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

Submit to municipal clerk. All corporations/organizations or limited liability companies applying for a license to sell fermented mait beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official. Town La Crosse City of La Crosse ☐ Village To the governing body of: **♥** City Kwik Trip, Inc. The undersigned duly authorized officer(s)/members/managers of ___ (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 Kwik Trip 391 1333 Rose Street, La Crosse, WI 54603 located at _ Travis M. Soland appoints _____ (name of appointed agent) W6755 Strawberry Rd., Onalaska, WI 54650 (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? If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies). Agent Kwik Trip #311, Holmen, WI, until the new agent is approved. Is applicant agent subject to completion of the responsible beverage server training course? Yes **Since 2004** How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? Place of residence last year W6755 Strawberry Rd., Onalaska, WI 54650 Kwik Trip, Inc. (name of corporation/organization/limited liability company) of Officer(Member/Manager) (signature of Officer/Mernber/Meneger) ACCEPTANCE BY AGENT horeby accept this appointment as agent for the Travis M. Soland (print/lype 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. Agent's age (signature of agent) W6755 Strawberry Rd., Onalaska, WI 54650 Date of birth (home address of agent) APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official) ું નું 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 armedisfactory and I have no objection to the agent appointed Title (lown chair, village president police chief) (signature of proper total official) (dato) Wisconsin Department of Revenue