

Department of Police

RONALD J. TISCHER, CHIEF



June 3, 2014

Samantha S. Chandler 1418 S. 18th Street Prairie du Chien, WI 53821

Dear Ms. Chandler:

Your application for E	Beverage Operator's License	is being recommended for	r denial for the following
reason(s):			and the tollowing

\bigcirc	Probation/Parole status.
(<u>X</u>)	Current charges pending.
	Outstanding warrants.
(<u>X</u>)	Past conviction record, (see attached record summary).
(_)	Incomplete Application: omitted past arrests, list "all" arrest section.
	Other:

You may discuss this recommendation with the Chief of Police or designee by setting up an appointment through the Chief's office at 789-7230.

You may also appeal this denial by requesting a hearing before the Judiciary and Administration Committee of the Common Council no later than 5:00 P.M., fifteen (15) days before the second Thursday of the month. This can be done by contacting the City Attorney at 789-7511.

Sincerely,

Andrew (Drew) J. Gavrilos

Sergeant

Records/Licensing Division

789-7230

cc. Chief of Police, City Attorney, City Clerk

BEVERAGE OPERATOR'S LICENSE DENIAL: Samantha S. Chandler

DATE	ARREST/CITATION TYPE	DISPOSITION
05/03/2014	Operating a M/V w/ intoxicated	Pending
01/01/2014	Underage alcohol possession/consumption	Guilty
	Possession of a false ID	Dismissed

OBSERVATIONS:
Applicant has two alcohol related arrests/citations in the past 6 months.

Application for Beverage Operator's License - La Crosse, WI

Ne	w: Renewal: X R	eceipt Number: 117444
To The Common Council of the		117444
	applies for a Beverage Operator	s License for:
X 2 Year - \$30.00	60-Day - \$15.00	14-Day - \$15.00
Year ending June 30, 2016	Period ending:	manufacture and
Control of the contro	5	Period from:
Last Name	CHANDLER	to:
First Name and MI	SAMANTHA S	
Full Middle Name	SUE	
Age	20	
Date of Birth		
Place of Birth	PRAIRIE DU CHIEN, WI	
Phone	(608) 412-1623	
Current Address	607 5TH ST S	
City, State, Zip	LA CROSSE WI 54601	
Add'l Mail Name		
Mailing Address	607 5TH ST S	
Mailing City, State, Zip	LA CROSSE WI 54601	
Previous Address		CITY OF LA CROSSE, WI
Previous City, State, Zip		General Billing - 117444 - 2014
Place of Employment	SLOOPY'S ALMA MATER	000780-0054 Amber W. 05/28/2014 04:52PM 5000 - BARTENDER CUSTOMER
Identification		
	is true gorroot and sometate	Payment Amount: 30.00
license. Further, I understand	that refunds are not allowed for offenses and/or for any outstand	and that falsification may result in denial of such any portion of the application fee paid even if ding debts owed to the City.
Date of Application: 5/28/201	4 Signature of Applicant:	sunth Clamble
FOR OFFICE USE ONLY		
Initial of CCO Emp: KG	Granted:	2-Year License Number :
Training: COMPLETE - 1/22/20	13: REN 14-16	
Transing: Som Elle Wells	10, NEW 14-10	
l, the undersigned Chief of Police of the Gi his/her qualifications as a beverage oper	ty of La Crosse, do hereby certify that I ha ator in the City of La Crosse and hereby a	ive examined the within applicant as to approve such application.
Date: Signa	ture of Chief:	
	Densed on	6/3/14 De



Department of Police

RONALD J. TISCHER, CHIEF



June 25, 2014

Brad Sturm DBA Sloopy's Alma Mater 163 Copeland Avenue La Crosse, WI 54603

Dear Mr. Sturm:

On June 21, 2014 at 7:16 PM, your employee, Samantha S. Chandler, was issued a municipal ordinance citation for violation of the following City Codes:

1. 20.01 (K) - Furnish Alcohol to a Minor

A copy of the citation is attached for your review.

Any further violations of the city code or state law will result in a citation issued to you as the license holder/agent of the establishment.

Per the resolution passed by the City Council dated August 20, 1987, "three violations of the City Code and/or State laws per licensed establishment within a license year shall be cause for a hearing before the Judiciary and Administration Committee as to whether such license should be suspended, revoked, or non-renewed."

If you would like to discuss this matter further, please contact me at (608) 789-7230.

Sincerely,

Ronald J. Tischer Chief of Police

By:

Sgt. Andrew (Drew) J. Gavrilos Records & Licensing Division

IN UNIFORM MUNICIPAL	Deposit Permitted Cash	J9088 and red (For Court Use only)
Defendant Name - Last Sama	enile s Card	MI
Street Address	Post Office	State Zip Code
TVI	State -	2020
P CO	Height Weight	Hair Eyes RED KCU
License Plate Number Plate Type	State	Exp. Yr.
Defendant Violated: Ordinance No. 20.0(K)	Adopting State Statute No.	
THE TO UNDERHOO	= AARTS	v Dr
DAM At: 163 CEPELAND	Name & Address of Parent/Guard Sloopys Allow	ian/Legal Custodian (if minor defendant) a Mochec r
NameAge		er of,Parent/Guardiaq/Legal Custodian
LCPD 2441 6	212119 (608)	412-1625
	COUR	1 6071
CHECKS THE TISSED BACKS THOUGH TO THE SHORT SHEWAY WASH SHE SENO FEELING THIS THIS TO THE SHEWAY THE TISSED BEECH THE THIS TO THE TISSED BACKS THE TISSED BEECH THE TISSED BEECH THE TISSED BACKS	COMPLIANCE CHECKS ON THE LISTED OATE ALOU TIME I MAS DOING COMPLIANCE	AGENCY RECORD Discovery FRIDING: FRIDING: Discovery PLEA: Locally Locally Locally Locally Locally Locally Collections Collecting extension Rot collection Statement Collection Statement Collection Statement Collection Statement Collection Statement Collection Statement Collection Col
	Defendant Name - Last Chardler Sama Street Address M Driver License Number or Other I.D. (specify and part of Birth Sex Race) License Plate Number Plate Type Defendant Violated: Ordinance No. 20.0(K) Chardler Sex Race Plate Type Defendant Violated: Ordinance No. 20.0(K) Chardler Sex Race Plate Type Defendant Violated: Ordinance No. 20.0(K) Chardler Sex Race Again Att. 163 Ce FELST-M Defendant's last known address Name Ag Department D. No. Dat Chardler Sex Race Chardl	Defendant Name - Last Defendant No. Sex Race Height Size State Will Date of Birth Defendant Violated: Ordinance No. Defendant Violated: Defendant Violated: Ordinance No. Defendant Violated: Defend