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 liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official. Town County of La Crosse of La Crosse To the governing body of: Village ✓ City The undersigned duly authorized officer/member/manager of KWIK TRIP, INC. (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 Kwik Trip 391 (Trade Name) located at 1333 Rose St., La Crosse, WI 54603 Christian T. Niemi appoints (Name of Appointed Agent) 550 Braund St., Apt. 8, Onalaska, WI 54650 (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? If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies). Yes 1 No Is applicant agent subject to completion of the responsible beverage server training course? How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? All my life Place of residence last year 550 Braund St., Apt. 8, Onalaska, WI 54650 For: KWIK TRIP, INC (Name of Corporation / Organization / Limited Liability Company) (Signature of Officer / Member / Manager) Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000. ACCEPTANCE BY AGENT , hereby accept this appointment as agent for the I, Christian T. Niemi (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. Agent's age 28 (Signature of Agent) Date of birth Apt. 8. Onalaska, WI 54650 (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(Date)	by	(Signature of Proper Local Official)	Title(Town Chair, Village President, Police Chief)
			Wisconsin Department of Revenue

AT-104 (R. 4-18)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

(first name)

Niemi		Christian			Inomas		
Home Address (street/route)	Post Office		City		State	Zip Code	
550 Braund St., Apt. 8	Onalaska				WI	54650	
Home Phone Number		Age	Date of Birth		Place of E	ACCOUNT.	
608-207-6112		28	5/11/1993	3	Milwaukee, Wl		
The above named individual provides the Applying for an alcohol beverage lice A member of a partnership which is Agent (Officer / Director / Member / Manager / / which is making application for an alcohol is making application for any idea and individual provides the above named individual provides the above	making application for the agent) cohol beverage licented in Wisconsin prior offenses (other than consin laws, any laws are is needed, continued by pending against you wisconsin laws, any laws are is needed, continued by pending against you wisconsin laws, any laws are is needed, continued by pending against you wisconsin laws, any laws are is needed, continued the continued by pending against you wisconsin laws, any laws are in the continued to the continued	n as a per I. or an alco (wik Trip, // se. n to the lic to this da traffic uni s of any o and penal on reverse	son who is (check hol beverage lice lnc. lame of Corporation, Un censing authority: te? All my life related to alcohol ther states or ord ty imposed, and/o e side of this form.) han traffic unrelater	beverages) for inances of any or date, descripted to alcohol because of any or dances	county tion and everages	Tit Organization) Yes No	
4. Do you hold, are you making application or member/manager/age beverage license or permit? If yes, identify. 5. Do you hold and/or are you an officer member/manager/agent of a limited li	ent of a limited liability (i) director, stockholde	y compan Vame, Location er, agent of	y holding or apply on and Type of License/F or employee of an olying for a whole	ermit) y person or col	poration	or Yes No	
brewery/winery permit or wholesale lider liftyes, identify. (Name of W	quor, manufacturer o	ee)	permit in the Stat	e of Wisconsin	? s By City an		
Named individual must list in chronology Employer's Name	igical order last two	Ciripioyers	· · · · · · · · · · · · · · · · · · ·	Employed From		То	
Kwik Trip, Inc.	1626 Oak St.,	La Cro	osse, WI	8/17/20:	20	Present	
Dave Adickes	W4343 Cty. Rd	. O, La (Crosse, WI	Employed From 6/2010		8/2010	
READ CAREFULLY BEFORE SIGNING been truthfully answered to the best of the application; that the applicant has read an correct. The undersigned further understand	a knowledge of the i	eidher In	e sioner abrees i	nat nersite is tr	ie beraui	I HEALITON IN MICH. CO. C. S. S. S.	

WI Dr. Lic. #N500-1189-3171-02

(middle name)

Individual's Full Name (please print)

(last name)