665.00
LAKELAND ANIMAL SHELTER				
PPTAX-REFUN	05/27/2021	REFUND OVERPYMT PP TAX Z-	89-00-00-12120 PERS PROP TAXES RECEIVABLE	116.86
Total LAKELAND ANIMAL SHELTER:				116.86
LASER ELECTRIC SUPPLY				
1482633-00	05/13/2021	LIGHT BULBS	11-16-10-53500 CITY HALL BLDG MAINT SUPPLIES	253.04
1482633-00	05/13/2021	LIGHT BULBS	11-51-10-52400 MUSEUM-MAINTENANCE & REPAIRS	22.75
Total LASER ELECTRIC SUPPLY:				275.79
MACCARRB				
INV031532	05/12/2021	BEER SYSTEM REVIEW	40-55-10-53600 UPPER RIVIERA MAINTENANCE	100.00
Total MACCARRB:				100.00
MALEK & ASSOCIATES CONSULTANTS				
6210	04/16/2021	FA REVIEW-MM CARRIAGE HSE	11-22-00-57500 SPRINKLER SYSTEMS EXPENSES	682.50
Total MALEK & ASSOCIATES CONSULTANTS:				682.50
MARED MECHANICAL				
122982	04/30/2021	HVAC PREV MAINT	11-16-10-53600 CITY HALL MAINT SERVICE COSTS	836.00
122984	04/30/2021	HVAC PREV MAINT	11-51-10-52400 MUSEUM-MAINTENANCE & REPAIRS	549.00
123378	04/30/2021	HVAC LEAK REPAIR	11-16-10-52400 CITY HALL BUILDING REPAIRS	3,297.47
Total MARED MECHANICAL:				4,682.47
MARTIN GROUP				
1274409	04/20/2021	KONICA 20-APR	11-21-00-55310 COPY MACHINE & SHREDDING SVC	20.09
Total MARTIN GROUP:				20.09
MERCYCARE INSURANCE				
REFD 5/20/21	05/20/2021	REFD EMS OVERPAYMENT	11-22-00-46240 FIRE/EMS BILLING REVENUE	889.00
Total MERCYCARE INSURANCE:				889.00
MIDSTATE EQUIPMENT				
N31357	05/19/2021	JOHN DEERE-CEMETERY	48-00-00-52500 CEM EQUIP MAINT/REPAIRS	1,500.00
N31357	05/19/2021	JOHN DEERE-CEMETERY	11-32-10-52500 ST DEPT EQUIPMENT REPAIRS	8,122.37
Total MIDSTATE EQUIPMENT:				9,622.37
MIDWEST DOOR COMPANY				
3713	05/18/2021	1070-DOOR #1 REPAIR	11-32-10-53600 ST DEPT BLDG MAINT SERV COSTS	625.00

Invoice Number	Invoice Date	Description	GL Account and Title	Net Invoice Amount
Total MIDWEST DOOR COMPANY:				625.00
MIKES AUTO REPAIR INC				
59005	04/29/2021	BATTERY-CAR #2	11-22-00-52400 EQUIPMENT REPAIRS-FIRE DEPT	308.34
59006	05/05/2021	BATTERY-CAR #1	11-22-00-52400 EQUIPMENT REPAIRS-FIRE DEPT	245.79
Total MIKES AUTO REPAIR INC:				554.13
OFFICE DEPOT				
17161714001	05/14/2021	ADDING MACH TAPE,COMP AIR	11-16-10-53100 CITY HALL OFFICE SUPPLIES	21.34
171975248001	05/12/2021	COPY PAPER	11-16-10-53100 CITY HALL OFFICE SUPPLIES	156.22
171975248001	05/12/2021	COPY PAPER	42-34-50-53100 OFFICE SUPPLIES	31.26
174607329001	05/21/2021	LAMINATING POUCHES	11-15-10-53100 ACCTG OFFICE SUPPLIES	38.78
174607329001	05/21/2021	PENCIL CUPS,SCISSORS,CLPB	40-54-10-53100 BEACH OFFICE SUPPLIES	42.53
174670182001	05/21/2021	TALLY COUNTERS-BEACH	40-54-10-53100 BEACH OFFICE SUPPLIES	47.99
Total OFFICE DEPOT:				338.12
OFFICE PRO INC				
0412931-001	02/24/2021	TRASH BAGS	11-52-00-53500 BLDG MAINT SUPPLIES-PARKS	2,789.50
0417765-001-1	03/11/2021	TRASH BAGS	11-52-00-53500 BLDG MAINT SUPPLIES-PARKS	164.84
Total OFFICE PRO INC:				2,954.34
OTIS ELEVATOR COMPANY				
100400369988	05/09/2021	ANNUAL ELEV MAINT	11-16-10-53600 CITY HALL MAINT SERVICE COSTS	3,916.20
Total OTIS ELEVATOR COMPANY:				3,916.20
PATS SERVICES INC				
A-214427	05/14/2021	PORT A POTTY SVC-MAY	48-00-00-52260 CEM WATER/SEWER EXP	220.00
Total PATS SERVICES INC:				220.00
QUILL CORPORATION				
16040896	04/14/2021	PAPER,ENVELOPES,MOUSE PA	11-21-00-53100 PD OFFICE SUPPLIES	95.72
16242608	04/22/2021	PAPER	11-21-00-53100 PD OFFICE SUPPLIES	135.96
16271420	04/23/2021	PAPER	11-21-00-53100 PD OFFICE SUPPLIES	19.29
Total QUILL CORPORATION:				250.97
RODBRO, DANIELLE				
REFUND05222	05/27/2021	DANIELLE RODBRO	40-55-10-23530 SECURITY DEPOSITS-UPPER RIV	1,000.00
REFUND05222	05/27/2021	SETUP AND SECURITY-RODBR	40-55-10-46740 UPPER RIVIERA REVENUE	336.75
Total RODBRO, DANIELLE:				663.25
ROTE OIL COMPANY				
2114000215	05/20/2021	439.7 GALS CLEAR DIESEL	11-32-10-53410 VEHICLE-FUEL & OIL	1,191.15
2114000216	05/20/2021	402 GALS DYED DIESEL	11-32-10-53410 VEHICLE-FUEL & OIL	964.39
Total ROTE OIL COMPANY:				2,155.54
SHERWIN-WILLIAMS COMPANY				
6290-4	05/18/2021	PAINT-PIERS	40-52-10-53510 EQUIP MAINT SUPP-BUOYS,STALLS	353.60

Invoice Number	Invoice Date	Description	GL Account and Title	Net Invoice Amount
Total SHERWIN-WILLIAMS COMPANY:				353.60
SHRED-IT				
8182085442	05/22/2021	SHREDDING SVC-MAY	11-16-10-53600 CITY HALL MAINT SERVICE COSTS	22.66
Total SHRED-IT:				22.66
SIGNATURE SIGNS LLC				
5655	04/28/2021	LETTERING REPLACE-#203	11-21-00-53610 PD EQUIP MAINT SERV COSTS	128.00
5660	05/11/2021	"PAY BY PLATE"/"PAY METER" S	42-34-50-53400 OPERATING SUPPLIES-ENFORCEMEN	388.00
Total SIGNATURE SIGNS LLC:				516.00
SIREN SERVICES				
152	05/12/2021	PM ANNUAL INSPECT-SQ1	11-22-00-58200 STATE MANDATED EQUIP TESTING	757.77
153	05/12/2021	PM ANNUAL INSPECT-ENG1	11-22-00-58200 STATE MANDATED EQUIP TESTING	757.77
Total SIREN SERVICES:				1,515.54
SOMAR TEK LLC/SOMAR ENTERPRISE				
102265	04/27/2021	(4) RADIO HOLDERS	11-21-00-58100 EQUIPMENT OUTLAY	142.36
102286	05/12/2021	UNIFORM-GREETHAM	11-21-00-51380 PD UNIFORM ALLOWANCE	30.95
Total SOMAR TEK LLC/SOMAR ENTERPRISE:				173.31
SOUTHERN LAKES ALARM INC				
1255	04/28/2021	CAMERAS-SECURITY	43-22-00-17010 FD CAPITAL PROJECTS	5,564.42
Total SOUTHERN LAKES ALARM INC:				5,564.42
ST FRANCIS DE SALES				
45-001747	05/14/2021	GRANT-LEARNING TO SOAR	11-70-00-57800 AVIAN COMMITTEE EXPENSES	111.78
Total ST FRANCIS DE SALES:				111.78
STATE BAR OF WISCONSIN				
5093158	05/07/2021	WI PUB RECORDS UPDATE	11-21-00-53990 PD MISCELLANEOUS EXP	108.00
Total STATE BAR OF WISCONSIN:				108.00
STREICHERS				
I1500636	05/03/2021	UNIFORM-BOULAND	11-21-00-51380 PD UNIFORM ALLOWANCE	95.00
Total STREICHERS:				95.00
SYSTEMS DESIGN				
20173	05/06/2021	IRRIGATION START UP-RIV	40-55-20-53500 BLDG MAINT SUPPLIES-LOWER RIV	409.33
Total SYSTEMS DESIGN:				409.33
TELEFLEX LLC				
9503887135	04/22/2021	EZ-10 VASCULAR ACCESS PAC	11-22-00-58100 EMS EQUIPMENT/SUPPLIES	41.07
9503893069	04/23/2021	EZ-IO POWER DRIVER	11-22-00-58100 EMS EQUIPMENT/SUPPLIES	307.38
Total TELEFLEX LLC:				348.45

Invoice Number	Invoice Date	Description	GL Account and Title	Net Invoice Amount
TOP PACK DEFENSE LLC				
5994	04/26/2021	INITIAL ISSUE-CHEMIN	11-21-00-51390 PART TIME UNIFORM EXPENSE	149.14
6135	05/08/2021	UNIFORM-NETTESHEIM	11-21-00-51380 PD UNIFORM ALLOWANCE	222.97
6136	05/08/2021	UNIFORM-WISNIEWSKI	11-21-00-51380 PD UNIFORM ALLOWANCE	130.48
Total TOP PACK DEFENSE LLC:				502.59
TOTAL PARKING SOLUTIONS INC				
105300	05/21/2021	CMS MONITORING-JUN	42-34-50-54500 SUPPORT CONTRACTS	3,445.00
TOTAL PARKING SOLUTIONS INC:				3,445.00
TRANS UNION LLC				
04117032	04/25/2021	BACKGROUND CHECKS	11-21-00-54110 PD APPLICATION PROCESS	63.16
Total TRANS UNION LLC:				63.16
UNIFORM SHOP, THE				
310481	05/12/2021	EMBLEMS	11-21-00-51390 PART TIME UNIFORM EXPENSE	302.00
Total UNIFORM SHOP, THE:				302.00
VINDICTIVE VINYL				
4938	05/02/2021	REPAIR DOOR WRAP-#203 CRA	11-10-00-52450 EXPENSES SUBJECT TO INS CLAIM	150.00
4951	05/18/2021	DOOR WRAPS-206/207	50-21-00-58000 POLICE EQUIPMENT PURCHASES	1,025.00
Total VINDICTIVE VINYL:				1,175.00
WALWORTH COUNTY SHERIFF				
APR 2021	04/27/2021	RANGE USE FEES-2021	11-21-00-54110 PD APPLICATION PROCESS	600.00
Total WALWORTH COUNTY SHERIFF:				600.00
WINDY CITY LINEN				
200549	05/18/2021	LINEN-WOLF WEDDING	40-55-10-46740 UPPER RIVIERA REVENUE	168.29
Total WINDY CITY LINEN:				168.29
WISCONN VALLEY MEDIA GROUP				
43928	05/02/2021	RIV BALL-AD	40-55-10-53160 PUBLICATIONS & PROMOTIONS	390.77
69243	05/13/2021	LN-3/8/21 COUNCIL MINUTES	11-10-00-53140 OFFICIAL PUBLICATIONS & NOTICE	315.37
69246	05/13/2021	LN-3/12/21 COUNCIL MINUTES	11-10-00-53140 OFFICIAL PUBLICATIONS & NOTICE	154.92
69247	05/13/2021	LN-4/12/21 COUNCIL MINUTES	11-10-00-53140 OFFICIAL PUBLICATIONS & NOTICE	182.65
Total WISCONN VALLEY MEDIA GROUP:				1,043.71
WOLF, LIZ				
REIMB 5/14/21	05/19/2021	REIMB-WOLF 5/14/21-SEC DEP	40-55-10-23530 SECURITY DEPOSITS-UPPER RIV	1,000.00
REIMB 5/14/21	05/19/2021	REIMB-WOLF 5/14/21-SEC GRD,	40-55-10-46740 UPPER RIVIERA REVENUE	376.75-
Total WOLF, LIZ:				623.25
ZOLL MEDICAL CORPORATION				
3276047	04/27/2021	PEDIATRIC ADHESIVE SENSOR	11-22-00-58100 EMS EQUIPMENT/SUPPLIES	261.80
Total ZOLL MEDICAL CORPORATION:				261.80

Invoice Number	Invoice Date	Description	GL Account and Title	Net Invoice Amount
Grand Totals:				157,779.66

Dated: 6/1/2021Mayor: Charles KleinCity Council: Robert NelsonKen Arnold
John Funches

City Recorder: _____

Report Criteria:

Detail report.

Invoices with totals above \$0.00 included.

Only unpaid invoices included.

Invoice.Batch =

"06022021","06022021A","P06112021","P06112021A","P06112021B","P06112021C","F06112021","F06112021A","F06112021B"

Invoice Detail.GL account (2 Characters) = {<>} "61"

Invoice Detail.GL account (2 Characters) = {<>} "62"