		Cust. 1177260	
ORIGINAL ALCOHOL BEVERAGE RETAIL LICE	NSE APPLICATION	Applicant's WI Seller's Permit No.: FEIN	
Submit to municipal clerk.		LICENSE REQUESTED	
For the license period beginning Aug II	20 <u>/ / _</u> ;	TYPE Class A beer	FEE S
ending June 30	20 _ 18	Class B beer	s
☐ Town of •		Class C wine	15 91,74
TO THE GOVERNING BODY of the: Village of	rosse	Class A liquor	\$
City of	1030 =	Class A liquor (cider only)	\$ N/A
,	ne total Process	Class B liquor	\$
County of LaCrosse Aldermanic Dist. No	(if required by ordinance)	Reserve Class B liquor	S
- English English M	LIMITED LIABILITY COMPANY	Class B (wine only) winery	
1. The named   INDIVIDUAL   PARTNERSHIP   XIII   CORPORATION/NONPROFIT ORGANIZATION	FIMILED ENDIETL L'OOMENAL	Publication fee	5 20.00
hereby makes application for the alcohol beverage license(s) checket	ad ahove	TOTAL FEE	5 111.74
nereby makes application for the accuracy fact middle competitional	iu above. Nimitad liabililu aamaaniae aiva rar	nictored name):	•
2. Name (individual/partners give last name, first, middle: corporations/	thursed transitive combanies dive ted	Asia co name).	
An "Auxiliary Questionnaire," Form AT-103, must be completed	and attached to this application	n by each individual applicant.	by each member of a
partnership, and by each officer, director and agent of a corpora liability company. List the name, title, and place of residence of ea	ch person.	and by each membermanager a	Office & Zip, Code  (SISSEEM 5466
Secretary/Member			
Treasurer/Member	N5221 State	Ad 108, West S	alem WI
Directors/Managers			
3. Trade Name > Big Boar BBQ + Cal	tering Business	Phone Number	<del></del>
4. Address of Premises 1/8 3rd S+5 Suite D	<u>- Ô</u> Post Offi	ce & Zip Code LA CiCos's	E WESYEN '
5. Is individual, partners or agent of corporation/limited liability compan	ny subject to completion of the res	ponsible beverage server	
training course for this license period?			
6. Is the applicant an employe or agent of, or acting on behalf of anyor	ne except the named applicant?		Yes No
7. Does any other alcohol beverage retail licensee or wholesale permit	ttee have any interest in or control	of this business?	🗌 Yes 🔀 No
8. (a) Corporate/limited liability company applicants only: Insert	state LDL and d	ate of registration.	
(b) Is applicant corporation/limited liability company a subsidiary of	any other corporation or limited lia	ability company?	🗌 Yes 🔀 No
(c) Does the corporation, or any officer, director, stockholder or age	ent or limited liability company, or a	any member/manager or	Yes 🗍 No
agent hold any interest in any other alcohol beverage license or			(£) 165 [] 110
(NOTE: All applicants explain fully on reverse side of this form every			
<ol> <li>Premises description: Describe building or buildings where alcohol the all rooms including living quarters, if used, for the sales, service, containing the sold and stored only on the premises described.)</li> </ol>	nsumption, and/or storage of alcol	hol beverages and records. (Alcoh	ol beverages
10. Legal description (omit if street address is given above):			
11. (a) Was this premises licensed for the sale of liquor or beer during	the past license year?		Æ Yes ☐ No
(b) If yes, under what name was license issued? Bis Roac	Syndos CCC	47.111	:truomA triamys
12. Does the applicant understand they must file a Special Occupational	I Tax return (TTB form 5630.5d)		<u></u>
		OKERS.FFC	N3260 EBIG BOARTS
13. Does the applicant understand they must hold a Wisconsin Seller's	Permit?	M945:10 7102/21/70	
[phone (608) 266-2776]			08365 Lez Brillis 1578 no 6
14. Does the applicabil understand that they must purchase alcohol bev	erages only from Wisconsin whok	esalers, breweries and brewpups	ATY OF LA CROSEF.
READ CAREENLY SEPORE SIGNING: Urder penalty provided by law, the appended of the signers. Signers agree to operate his business according to law are another. (Individual applicants and each member of a partnership applicant must	nd that the rights and responsibilities	conferred by the license(s), if grante	d, will not be assigned to
another. (legityddiai appticapts and each member yr a partnersnip appticant most access to any postion of aticensed pri mises during inspection will be deemed a n	efusal to permit inspection. Such refu	sal is a misdemeanor and grounds for	revocation of this license.
SUBSCRIBEDIAND SWORN TO BEFORE ME		, 10	
this 22 hay of Chile .20	17 /	11/5-	_
Brain Strain	10 Ticol Pol Corboration	Action to a Market of Limited Liability C	ompany/Portner/Individual)
My commission par Wy 12017	(Officer of Corpo	ration (Member/Manager of Limited Liabi	lity Company/Partner)
My commission (Spicer VV ) (20)	(Additional Part	ner(s)/Member/Managor of Limited Liab	lity Company if Any)
TO BE COMPLETED BY CLERK			
Date received and filed   Date reported to council board   Date re	ate provisional license issued	Signature of Clerk / Deputy Clerk	1
	cense number issued		1
<u> </u>		148	sin Donattment of Powers
ÄT-105 (R. 9-16)		VVISCON	sin Department of Revenue

## 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 All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating all corporations and agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) in the corporation or members/managers of a limited liability company and the recommendation made by the proper of the corporation or members/managers of a limited liability company and the recommendation made by the proper of the corporation of the c
ocal official. Town Crosse County of La Crosse
To the governing body or: Village of 200 0100000000000000000000000000000000
The undersigned duly authorized officer(s)/members/managers of
a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as
located at 118 3 rol ST S, La Crosse WI
appoints SERALD BEYER  (name of appointed agent)  V 5521 State Rd 108 West Salem, W1
(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).  RIG BODO SMOVERS ILC (Location in West Salem,
A responsible heverage server training course?
How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 34 years
Place of residence last year N5521 State Rd 108, West Salem
For: Big Boar Smokers LLC (name of corporation/organization/limited liability company)
By: (signature of Officer/Member/Manager)
And: Hanna Doya (signature of Officer/Member/Manager)
ACCEPTANCE BY AGENT
I, Gerald Theyer hereby accept this appointment as agent for the (printitype 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.
(signature of agent)  7-12-17 Agent's age
N5521 St R. 108 West Follow WI 54669 Date of birth (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 OT (8 201) by Approved on OT (8 201) by Approved of proper local office (town chair, village president, police chief)