

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village City of LaCrosse County of LaCrosse

The undersigned duly authorized officer(s)/members/managers of A&F Billiards Inc
(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 Top Shots Pool & Darts
(trade name)

located at 137 S. 4th St, LaCrosse, WI 54601

appoints Joseph W. Zenz
(name of appointed agent)

134 Susan Ct. West Salem, WI 54669
(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).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 35 years

Place of residence last year 134 Susan Ct. West Salem, WI 54669

For: A&F Billiards
(name of corporation/organization/limited liability company)

By: Joseph Zenz
(signature of Officer/Member/Manager)

And: Scott Zenz
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Joseph Zenz, hereby accept this appointment as agent for the
(print/type 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.

Joseph Zenz 10-12-14 Agent's age _____
(signature of agent) (date)
134 Susan Ct. West Salem, 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 or 12/22/14 by Ronald T. [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

AUXILIARY QUESTIONNAIRE FOR ALCOHOL BEVERAGE LICENSE APPLICATION

Training Course Completed?:

- Yes, Date: Exp. Jan 30, 2016
- No, Hold License
- Other:

Last Name <u>Zenz</u>		First Name <u>Joseph</u>	FULL Middle Name <u>William</u>	
Home Street Address <u>134 Susan Ct.</u>		City <u>West Salem</u>	State <u>WI</u>	Zip Code <u>54669</u>
Home Phone Number <u>(608) 385-9021</u>	Daytime Phone Number <u>(608) 782-6622</u>	Age	Date of Birth	Place of Birth <u>Lancaster, WI</u>

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an individual.
- A member of a partnership which is making application for an alcohol beverage license.

Officer/Agent / Pres. Tres. of A+F Billiards, Inc at 137 So 4th St
(Officer/Director/Member/Manager/Agent) (Name of Corp, Limited Liability Company or Nonprofit Organization) La Crosse
Address of Business

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 35 years
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
 If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.
DWI ground October of 2001 in the city of LaCrosse
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
 If yes, describe status of charges pending.
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 If yes, identify:
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery/winery permit or wholesale liquor manufacturer or rectifier permit in the State of Wisconsin? Yes No
 If yes, identify: _____
(NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From and To
<u>A+F Billiards</u>	<u>137 S 4th St, LaCrosse, WI 54601</u>	<u>Sept 2001 - present</u>
<u>Quiznos Sub</u>	<u>40 Copeland Ave LaCrosse, WI 54601</u>	<u>Aug 2005 - Sept 2008</u>

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me
 this 23rd day of Oct 2014
[Signature]
(CLERK/NOTARY PUBLIC)
 My commission expires: _____

[Signature] 10-23-14
SIGNATURE OF NAMED INDIVIDUAL AND DATE