Agent Change Check Off Sheet

Agent Name: <u>Jewelle Becker</u>
Trade Name: Countyard by Marriott
Address: 500 Front St S
Council Meeting: Aug. 13, 2015
Municipal Court: HOLD (OK)
Police: HOLD / OK
HOLD IOK Training Course Completed:
Date: $\frac{7/20/15}{}$
Comments: Liverse #97

CITY OF LA CROSSE, WI

Seneral Billing - 127884 - 2015 001991-0050 Tara F. 07/20/2015 01:06PM SCHEDULE FOR APPOINTMENT OF AGENT BYSCORPORATION/NONPROFILE ORGANIZATION OR LIMITED LIABILITY COMPANY

Submit to municipal clerk

AT-104 (R. 4-09)

Payment Amount:

10.00

Submit to i	manucipai cio	H IV.						
liquor must	t appoint an a coration/orga	agent.	The following	g que	stions must be ansv	rered by the agent. $ eal$	he appointr	f malt beverages and/or intoxication in the mast be signed by the officer (commendation made by the prop
To the gov	erning body	of:	☐ Village ✓ City	of_	La Crosse		County of	La Crosse
The under	signed duly a	author	ized officer(s)/mei	mbers/managers of	Riverfront Hote (registered name	Inc. of corporation/o	organization or limited liability company)
	on/organizati Courtyard b				npany making applik	ation for an alcohol	beverage lic	ense for a premises known as
					(trade	name)		
located at	500 Front	Stree	et S., La Cro	osse,	,			
appoints	Jenelle M	larie i	Becker		(name of an	pointed agent)	- ·	
	123 Susan Court, West Salem, WI 54669							
				., ,		f appointed agent)		
to alcohol I	beverages co	onduc	ted therein. I	s app	licant agent present	ily acting in that cap	acity or requ	premises and of all business relati uesting approval for any corporation or location in Wisconsin?
Yes	™ No	lf so,	indicate the	corpo	orate name(s)/limited	d liability company(is	es) and muni	icipality(les).
la applicaci		-4.4-		. 44				Yes No
• •	•		•		•	e server training cou		
How long in	mmediately p	orior to	making this	appli	cation has the appli	cant agent resided o	ontinuously	in Wisconsin? 59 Years
Place of re	esidence last	year	123 Susa	ın Co	ourt, West Salem,	WI 54669		
		_	Divertrent	امام	Line DRA Courts	ard by Marriott La	Crossa	<u> </u>
		For:	RIVEIIION	HOIE		corporation/organization/		company
		D.e.	7.	1	X	6-		7/20/15
		Dy.	C.		man.	(signature of Officer/Men	nber/Manager)	anage 100/1)
		And:	21110	1	mah	Sales	Mana	aby 7/20/15
		rw.a.	A Department	-0		(signature of Officer/Men	nber/Manager)	0
	<u></u>		<i>y</i> -		ACCEPTAN	CE BY AGENT		
Jeneil	le Marle Bed	cker					hereby sec	cept this appointment as agent for t
1,			(print/type	egent	's neme)		, nereby acc	ept this appointment as agent for
						ill responsibility for ation/limited liability		ct of all business relative to alcoh
-	their	بع	Bu	Ke	٨	07/20/2015		Agent's age
400 0	l non Count I		nature of agent) Colore VAIL		<u> </u>	(date)		man and the state
123 508	san Court, V	ABS!			fress of agent)			Date of birth
						Y MUNICIPAL AUT		
						ecords. To the best o objection to the ag		ledge, with the avallable informational ced.
Annessad	on		hu				Title	•
Approved (On(dat	le)	Uy		(signature of prope	r locel official)		(town chair, village president, police chic
AT-104 (R. 4-09	<u> </u>							Wisconain Department of Reve