## **Agent Change Check Off Sheet**

Agent Name: Chris Roderique
Trade Name: La Crosse Center
Address: 300 HARburview Plz
Council Meeting: 6-12-14 - Remainder of 2013-14 License year
Municipal Court: HOLD / 6K
Police: HOLD / OK
HOLD / OK Training Course Completed:
Date: Holds Chrient 1:censc
Comments:

## 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 iquor 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 ocal official.
Town
To the governing body of: Village of LaCrosse County of LaCrosse
City Surface Comments of the C
To the governing body of: Village of La CHOSSE County of County of Burland Burland The undersigned duly authorized officer(s)/members/managers of La CHOSSE ANCA Convention 4 Visitors (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
a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as
La Crosse Center
located at 300 Harborview PLZ La Crosse WI 54601
Claria Para in ma
appoints
(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).
R+R Restawant Inc. DBA Piggys Restaurant
No No
How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin?
Place of residence last year 710 Grove St Onalas Ka WI 54650
Place of residence less year 100 grows of the Right and Th
For. LaCrosse Area Convention + Visitors Bureaus
Dail (lements
Sy(signature_of pfficer/Member/Manager)
And: (signature of Officer/Member/Manager)
ACCEPTANCE BY AGENT
I. Chris Rodenique , 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.
4-/6-/4 Agent's age
7 th Prove St Onalas Ka W1 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 reputation are satisfactory and I have no objection to the agent appointed.
Approved on 5/3/14 by K (signal of proper local official)  Title Police Chief (town chair, village president, police chief)
(date) (signature of proper total extensive
Wisconsin Department of Revenue