## 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. Town County of La Crosse Village of La Crosse To the governing body of: City The undersigned duly authorized officer(s)/members/managers of Riverfront Hotel Inc., DBA Courtyard by Marriott (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 Courtyard La Crosse Downtown / Mississippi Riverfront located at 500 Front Street S. Ryan Hendrickson appoints (name of appointed agent) 632 Gail Ave. 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 flability company(les) and municipality(les). ☐ Yes **V** No ☐ No Is applicant agent subject to completion of the responsible beverage server training course? ✓ Yes 29 Years How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? Place of residence last year 1112 10th Ave N. Apt # 4, Onalaska, WI 54650 For: Riverfront Hotel Inc., DBA Courtvard by Marriott (name of corporation/organization/limited tlability company) (signatury of Officer/Member/Menager) (signature of Olscer/Member/Manager) **ACCEPTANCE BY AGENT** , hereby accept this appointment as agent for the 1 Ryan Hendrickson (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. Agent's age 29 632 Gail Ave. Onalaska, WI 54650 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 regulation are satisfactory and I have no objection to the agent appointed. Approved on town chair, village president police chief)

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