Agent Change Check Off Sheet

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 liquor must appoint an agent. The following questions must be answered by the age | o sell fermented malt beverages and/or intoxicating nt. The appointment must be signed by the officer(s) | |
|--|---|------------|
| of the corporation/organization or members/managers of a limited liability comp | pany and the recommendation made by the proper | |
| local official. | La Crosse | |
| To the governing body of: Village of City of La Crosse | County of | |
| City | | |
| | Trip, Inc. | |
| (registered n. | ame of corporation/organization or limited liability company) | |
| a corporation/organization or limited liability company making application for an alco | shol beverage license for a premises known as | |
| Kwik Trip 829 | | |
| located at507 Lang Dr., La Crosse, WI 54603 | | |
| Joseph D. Kaiser | | |
| appoints (name of appointed agent) | | |
| 1618 Wood St., La Crosse, WI 54603 | | |
| (home address of appointed agent) | | |
| to act for the corporation/organization/limited liability company with full authority an to alcohol beverages conducted therein. Is applicant agent presently acting in that organization/limited liability company having or applying for a beer and/or liquor lice | capacity or requesting approval for any corporation/ | |
| Yes No If so, indicate the corporate name(s)/limited liability compar | ny(ies) and municipality(ies). | |
| Agent Kwik Trip 718, Tomah. WI until new ac | gent opproved | |
| Is applicant agent subject to completion of the responsible beverage server training | | |
| How long immediately prior to making this application has the applicant agent reside | Since 2000 | |
| Place of residence last year 1618 Wood St., La Crosse, WI 54603 | | |
| | | |
| For: Kwik Trip, Inc. | 1. A. | |
| By: * Ould P (name of corporation/organiza | tion/imked (lability company) | |
| | Member/Manager) | |
| And: | | |
| (signal craft of Officer | (Mamber/Manager) | |
| ACCEPTANCE BY AGENT | | |
| I, Joseph D. Kaiser | , hereby accept this appointment as agent for the 400 for \$200 | , |
| (print/type agent's name) | , hereby accept this appointment as agent for the 400 5 | . : |
| corporation/organization/limited liability company and assume full responsibility beverages conducted on the premises for the corporation/organization/limited liab | | . 5 |
| 13. // | ~_/ / \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | ! [|
| (signature of great) | / Agent's age | . <u>.</u> |
| 1616 Wood St., La Crosse, WI 54603 | Date of birth 기가 기가 있다. | 6 |
| (home address of agent) | | ņ |
| APPROVAL OF AGENT BY MUNICIPAL (Clerk cannot sign on behalf of Municipal) | nal Official) | 1.00 |
| I hereby certify that I have checked municipal and state criminal records. To the bithe character, record and reputation are satisfactory and I have no objection to the | est of my knowledge, with the available information, | |
| Approved on 5/13/17 by Kn March 1. | Title Police Chief | |
| (date) (Signature of proper local official) | (town chair village president, police chief) | |
| 47-104 (F. 4 C3) | Wisconsin Department of Bevenue | |
| | 0.00 10PP | |