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.

Town

To the governing body of:

Village of La Crosse

County of La Crosse

☐ Town					
Fo the governing body of: Uillage of La Crosse	County of La Crosse				
✓ City					
The undersigned duly authorized officer/member/manager of People's	Food Co-op INC				
(Register	red Name of Corporation / Organization or Limited Liability Company)				
a corporation/organization or limited liability company making application for a	n alcohol beverage license for a premises known as				
People's Food Cooperative Inc.					
(Trade Name)					
ocated at 315 5th Ave. S. La Crosse, WI 54601					
appoints Jason Krautkramer	41				
(Name of Appointed Agen 4109 State Rd., La Crosse WI	y				
(Home Address of Appointed A	Agent)				
o act for the corporation/organization/limited liability company with full author	ity and control of the premises and of all business relative				
o alcohol beverages conducted therein. Is applicant agent presently acting in organization/limited liability company having or applying for a beer and/or lique	n that capacity or requesting approval for any corporation/				
Yes • No If so, indicate the corporate name(s)/limited liability co	ompany(ies) and municipality(ies).				
s applicant agent subject to completion of the responsible beverage server tra	aining course? 🗾 Yes 🗌 No				
How long immediately prior to making this application has the applicant agent	resided continuously in Wisconsin? 49 years				
Place of residence last year 4109 State Rd., La Crosse V					
For: teoples tood (00)					
(Name of Corporation / Organization / Limited Liability Company)					
By: (Signature of Officer / Member / Manager)					
Any person who knowingly provides materially false information in an applicat \$1,000.	ion for a license may be required to forfeit not more than				
ACCEPTANCE BY AG	ENT				
Jason Andrew Krautkramer	, hereby accept this appointment as agent for the				
(Print / Type Agent's Name)	, , , , , , , , , , , , , , , , , , , ,				
corporation/organization/limited liability company and assume full respons					
peverages conducted on the premises for the corporation/organization/limite					
Character 114 Tax	/31/2-25 19				
(Signature of Agent)	/3//2>25 Agent's age 49				
4109 State Rd. La Crossee, WI 54601	Date of birth				
(Home Address of Agent)	Sate of birth				
	DAL ALITHODITY				
APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)					
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hereby certify that I have checked municipal and state criminal records. To	the best of my knowledge, with the available information,				

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	by		Title	
(Date)		(Signature of Proper Local Official)		(Town Chair, Village President, Police Chief)