

EXPANSION OF ALCOHOL BEVERAGE LICENSE FOR SPECIAL EVENT

License Fee: \$ 100<sup>00</sup> (\*additional \$50.00 tent fee, if applicable)

Receipt #: 157304

The undersigned licensee requests permission to expand the following licenses onto private property for the purpose set forth below (check all that apply):

- X Combination "Class B" Beer & Liquor
\_\_\_ Class "B" Beer
\_\_\_ "Class C" Wine
\_\_\_ Class "A" Beer
\_\_\_ Class "A" Beer & "Class A" Liquor

NOTE: If there will be live music in this expanded area, also apply for a Special Event Outdoor Cabaret license.

CHECK ONE: \_\_\_ Individual \_\_\_ Partnership \_\_\_ Corporation X LLC

LEGAL/REAL NAME (Individual/Partnership/Corporation/LLC): Roy L. Vingers American Legion Post 52

TRADE NAME: American Legion Post 52

NAME OF AGENT (If Corporation/LLC): Gene Allen Phillips DOB:
(Full Name - First, FULL Middle & Last)

BUSINESS ADDRESS/ADDRESS OF EXPANSION: 711 S. 6th St.

BUSINESS PHONE NUMBER: 608-782-3232

DATE OF EXPANSION: 9/2/18

TIME OF EXPANSION (beginning & ending times): 8:00 AM - 10:00 PM

WILL THERE BE A TENT IN EXCESS OF 400 SQ. FT. (20' x 20')? Yes \_\_\_ No X If yes, add \$50.

ATTACH DETAILED DESCRIPTION OF EVENT AREA AND ATTACH A DIMENSIONAL DRAWING. Detailed description and dimensional drawing MUST include dimensions of area, where the fencing will be placed, where entrance(s) and exit(s) will be and size of each, dimensions of tent (if a tent is used), and placement of port-a-potties.

CONTACT PERSON: Eric William Buchholtz
(Full Name - First, FULL Middle & Last)

ADDRESS OF CONTACT PERSON: 2523 S. 26th St.

DAYTIME PHONE NUMBER OF CONTACT PERSON: 608-782-3232

REASON FOR EXPANSION REQUEST: Fund raising benefit

NUMBER OF PEOPLE ATTENDING THIS EVENT: 300-400

I agree to abide by all applicable State and local regulations to include, but not limited to, the sale and service of alcoholic beverages, fencing, and adherence to noise levels.

Signature of PRESIDENT of Corporation/Partner/Individual/Member: [Signature] Date: June 13, 2018
Signature of SECRETARY of Corporation/Partner/Member: [Signature] Date: 6/13/2018

STATE OF WISCONSIN DEPARTMENT OF REVENUE

City of La Crosse, WI 54601-15304

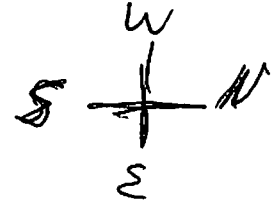
General Billing - 157304 - 2018

005047-0176 Courtney... 06/13/2018 01:40PM

3468 - ROY L VINGERS AMERICAN LEGION...

Payment Amount: 100.00

STATE OF WISCONSIN DEPARTMENT OF REVENUE  
CITY OF LA CROSSE, WI 54601-15304  
General Billing - 157304 - 2018  
005047-0176 Courtney... 06/13/2018 01:40PM  
3468 - ROY L VINGERS AMERICAN LEGION...  
Payment Amount: 100.00



6th St

Parking Lot



Existing Building