Schedule for Appointment of Agent by Corporation / Nonprofit
Organization or Limited Liability Company

	Submit to muni			18	W 15
All corporations/organizations or limited liability must appoint an agent. The following questic corporation/organization or one member/man	ons must be answered by	y the agent. Th	ne appointment m	ust be signed by	an officer of the
☐ Town			75	17 68	Chite F
To the governing body of: Uillage	of La Crosse		County of L	a crasse	Clarifica VV
∠ City				191	(E)
The undersigned duly authorized officer/me	mber/manager of	Viterbo (Registered Nam	University	Y SI anization or Limited Lie	bility Gompany)
a corporation/organization or limited liability of	company making applicat		E		
Reinhart Center	ompany making applicat	011 101 411 41001	ioi bovolago noon	ioo ioi a promisos	,
	(Trade N	ame)			
located at 900 Viterbo Drive,	La Crosse WI	54601			
appoints Richard C. Trietle	У				
	(Name of Appoi			EC	
4325 Mariah Dr N,					x
	- (Home Address of A	ppointea Agent)	•		
to act for the corporation/organization/limited to alcohol beverages conducted therein. Is a organization/limited liability company having	applicant agent presently	acting in that of	capacity or reques	sting approval for	any corporation/
✓ Yes No If so, indicate the conviter to Univertisy	rporate name(s)/limited li	ability compan	y(ies) and municip	pality(ies).	
		on or training	course? X Ye	es 🗀 No	
Is applicant agent subject to completion of the				10	vears
How long immediately prior to making this ap	plication has the applica-	nt agent reside	continuously in	VVISCO(ISIII:	
Place of residence last yearLa Cros	se				
For: Viterbo					
P.v.	(Name of Corpo	oration / Organizati	ion / Limited Liability C	Company)	
Ву:	(Sic	nature of Officer /	Member / Manager)		
Any person who knowingly provides materia \$1,000.	, 5		= :	required to forfeit	not more than
	ACCEPTANCE	BY AGENT			
, Richard C. Trietley			hereby accen	ot this appointment	as agent for the
(Print / Type A	gent's Name)		, nereby accep	t and appointment	ac agoin for the
corporation/organization/limited liability corbeverages conducted on the premises for the	npany and assume full	responsibility on/limited liabi	for the conduct o	of all business re	lative to alcohol
(Jelic. Duy	5)	4/4/	123	Agent's age <u>5</u>	8
(Signature of Agent 432 5 Mariah Dr N, La	rosse, WI 5460	1	ate)	Date of birth	
	Address of Agent)	3	*		
	ROVAL OF AGENT BY erk cannot sign on beh				
I hereby certify that I have checked municip the character, record and reputation are sat	al and state criminal rec	ords. To the be	est of my knowled agent appointed	lge, with the avail	able information,
Approved on by			Title		
(Date)	(Signature of Proper Lo	ocal Official)	(7	Town Chair, Village Pre	esident, Police Chief)
AT.104 /R 4-18\				Wisconsli	n Department of Revenue

AT-104 (R. 4-18)