CITY OF LA CROSSE, WI General Billing - 121318 - 2014 001246-0062 Tara F. 11/13/2014 02:17PM

## SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT ORGANIZATION OR LIMITED LIABILITY COMPANY 145338 - GORDY'S LA CROSSE FRODES INC. ORGANIZATION OR LIMITED LIABILITY COMPANY

10.00

Submit to municipal clerk.

All corporations/organization liquor must appoint an agent of the corporation/organizati local official.	. The following questic	ons must be answer	ed by the agent. The	appointment mu:	st be signed by the officer(s)
iocai uniciai.	Town	C - C			C
To the governing body of:	☐ Village of ☐	a Crosse	Co	ounty of 100	Chosse
The undersigned duly autho	rized officer(s)/memb	ers/managers of _	(registered hame of co	rporation/organizatio	n or limited liability company)
a corporation/organization or	Imited liability compa	<del> </del>		erage license for	a premises known as
located at 1607 G	eorge Street	t La Gos	EWI SH	603	
appoints	stoper L	ucas	Steven	<u>S</u>	*
1508	& Charles	(name of appoi	Lauross	se WI	54603
to act for the corporation/org to alcohol beverages condu- organization/limited liability of	cted therein. Is applica	ant agent presently	acting in that capacit	y or requesting a	approval for any corporation/
Yes No If so	o, indicate the corporal	te name(s)/limited li	ability company(ies) a	and municipality(i	ies).
Is applicant agent subject to	completion of the resu	nonsible heverage s	server training course	? Yes	□ No
How long immediately prior				<i>,</i> \	_ ⊃ı
	1			,	
Place of residence last year	<u>Lacro</u>	sse		-	
For	SA J	(name/of con	gration/organization/limite	• ed liability company)	
By: And	PAI	Les les	gnature of Officer/Member	(Manager)	
	1-9	(si	gnature of Officer/Member/	Manager)	
Chris St	evens	ACCEPTANCE		rehy accept this	appointment as agent for the
11	(print/type agent's n	ame)	, ne	ieby accept tino	appointment do again for the
corporation/organization/limbeverages conducted on the					business relative to alcohol
(Signature)	gnature of agent)		1-12-14 (date)	Ag	ent's age
1508 (ho	Nes Standards	ss of agent)		Da	te of birth
			MUNICIPAL AUTHO		
I hereby certify that I have of the character, record and re	hecked municipal and	d state criminal rectory and I have no	ords. To the best of n objection to the agent	ny knowledge, w l appointed.	ith the available information,
Approved on tilly (date)	_	(EKSTRALITE ST ATOPOS TO	ocal diriciary	Title	nair, village president, police chief)
AT-104 (R. 4-09)		<u> </u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Wisconsin Department of Revenue