



FINANCE, LICENSE & REGULATION COMMITTEE

MONDAY, JUNE 8, 2015 – 6:00 PM

COUNCIL CHAMBERS, CITY HALL

AGENDA

1. Call to Order by Alderman Kupsik
2. Roll Call
3. Comments from the public as allowed by Wis. Stats. §19.84(2), limited to items on this agenda except for public hearing items. Comments will be limited to 5 minutes.
4. Approve the Finance, License and Regulation Committee Meeting minutes of May 26, 2015, as prepared and distributed.
5. **LICENSES & PERMITS**
 - a. Park Reservation Permit application filed by Harold Johnson on behalf of the Friends of the Lake Geneva Library for Beachside Bookfest on July 11, 2015 from 8:00 am to 7:00 pm (actual event to run from 10:00 am to 6:00 pm) at Library Park including approval of vendors selling food and merchandise *(recommended by the Board of Park Commissioners on June 3, 2015)*
 - b. Street Use Permit application filed by Gertrude Suhajda on behalf of Anchor Covenant Church for Troastapalooza on June 20, 2015 from noon to 8:00 pm closing the westbound lane of Park Row between Maxwell and Clover Street contingent upon payment and placement of barricades
 - c. Park Reservation Permit application filed by Kimberly Armitage for a 1st birthday party on July 25, 2015 from 2:00 pm to 4:00 pm at Veterans Park *(recommended by the Board of Park Commissioners on June 3, 2015)*
 - d. Park Reservation Permit application filed by Ray Ortiz for a birthday party on June 20, 2015 from 2:00 pm to 7:00 pm at Seminary Park *(recommended by the Board of Park Commissioners on June 3, 2015)*
 - e. Alcohol License Premises Extension Application filed by Hogs & Kisses Inc d/b/a Hogs & Kisses, 149 Broad Street, Linda Chironis, Agent, for Sidewalk Café Area, amending 2014-2015 License
 - f. Alcohol License Premises Extension Application filed by Hogs & Kisses Inc d/b/a Hogs & Kisses, 149 Broad Street, Linda Chironis, Agent, for Sidewalk Café Area, amending 2015-2016 License
 - g. Alcohol License Premises Extension Application filed by Beachside Hospitality Inc d/b/a Barrique Wine and Brew Bar, 835 Wrigley Drive, Nancy Trilla, Agent, for Sidewalk Café Area
 - h. **Renewal “Class B”/Class “B” Intoxicating Liquor & Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:**

- 1) Harbor Shores Hotel Management Inc d/b/a Harbor Shores on Lake Geneva, 300 Wrigley Drive, William Strangeway, Agent
- 2) Gleneagles LLC d/b/a Sopra, 724 W. Main Street, Alastair Cumming, Agent
- 3) L&B Main Street Inc d/b/a Champs Sports Bar & Grill, 747 W. Main Street, Gregory Bush, Agent
- 4) Jackson Wine LLC d/b/a Studio Winery, 401 Sheridan Springs Road, Kathleen Jackson, Agent (Winery)
- 5) Oakfire LLC d/b/a Oakfire Pizzeria & Restaurant, 831 Wrigley Drive, David Scotney, Agent
- 6) DCR Restaurant Group LLC d/b/a Next Door Pub, 411 Interchange North, Chad Bittner, Agent
- 7) Medusa Grill & Bistro LLC d/b/a Medusa Grill & Bistro, 501 Broad Street, Gregory Anagnos, Agent
- 8) American Legion Post 24, 735 Henry Street, Charles Schlehlein, Agent
- 9) 422 S. Wells St. LTD d/b/a Celebration on Wells, 422 S. Wells Street, Charles Lorenzi, Agent
- 10) Chubby Kitty LLC d/b/a Fat Cat's, 104 Broad Street, Mark Basil, Agent
- 11) Samson Enterprises LLC d/b/a Carvetti's, 642 W. Main Street, Eugene Grahler, Agent
- 12) LG Hospitality Group LLC d/b/a Tuscan Tavern & Grill, 430 Broad Street, James Georgalas, Agent
- 13) Pop More Corks Inc d/b/a Pop More Corks, 615-617 W. Main Street, David Biegemann, Agent
- 14) Capitol Geneva LLC d/b/a Sprecher's Restaurant & Pub, 111 Center Street, Elizabeth Dion, Agent

i. Renewal Reserve "Class B"/Class "B" Intoxicating Liquor & Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) Meridian Condominium Association, d/b/a Bella Vista Suites, 335 Wrigley Drive, Charles Lorenzi, Agent
- 2) Su Wings Corp, d/b/a Su Wings Chinese Restaurant, 743 North Street, Siu Wing Leung, Agent

j. Renewal Class "B" Fermented Malt Beverage & "Class C" Wine License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) Beachside Hospitality Inc d/b/a Barrique Wine & Brew Bar, 835 Wrigley Drive, Nancy Trilla, Agent
- 2) PH Hospitality Group LLC d/b/a Pizza Hut, 801 Williams Street, Butch Nocek, Agent
- 3) Happy Restaurant Inc d/b/a Happy Café, 526 Wells Street, Min Ting Zhong, Agent

k. Renewal "Class A"/Class "A" Liquor & Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) Cove Condominium Association Inc d/b/a The Cove of Lake Geneva, 111 Center Street, Patrick McCarthy, Agent
- 2) Queso Corp d/b/a The Cheese Box, 801 S. Wells Street, Zbigniew Borowiec, Agent
- 3) Target Corporation d/b/a Target Store T2348, 660 N. Edwards Blvd., Nicholas Schmidt, Agent
- 4) QuickNSave LLC d/b/a Quick N Save, 1231 Grant Street, Jatinder Dhillon, Agent
- 5) Geneva Country Store, 605 Williams Street, Thomas Kaczmarek, Agent
- 6) Kwik Trip Inc d/b/a Kwik Trip 219, 710 Williams Street, Jillian Ricker, Agent
- 7) H&P Enterprises LLC d/b/a Geneva Liquors, 797 S. Wells Street, Kanwal Singh, Agent

l. Renewal "Class B"/Class "B" Intoxicating Liquor & Fermented Malt Beverage (Hotel Exemption) License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

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- 1) Re-Vive LLC d/b/a Re-Vive Gallery & Studio, 721 Geneva Street, Samantha Strenger, Agent
- 2) Geneva Lakes Hotel Group LLC d/b/a Comfort Suites, 300 E. Main Street, Sara Remlinger, Agent

n. Renewal of 2015-2016 Operator’s (Bartender) License applications (located in packet)

o. Original 2015-2016 Operator’s (Bartender) License applications (located in packet)

p. Renewal Taxi Company License application filed by All Star Cab, W1044 Evergreen, Pell Lake

q. Original Taxi Driver License application filed by Matthew Trane *(approved by Police Chief; informational only)*

r. Renewal Taxi Driver License application filed by Ronald Skipper, Sr. and Debra Skipper *(approved by Police Chief; informational only)*

s. Renewal Massage Establishment License application filed by Bella Vista Suites/Heartland Spa, 335 Wrigley Drive

6. Second Reading of Ordinance 15-05, amending Chapter 2, Sec. 2-345 Capital Improvement Referendum for City Capital Expenditures raising the limit to \$1,500,000 with a 2.5% annual increase starting 2016 and including provisions for exempting Capital Expenditures for new utilities, and maintenance, repair or replacement of existing utilities or other infrastructure

7. Second Reading of Ordinance 15-06, amending Chapter 46 Nuisances, to include Article III, Abandoned Property and Section 46-10, Disposal of Abandoned Property

8. Discussion/Recommendation on renewal of CD in the amount of \$143,818.73 plus interest, maturing on June 21, 2015 from BMO Harris Bank

9. Discussion/Recommendation on renewal of CD in the amount of \$314,480.01 plus interest, maturing on June 10, 2015 from Associated Bank

10. **Resolution 15-R31**, authorizing a 1.5% wage increase for full-time, non-union, non-contracted current employees retroactive to January 1, 2015 *(recommended by Personnel Committee on June 4, 2015)*

11. Discussion/Recommendation on adoption of employee health insurance change in plan benefits to \$1,000 single, \$2,000 family deductibles and various other copay increases *(recommended by Personnel Committee on June 4, 2015)*

12. Presentation of Accounts

- a. Purchase Orders (none)
- b. Prepaid Bills in the amount of \$12,690.77
- c. Regular Bills in the amount of \$120,160.98
- d. Acceptance of Monthly Treasurer’s Report for April 2015

13. Adjournment

Requests from persons with disabilities, who need assistance to participate in this meeting or hearing, should be made to the City Clerk’s office in advance so the appropriate accommodations can be made.

6/5/2015 7:15pm

cc: Committee Members, Mayor & remaining Council, Administrator, City Clerk, Attorney

FINANCE, LICENSE & REGULATION COMMITTEE

TUESDAY, MAY 26, 2015 - 6:00 PM

COUNCIL CHAMBERS, CITY HALL

Chairperson Kupsik called the meeting to order at 6:02 p.m.

Roll Call. Present: Aldermen Howell, Gelting, Kupsik, Kordus and Wall. Also Present: City Administrator Jordan, Comptroller Pollitt, and City Clerk Waswo.

Comments from the public as allowed by Wis. Stats. §19.84(2), limited to items on this agenda except for public hearing items. Comments will be limited to 5 minutes.

Mary Jo Fesenmaier, 955 George Street, questioned the delay for adopting the Park and Open Space Plan and would like to know if there were any significant changes.

Approval of Minutes

Kordus/Gelting motion to approve the Finance, License and Regulation Committee Meeting minutes of May 11, 2015, as prepared and distributed. Unanimously carried.

LICENSES & PERMITS

Park Reservation Permit application filed by Jeffrey Siegal on behalf of Buffalo Grove High School to use Seminary Park from June 14 to June 17, 9:30am to 5:45pm and Flat Iron Park from June 15 to June 17, 1:00pm to 5:45pm for a Cheerleading Camp (recommended by Board of Park Commissioners on 5/6/2015)

Wall/Kordus motion to recommend approval. Unanimously carried.

Beach Use Permit application filed by Clear Water Outdoors to use the Riviera Beach on September 11, 12 and 13 from 6:00am to 6:00pm for the 6th Annual Midwest SUP Masters paddle board races (recommended by Piers, Harbors and Lakefront Committee on October 23, 2014)

Wall/Kordus motion to recommend approval. Unanimously carried.

Park Reservation Permit application filed by the Lake Geneva Chamber of Commerce for Concerts in the Park at the Flat Iron Park Pavilion every Thursday from June 25 through August 27, 2015 (excluding August 20) from 6:00pm to 8:00pm with request for waiver of Pavilion fees (recommended by Board of Park Commissioners on 5/6/2015)

Howell/Gelting motion to recommend approval. Unanimously carried.

Park Reservation Permit application filed by Kyna Wismer for a Wedding on September 12, 2015 at Library Park from 12:00pm to 4:00pm (recommended by Board of Park Commissioners on 5/6/2015)

Kordus/Wall motion to recommend approval. Unanimously carried.

Temporary "Class B" Retailer License application filed by Geneva Lake Arts Foundation for the sale of wine during the Summer Exhibit Opening Reception at 647 W. Main Street, Lake Geneva, on June 5, 2015, from 6:00pm to 8:00pm

Kordus/Gelting motion to recommend approval. Unanimously carried.

Temporary Operator License application filed by Carol Smith on behalf of Geneva Lake Arts Foundation for the Summer Exhibit Opening Reception at 647 W. Main Street, Lake Geneva, on June 5, 2015

Kordus/Gelting motion to recommend approval. Unanimously carried.

Temporary Operator License applications filed by Douglas Bartz, Dave Bergmann, Gregg Christenson, Craig Evans, Stephen Schroeder, Joshua Spiegelhoff, and Ryan Stelzer from the Lake Geneva Jaycees for Venetian Festival

Wall/Gelting motion to recommend approval. Unanimously carried.

Renewal “Class B”/Class “B” Intoxicating Liquor & Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) Harry’s Café and Place Inc. d/b/a Harry’s Café, 808 Main Street, Lake Geneva, James Chironis, Agent
- 2) Hogs & Kisses, Inc. d/b/a Hogs & Kisses, 149 Broad Street, Lake Geneva, Linda Chironis, Agent
- 3) Popeye’s Galley & Grog, LTD d/b/a Popeye’s, 811 Wrigley Dr., Michael Anagnos, Agent
- 4) Swatek Sales Corp./SS2 Inc. d/b/a The Red Geranium Restaurant, 393 N. Edwards Boulevard, Lake Geneva, Lyle H. Swatek, Agent
- 5) Two Thumbs Up, LLC d/b/a Thumbs Up, 260 Broad St., Lake Geneva, Benjamin Barels, Agent

Howell/Gelting motion to recommend approval. Unanimously carried.

Renewal Reserve “Class B”/Class “B” Intoxicating Liquor & Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) Speedo’s Harborside Cafe, 100 Broad Street, Lake Geneva, Spyro G. Condos, Agent
- 2) Lake Aire Restaurant, 804 Main Street, Lake Geneva, George Argiropoulos, Agent
- 3) The Restaurant Tempura House, LLC d/b/a The Tempura House, 306 Center Street, Lake Geneva, Pai Tsung Wang, Agent

Gelting/Kordus motion to recommend approval. Unanimously carried.

Renewal Class “B” Fermented Malt Beverage & “Class C” Wine License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) K&B Restaurant Group LLC d/b/a The Original Chicago Pizza Company, 150 Center Street, Lake Geneva, Benjamin W. Wooten, Agent
- 2) Mama Ciminis d/b/a Mama Cimino’s Pizza, 131 Wells Street, Lake Geneva, Nick Cimino, Agent

Wall/Gelting motion to recommend approval. Unanimously carried.

Renewal “Class A”/Class “A” Liquor & Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) Prairie State Enterprises of Darien, LLC d/b/a Lake Geneva Mobil, 350 N Edwards Blvd, Lake Geneva, Kenneth B. Kearns, Agent
- 2) Stinebrink’s Lake Geneva Foods LLC d/b/a Stinebrink’s Piggly Wiggly, 100 East Geneva Square, Lake Geneva, Mark E. Stinebrink, Agent
- 3) Stop-N-Go of Madison, Inc. d/b/a Stop-N-Go #265, 896 Wells Street, Lake Geneva, Andrew Bowman, Agent
- 4) Wal-Mart Stores East, LP d/b/a Wal-Mart Supercenter #910, 201 S. Edwards Boulevard, Lake Geneva, Barbara C. Godan, Agent

Howell/Gelting motion to recommend approval. Unanimously carried.

Renewal “Class A” Liquor License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) Lake Geneva School of Cooking, LLC d/b/a Lake Geneva School of Cooking, 727 Geneva St, Lake Geneva, John Bogdan, Agent

Kordus/Gelting motion to recommend approval. Unanimously carried.

Renewal of 2015-2016 Operator’s (Bartender) License applications

City Clerk Waswo stated the list of applicant renewals are located in the packet.

Kordus/Gelting motion to recommend approval. Unanimously carried.

Renewal of Brandon Stevens Operator's (Bartender) License subject to review by City Council as per minutes of April 13, 2015

Kordus/Gelting motion to send to council without recommendation. Unanimously carried.

Original 2015-2016 Operator's (Bartender) License application filed by Nicole H. Chester, Elizabeth Cooper, Samantha Cunningham, Jacqueline Lawler, Stephanie Akright, Yvette Gray, Kristen Miles, Kelsey Hynning, Christina Sheen, Katelyn Anderson, Beverly Kasten, Kimberly Kasten, Jacob Mason, and Jacob McGuire.

Kordus/Howell motion to recommend approval. City Clerk Waswo stated she is recommending Yvette Gray be continued to June 8 as the police department have rescinded their approval.

Kordus/Gelting motion an amendment to exclude Yvette Gray and continue to June 8th meeting. Unanimously carried.

Main Motion: Kordus/Howell motion to recommend approval of all Operator's licenses excluding Yvette Gray who will be continued to June 8th. Unanimously carried.

Renewal Taxi Company License applications filed by the following:

- 1) N & T Enterprises, Inc., d/b/a Lakes Area Taxi, 112 S. 4th Street, Delavan
- 2) Senior Cab Plus LLC d/b/a Senior Cab, W3099 Krueger Road, Lake Geneva
- 3) A1 Lake Geneva Limousine & Taxi, 612 Crawford Street, Lake Geneva

Wall/Kordus motion to recommend approval. Unanimously carried.

Original Taxi Driver License application filed by David Rock (*approved by Police Chief; informational only*)

Renewal Taxi Driver License application filed by Larry Rygielski, Sean Gradt, Robert Nei, Goldie Stacey, Richard Skipper, Sr., Vito Gieron, Martin Blackmore, Robert Phelps, Russell Ford, Curtis Sawyer, Brian Koszykowski, John Albert, Nancy Rock, Keith Woods, and Jeff Robbins (*approved by Police Chief; informational only*)

Renewal Massage Establishment License applications filed by the following:

- 1) Element Massage Studio, 647 Main Street, Suite 400, Lake Geneva
- 2) Lake Geneva Massage Therapy, 905 Marshall Street, Lake Geneva
- 3) Jasmine Salon & Spa, LLC, d/b/a Jasmine Salon & Spa, 251 Cook Street, Lake Geneva
- 4) Healing Muscle Therapies, 201 Broad Street, Suite 1-D, Lake Geneva
- 5) Clear Waters Salon Spa, Inc, d/b/a Clear Waters Salon Spa, 734 Main Street, Lake Geneva
- 6) Loosen Up LTD, 201 N. Broad Street, Lake Geneva

Kordus/Gelting motion to recommend approval. Unanimously carried.

Discussion/Action on renewal of CD in the amount of \$64,168.70 plus interest, maturing on May 28, 2015 from Town Bank

Comptroller Pollitt recommended investing the amount at a flat \$65,000 with People's Bank in Elkhorn for 15 months at 0.35%.

Kordus/Gelting motion to move CD in the amount of \$65,000 to People's Bank in Elkhorn at 0.35% for 15 months. Unanimously carried.

Resolution 15-R30 adopting the City of Lake Geneva Park and Open Space Plan 2015-2020

Kordus/Howell motion to recommend approval. City Administrator Jordan stated nothing has changed with the report. The Council had approved it earlier, however, in order to qualify for grants, a resolution and ordinance need to be completed. Unanimously carried.

First Reading of Ordinance 15-05, amending Chapter 2, Sec. 2-345 Capital Improvement Referendum for City Capital Expenditures raising the limit to \$1,500,000 with a 2.5% annual increase starting 2016 and including provisions for exempting Capital Expenditures for new utilities, and maintenance, repair or replacement of existing utilities or other infrastructure

First reading only; no action taken.

First Reading of Ordinance 15-06, amending Chapter 46 Nuisances, to include Article III, Abandoned Property and Section 46-10, Disposal of Abandoned Property

First reading only; no action taken.

Discussion/Action on service agreement with Vandewalle and Associates to proceed with TIF #4 amendments

City Administrator Jordan stated Vandewalle and Associates have been our consultants and part of their firm also does the TIF work for the City. They are proposing their standard rates and once approved, they will start the process to amend the TIF 4 project plan.

Kordus/Gelting motion to recommend approval. Unanimously carried.

Presentation of Accounts

Purchase orders. None.

Wall/Kordus motion to recommend approval of Prepaid Bills in the amount of \$6,944.74. Unanimously carried.

Howell/Gelting motion to recommend approval of Regular Bills in the amount of \$138,513.09. Unanimously carried.

Wall/Gelting motion to acceptance the Monthly Treasurer's Report for March 2015. Unanimously carried.

Adjournment

Kordus/Gelting motion to adjourn at 6:25 p.m. Unanimously carried.

/s/ Sabrina Waswo, City Clerk

THESE MINUTES ARE NOT OFFICIAL UNTIL APPROVED BY THE FINANCE, LICENSE & REGULATION COMMITTEE



REGULAR CITY COUNCIL MEETING
MONDAY, JUNE 8, 2015 – 7:00 PM
COUNCIL CHAMBERS, CITY HALL

AGENDA

1. Mayor Connors calls the meeting to order
2. Pledge of Allegiance – City Administrator Oborn
3. Roll Call
4. Awards, Presentations, and Proclamations
5. Re-consider business from previous meeting
6. Comments from the public as allowed by Wis. Stats. §19.84(2), limited to items on this agenda, except for public hearing items. Comments will to be limited to 5 minutes.
7. Acknowledgement of Correspondence
8. Approve Regular City Council Meeting minutes of May 26, 2015, as prepared and distributed
9. **CONSENT AGENDA.** Any item listed on the consent agenda may be removed at the request of any member of the Council. The request requires no second, is not discussed, and is not voted upon.
 - a. Park Reservation Permit application filed by Harold Johnson on behalf of the Friends of the Lake Geneva Library for Beachside Bookfest on July 11, 2015 from 8:00 am to 7:00 pm (actual event to run from 10:00 am to 6:00 pm) at Library Park including approval of vendors selling food and merchandise *(recommended by the Board of Park Commissioners on June 3, 2015)*
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r. Renewal Taxi Driver License application filed by Ronald Skipper, Sr. and Debra Skipper *(approved by Police Chief; informational only)*

s. Renewal Massage Establishment License application filed by Bella Vista Suites/Heartland Spa, 335 Wrigley Drive

10. Item removed from the Consent Agenda

11. Second Reading of Ordinance 15-05, amending Chapter 2, Sec. 2-345 Capital Improvement Referendum for City Capital Expenditures raising the limit to \$1,500,000 with a 2.5% annual increase starting 2016 and including provisions for exempting Capital Expenditures for new utilities, and maintenance, repair or replacement of existing utilities or other infrastructure

12. Second Reading of Ordinance 15-06, amending Chapter 46 Nuisances, to include Article III, Abandoned Property and Section 46-10, Disposal of Abandoned Property

13. Finance, License and Regulation Committee Recommendations – Alderman Kupsik

a. Discussion/Action on renewal of CD in the amount of \$143,818.73 plus interest, maturing on June 21, 2015 from BMO Harris Bank

b. Discussion/Action on renewal of CD in the amount of \$314,480.01 plus interest, maturing on June 10, 2015 from Associated Bank

14. Personnel Committee Recommendations – Alderman Hedlund

a. **Resolution 15-R31**, authorizing a 1.5% wage increase for full-time, non-union, non-contracted current employees retroactive to January 1, 2015

b. Discussion/Action on adoption of employee health insurance change in plan benefits to \$1,000 single, \$2,000 family deductibles and various other copay increases

15. Presentation of Accounts

- a. Purchase Orders (none)
- b. Prepaid Bills in the amount of \$12,690.77
- c. Regular Bills in the amount of \$120,160.98
- d. Acceptance of Monthly Treasurer's Report for April 2015

16. Mayoral Appointments

- **Avian Committee**
 - Reappointment of Maureen Winkler to May 1, 2017
- **Historic Preservation Committee**
 - Appointment of Jim Davis to May 1, 2017
- **Police & Fire Commission**
 - Appointment of Dennis Jordan to May 1, 2020
- **Utility Commission**
 - Appointment of Dennis Lyon to October 1, 2019

17. Closed Session

Motion to go into Closed Session pursuant to Wis. Stat. 19.85 (1)(b) for considering licensing of Yvette Gray by a board or commission or the investigation of charges against such person and the taking of formal action on any such matter (City Attorney Draper).

18. Motion to return to open session pursuant to Wisconsin Statutes 19.85 (2) and take action on any items discussed in closed session

19. Adjournment

Requests from persons with disabilities, who need assistance to participate in this meeting or hearing, should be made to the City Clerk's office in advance so the appropriate accommodations can be made.

6/5/2015 & 7:15pm

cc: Aldermen, Mayor, Administrator, Attorney, Department Heads, Media

**REGULAR CITY COUNCIL MEETING
TUESDAY, MAY 26, 2015 – 7:00 PM
COUNCIL CHAMBERS, CITY HALL**

Mayor Connors called the meeting to order at 7:00 p.m.

The Pledge of Allegiance was led by Alderman Howell.

Roll Call. Present: Mayor Connors, Aldermen Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell. Also present: City Administrator Jordan, City Attorney Draper, Comptroller Pollitt, City Clerk Waswo.

Awards, Presentations, and Proclamations.

Mayor Connors thanked the Fire, Police and Street Departments for their help with the Memorial Day Parade. He also mentioned this is City Administrator Dennis Jordan's last meeting. There will be an Open House for him on Friday, May 29 from 2:00pm to 5:00pm in the Council Chambers.

Mr. Connors stated the WI Dept. of Transportation will be holding a public involvement meeting on June 11 from 4:00pm to 6:00pm at City Hall to discuss plan for 120 North, which extends into the Town of Lyons. The project is slated for 2019.

Re-consider business from previous meeting. None.

Comments from the public as allowed by Wis. Stats. §19.84(2), limited to items on this agenda, except for public hearing items. Comments will to be limited to 5 minutes.

Maureen Zagenhorn, 301 E. Townline Road, stated she is an owner at The End of the Line for the last 20 years. She has several concerns over the Basso Building Development. When purchasing her property she was told the area North and East of her was protected wetland. She questioned the zoning being changed to buildable land and wondered where the runoff water will drain. She feared the trees on the property line will be killed, with no barrier between her units and the development. She noted the change in reducing the density of the buildings was not enough and believes there is not enough parking for all the units. She also stated safety concerns regarding the three driveways that cross the bike trail. She stated the city is opening itself up for a huge liability due to these safety issues.

Darien Schaefer, spoke on behalf of the Lake Geneva Chamber of Commerce. He requested the council's support in waiving the pavilion fees for the Concerts in the Park permit application. He also stated the Chamber is hosting a restaurant week where participants will be allowed to vote for a charity to receive a \$5,000 charity check. He encouraged everyone to visit their website at lakegenevarestaurantweek.com.

Tim Dunn, 499 Manning Way, Lake Geneva Highland Subdivision, urged caution on the Basso Development. He was concerned with building on marshy areas and feels the two buildings are too close to the wetlands. He was told they are slab on grade, which indicates the builder knows they are close to the wetlands. If there is another wet year like 2008, there is a danger the marsh would overflow into the subdivision. This could end up being a liability with the owners asking the taxpayers to pay for a remedy for their situation, which has happened before. He is also concerned with the density of the project, stating there is not enough parking. This will lead to parking spilling over to the Lake Geneva Highlands neighborhood. And noted they may be making problems for themselves or future councils.

Terry O'Neill, 954 George Street, spoke regarding the 2014 City Audit. He was concerned with discrepancies between the General Fund Balance and the Interfund Payables. He stated the city will have to use taxes collected this year to cover last year's shortfall.

Presentation was given on the 2014 Financial Audit by David Maccoux, CPA of Schenck SC

Acceptance of 2014 Financial Audit, as presented by Schenck SC

Kordus/Wall motion to approve and accept the Financial Audit.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

Acknowledgement of Correspondence. None.

Approval of Minutes

Kordus/Gelting motion to approve Special Council Meeting-TIF Workshop minutes of April 28, 2015, Special Council Meeting-Health Plan Workshop minutes of April 29, 2015, and Regular City Council Meeting minutes of May 11, 2015, as prepared and distributed. Unanimously carried.

Consent Agenda

Park Reservation Permit application filed by Jeffrey Siegal on behalf of Buffalo Grove High School to use Seminary Park from June 14 to June 17, 9:30am to 5:45pm and Flat Iron Park from June 15 to June 17, 1:00pm to 5:45pm for a Cheerleading Camp (recommended by Board of Park Commissioners on 5/6/2015)

Beach Use Permit application filed by Clear Water Outdoors to use the Riviera Beach on September 11, 12 and 13 from 6:00am to 6:00pm for the 6th Annual Midwest SUP Masters paddle board races (recommended by Piers, Harbors and Lakefront Committee on October 23, 2014)

Park Reservation Permit application filed by the Lake Geneva Chamber of Commerce for Concerts in the Park at the Flat Iron Park Pavilion every Thursday from June 25 through August 27, 2015 (excluding August 20) from 6:00pm to 8:00pm with request for waiver of Pavilion fees (recommended by Board of Park Commissioners on 5/6/2015)

Park Reservation Permit application filed by Kyna Wismer for a Wedding on September 12, 2015 at Library Park from 12:00pm to 4:00pm (recommended by Board of Park Commissioners on 5/6/2015)

Temporary “Class B” Retailer License application filed by Geneva Lake Arts Foundation for the sale of wine during the Summer Exhibit Opening Reception at 647 W. Main Street, Lake Geneva, on June 5, 2015, from 6:00pm to 8:00pm

Temporary Operator License application filed by Carol Smith on behalf of Geneva Lake Arts Foundation for the Summer Exhibit Opening Reception at 647 W. Main Street, Lake Geneva, on June 5, 2015

Temporary Operator License applications filed by Douglas Bartz, Dave Bergmann, Gregg Christenson, Craig Evans, Stephen Schroeder, Joshua Spiegelhoff, and Ryan Stelzer from the Lake Geneva Jaycees for Venetian Festival

Renewal “Class B”/Class “B” Intoxicating Liquor & Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) Harry’s Café and Place Inc. d/b/a Harry’s Café, 808 Main Street, Lake Geneva, James Chironis, Agent
- 2) Hogs & Kisses, Inc. d/b/a Hogs & Kisses, 149 Broad Street, Lake Geneva, Linda Chironis, Agent
- 3) Popeye’s Galley & Grog, LTD d/b/a Popeye’s, 811 Wrigley Dr., Michael Anagnos, Agent
- 4) Swatek Sales Corp./SS2 Inc. d/b/a The Red Geranium Restaurant, 393 N. Edwards Boulevard, Lake Geneva, Lyle H. Swatek, Agent
- 5) Two Thumbs Up, LLC d/b/a Thumbs Up, 260 Broad St., Lake Geneva, Benjamin Barels, Agent

Renewal Reserve “Class B”/Class “B” Intoxicating Liquor & Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) Speedo’s Harborside Cafe, 100 Broad Street, Lake Geneva, Spyro G. Condos, Agent
- 2) Lake Aire Restaurant, 804 Main Street, Lake Geneva, George Argiropoulos, Agent
- 3) The Restaurant Tempura House, LLC d/b/a The Tempura House, 306 Center Street, Lake Geneva, Pai Tsung Wang, Agent

Renewal Class “B” Fermented Malt Beverage & “Class C” Wine License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) **K&B Restaurant Group LLC d/b/a The Original Chicago Pizza Company, 150 Center Street, Lake Geneva, Benjamin W. Wooten, Agent**
- 2) **Mama Ciminos d/b/a Mama Cimino’s Pizza, 131 Wells Street, Lake Geneva, Nick Cimino, Agent**

Renewal “Class A”/Class “A” Liquor & Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) **Prairie State Enterprises of Darien, LLC d/b/a Lake Geneva Mobil, 350 N Edwards Blvd, Lake Geneva, Kenneth B. Kearns, Agent**
- 2) **Stinebrink’s Lake Geneva Foods LLC d/b/a Stinebrink’s Piggly Wiggly, 100 East Geneva Square, Lake Geneva, Mark E. Stinebrink, Agent**
- 3) **Stop-N-Go of Madison, Inc. d/b/a Stop-N-Go #265, 896 Wells Street, Lake Geneva, Andrew Bowman, Agent**
- 4) **Wal-Mart Stores East, LP d/b/a Wal-Mart Supercenter #910, 201 S. Edwards Boulevard, Lake Geneva, Barbara C. Godan, Agent**

Renewal “Class A” Liquor License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) **Lake Geneva School of Cooking, LLC d/b/a Lake Geneva School of Cooking, 727 Geneva St, Lake Geneva, John Bogan, Agent**

Renewal of 2015-2016 Operator’s (Bartender) License applications

Renewal Taxi Company License applications filed by the following:

- 1) **N & T Enterprises, Inc., d/b/a Lakes Area Taxi, 112 S. 4th Street, Delavan**
- 2) **Senior Cab Plus LLC d/b/a Senior Cab, W3099 Krueger Road, Lake Geneva**
- 3) **A1 Lake Geneva Limousine & Taxi, 612 Crawford Street, Lake Geneva**

Original Taxi Driver License application filed by David Rock *(approved by Police Chief; informational only)*

Renewal Taxi Driver License application filed by Larry Rygielski, Sean Gradt, Robert Nei, Goldie Stacey, Richard Skipper, Sr., Vito Gieron, Martin Blackmore, Robert Phelps, Russell Ford, Curtis Sawyer, Brian Koszykowski, John Albert, Nancy Rock, Keith Woods, and Jeff Robbins *(approved by Police Chief; informational only)*

Renewal Massage Establishment License applications filed by the following:

- 1) **Element Massage Studio, 647 Main Street, Suite 400, Lake Geneva**
- 2) **Lake Geneva Massage Therapy, 905 Marshall Street, Lake Geneva**
- 3) **Jasmine Salon & Spa, LLC, d/b/a Jasmine Salon & Spa, 251 Cook Street, Lake Geneva**
- 4) **Healing Muscle Therapies, 201 Broad Street, Suite 1-D, Lake Geneva**
- 5) **Clear Waters Salon Spa, Inc, d/b/a Clear Waters Salon Spa, 734 Main Street, Lake Geneva**
- 6) **Loosen Up LTD, 201 N. Broad Street, Lake Geneva**

Hill/Kordus motion to approve the consent agenda. Unanimously carried.

Items Removed from the Consent Agenda

Renewal of Brandon Stevens Operator’s (Bartender) License subject to review by City Council as per minutes of April 13, 2015

Kordus/Wall motion to approve the renewal of Brandon Steven’s Operator’s license valid only while employed at Sprecher’s Restaurant and Pub.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted “yes.” Unanimously carried.

Original 2015-2016 Operator's (Bartender) License application filed by Nicole H. Chester, Elizabeth Cooper, Samantha Cunningham, Jacqueline Lawler, Stephanie Akright, Yvette Gray, Kristen Miles, Kelsey Hynning, Christina Sheen, Katelyn Anderson, Beverly Kasten, Kimberly Kasten, Jacob Mason, and Jacob McGuire.

Kupsik/Kordus motion to remove Yvette Gray's name and continue to the June 8th meeting.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

Kupsik/Kordus motion to approve all Operator's licenses with the exception of Yvette Gray.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

Finance, License and Regulation Committee Recommendations – Alderman Kupsik

Discussion/Action on renewal of CD in the amount of \$64,168.70 plus interest, maturing on May 28, 2015 from Town Bank

Kupsik/Gelting motion to renew CD in the amount of \$65,000 with People's Bank for a 15 month term at 0.35%.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

Resolution 15-R30 adopting the City of Lake Geneva Park and Open Space Plan 2015-2020

Kupsik/Howell motion to approve adoption. City Administrator Jordan stated this was brought to council and approved, however, in order to qualify for grants from the State, the plan must be put in resolution form in an ordinance. Mayor Connors reiterated it is the same plan that was originally approved, however it was not formally adopted to qualify for grants.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

First Reading of Ordinance 15-05, amending Chapter 2, Sec. 2-345 Capital Improvement Referendum for City Capital Expenditures raising the limit to \$1,500,000 with a 2.5% annual increase starting 2016 and including provisions for exempting Capital Expenditures for new utilities, and maintenance, repair or replacement of existing utilities or other infrastructure

First reading only; no action taken.

First Reading of Ordinance 15-06, amending Chapter 46 Nuisances, to include Article III, Abandoned Property and Section 46-10, Disposal of Abandoned Property

First reading only; no action taken.

Discussion/Action on service agreement with Vandewalle and Associates to proceed with TIF #4 amendments

Kupsik/Gelting motion to approve. City Administrator Jordan stated this is informational to proceed with the billing for the amendment for the projects. Alderman Hedlund mentioned that Vandewalle originally did the TIF and the amendments and would like to continue with them. Alderman Hill questioned if the money would come from TIF, which Mr. Jordan confirmed.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

Plan Commission Recommendations – Alderman Kupsik

Resolution 15-R26, authorizing the issuance of a Conditional Use Application filed by Great Eggs Lake Geneva, Paul Ochalek agent, N53W34959 Road B, Okauchee, WI 53069, to open an Indoor & Outdoor Commercial Entertainment (Restaurant) in a Central Business (CB) Zoning District located at 220 Cook Street, Tax Key No. ZOP 00243 including Findings of Fact, and subject to Staff recommendations, and Fire Department requirements in letter dated April 29, 2015.

Kupsik/Hill motion to approve.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

Resolution 15-R27, authorizing the issuance of a Conditional Use Application filed by Re-Vive, Samantha Strenger agent, 721 Geneva Street, Lake Geneva, WI 53147, to open an Outdoor Commercial Entertainment (Restaurant) in a Central Business (CB) Zoning District located at 721 Geneva Street, Tax Key No. ZOP 00159 including Findings of Fact, and subject to Staff recommendations, and Fire Department requirements for a rear exit gate.

Kupsik/Kordus motion to approve adding that the sound not be discernible past the lot line.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted “yes.” Unanimously carried.

Resolution 15-R28, authorizing the issuance of a Conditional Use Application filed by Francis Beidler III and Elizabeth Tisdahl, 698 S. Lake Shore Drive, Lake Geneva, WI 53147, to construct an addition (Attached Garage with Second Level Bedrooms) to a Single Family Residence using the SR-4 Zoning requirements in an Estate Residential Zoning District (ER-1) located at 698 S. Lake Shore Drive, Tax Key No. ZBB 00006 including Findings of Fact, and subject to City staff review and comments.

Kupsik/Gelting motion to approve.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted “yes.” Unanimously carried.

Resolution 15-R29, authorizing the issuance of a Conditional Use Application filed by Basso Builders, 405 Skyline Drive, Lake Geneva, WI 53147, for a Group Development to construct two (2) six (6) unit and two (2) eight (8) unit Townhome apartments in a Multi-family Residential District (MR-8) at the parcel created from the following Tax Key No’s: ZMEA 00052 and ZYUP 00130C including Findings of Fact, and subject to City staff review and comments, Engineers letter dated May 6, 2015 and Plan Commission requirements to include a speed table at the Manning Way Exit, an entrance only at the West driveway on Skyline Drive, increased refuse and recycling collection pads, and City Staff approval of Bollards or other restrictive devices on the bike trail to prevent vehicles from driving on the bike trail.

Kupsik/Hill motion to approve. Alderman Kupsik stated staff has no objection to this request. He read into the record the staff report stating the development will act as a buffer between the Single Family Development to the North and the Multi-Family Planned Developments to the South West. The developer has worked with Staff to alleviate most of the concerns that were brought up in previous meetings and Staff requirements. The density requirements fall well below the allowable standards within the Multi-family Residential District (MR-8) Zoning District. Therefore, Staff recommends approval of the Group Development with any Plan Commission requirements.

Alderman Kordus stated he is a supporter of personal property rights, being this is a Basso property, he is in favor of the development. Alderman Wall stated he does not have a problem with Basso building it, but a year ago when the zoning was changed, the neighborhood should have been notified of changes to allow them to voice their opinion. He has compassion for the people that live on Manning Way. Alderman Hill noted that they have adopted a 5 month process in order to change the comprehensive plan with multiple options for public input. She feels this is a nice addition to the city as we are short on quality rentals. Ms. Hill is comfortable that both Staff and Plan Commission have worked through all the details.

Alderman Hedlund questioned the traffic on Manning Way and location of the bollards. Mayor Connors stated a speed table (elongated speed bump) was included and that bollards or other restrictive devices will be on the bike trail to prevent vehicles from driving down the trail. Mr. Hedlund stated he is still concerned with the extra traffic on Curtis Street especially since there are no sidewalks on Curtis Street. He noted the plan for the development looks like a perfect addition for what the city needs. Mr. Kordus stated it was his understanding from the original plan that Manning Way was always planned to go all the way through.

Roll Call: Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted “yes.” Motion carried 7 to 1 with Alderman Chappell voting “no.”

Discussion/Action on an Application for Land Division Review for a Certified Survey Map submitted on behalf of Tri-State Farms, LLC by Margaret G. Lass Gardiner, Trustee of the Clarence Trust, N1208 State Road 120, Lake Geneva, WI 53147 for land located in the extra-territorial plat review area at State Road 120, Lake Geneva, WI 53147.

Kupsik/Hill motion to approve including the corrections as noted by the City Engineer in the drawing.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted “yes.” Unanimously carried.

Presentation of Accounts – Alderman Kupsik

Purchase Orders. None.

Kupsik/Gelting motion to approve Prepaid Bills in the amount of \$6,944.74. Alderman Hill questioned the invoice for cell charges from 2013 for Ron Carstensen and stated she is not in favor of paying that bill. City Administrator Jordan

stated a check was sent to him back in 2013, which has not been cashed. The check has been reissued to clear out the account.

Hill/Chappell motion an amendment to remove the invoice for cell phone charges related to Ron Carstensen from the prepaid bills.

Roll Call: Chappell, Hill, Gelting, Kupsik, Hedlund voted "yes." Motion carried 5 to 3 with Alderman Wall, Kordus and Howell voting "no."

Main Motion: Kupsik/Gelting motion to approve the Prepaid Bills with the exception of the Ron Carstensen cell phone invoice from 2013.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

Kupsik/Hill motion to approve Regular Bills in the amount of \$138,513.09

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

Kupsik/Wall motion to acceptance the Monthly Treasurer's Report for March 2015

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

Mayoral Appointments. None.

Mayor Connors asked City Administrator Jordan if he would like to say a few words. City Administrator Jordan stated it has been a very interesting 14 years and enjoyed working with the council and wished them all the best. He hopes he has left the city in better shape than when he came in. Mr. Connors invited the public to the Open House on Friday, May 29, 2015.

Closed Session

Kupsik/Kordus motion to go into closed session pursuant to Wis. Stat. 19.85 (1)(e) for competitive bargaining reasons for Fire Union negotiations (Administrator Jordan).

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

The Council entered into closed session at 8:35 p.m.

Return to Open Session

Kupsik/Howell motion to return to open session pursuant to Wisconsin Statutes 19.85(2) and take action on any items discussed in closed session.

Roll Call: Chappell, Wall, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Unanimously carried.

The Council reconvened in open session at 8:40 p.m.

Hill/Kordus motion to instruct City Attorney and the Administrator to negotiate with the Fire Union as discussed in closed session.

Roll Call: Chappell, Kordus, Hill, Gelting, Kupsik, Hedlund, Howell voted "yes." Motion carried 7 to 1 with Alderman Wall "abstaining."

Adjournment

Kordus/Hill motion to adjourn at 8:42 p.m. Unanimously carried.

/s/ Sabrina Waswo, City Clerk

THESE ARE NOT OFFICIAL MINUTES UNTIL APPROVED BY THE COMMON COUNCIL



CITY OF LAKE GENEVA EVENT PERMIT APPLICATION

PLEASE FILL IN ALL BLANKS COMPLETELY, AS INCOMPLETE APPLICATIONS WILL BE REJECTED. APPLICATIONS FOR STREET USE AND/OR PARK PERMITS SHALL BE SUBMITTED AT LEAST 10 WEEKS PRIOR TO THE PROPOSED EVENT DATE(S).

Section I - What type of Permit(s) will your event require?

- Parade & Public Assembly Permit.** Required for any public gathering or parade on public property.
 - If the event is a parade, please attach a map or description of the requested route to be traveled.
- Street Use Permit.** Required for any event using a public street. Per Sec. 62-243 of the municipal code, this application must include the following attachments:
 - Certificate of Comprehensive General Liability Insurance with the City, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
 - Petition signed by more than half of the residential dwelling units and/or commercial units residing along that portion of the street designated for the proposed use or whose property is denied access by virtue of the granting of the permit.
- Parking Stall Bag Request.** Required for reserving the use of any City parking stall.
- Park Reservation Permit.** Required for reserving the use of a park facility or shelter. Please see the Parks Information Packet for more information about available parks and their amenities, park use policies and application procedures.

Section II - Applicant Information

1. Applicant Name: HAROLD JOHNSON Date of Application: 1 MAY 2015
2. Organization Name: FRIENDS OF THE LAKE GENEVA LIBRARY
3. Organization Type: For Profit Non-Profit (501(c)) Tax ID: _____
4. Mailing Address: 727 GENEVA STREET
5. City, State, Zip: LAKE GENEVA, WI 53147
6. Phone: _____ E-mail: _____
7. Applicant's Drivers License #: _____ State license issued: _____

Section III - Event Information

1. Title of Event: BEACHSIDE BOOKFEST
2. Date(s) of Event: JULY 11, 2015
3. Location(s) of Event: LIBRARY PARK
4. Hours: (8AM-10AM move in) 10AM - 6PM (6PM-7PM move out)
Start Time End Time

5. Event Chair/Contact Person: HAROLD JOHNSON / ROBB CHASE Phone: _____

6. Day of Event Contact Name: HAROLD JOHNSON Phone: _____

7. Is the event open to the public? Yes No

8. Will you charge an admission fee? Yes No

9. Estimated Attendance Number: 100+

10. Basis for Estimate: First year event

11. Will you be setting up a tent? Yes No
If yes, list the location, size and rental company: _____

12. Will there be any animals? Yes No
If yes, what type and how many: _____

13. Detailed description of proposed event. Please attach a map of the exact location of the event and/or route.
The goal of this event is to generate a community support event to attract downtown traffic to celebrate the abundance of authors local to our area. The event site is south of the Lake Geneva Library featuring authors and their books. Each author will have a table, two chairs, a small trash receptacle and an identity sign. See attached map. Booths #1-13 and HQ are committed. Additional booth space will only be added as needed in the following order: Yellow #14-19, then #20-22, then #23-29. Next Orange #30-36. Last booth A-E.
An 8' x 8' x 18" portable stage is placed for music + actors to attract attention.

14. Description of plan for handling refuse collection and after-event clean-up:
Staff will provide each author with a trash receptacle + bags
Trash will be collected and event area policed throughout event to avoid buildup as well as at the end of event and disposed of by staff.

15. Description of plan for providing event security (if applicable):
- None required

16. Will there be fireworks or pyrotechnics at your event? Yes No
If yes, please attach a fireworks display permit or application.

17. Will your event include the sale of beer and/or wine? Yes No
If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application.

18. Will you or any other vendors be selling food or merchandise? Yes No
If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.
The New Geneva Java - Coffee/soda/water + Sweets/Scones

Section IV - Street Use

Check if this section does not apply.

1. Description of the portion(s) of road(s) to be used:

2. Will any parking stalls be used or blocked during the event? Yes No

If yes, list where and how many:

Date(s) of use: _____

Total Number of Stalls Request: _____

Stall Number(s) and Location: _____

Additional Information:

3. Description of signage to be used during event:

Please attach a Street Banner Display Application for use of city banner poles.

Three free standing sandwich board signs (24" w x 30" t) will be placed at entry points to event area on the lawn in order to not interfere with traffic on sidewalks (see Event Map - "H" indicates sign placement.)

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- Electricity Explain: _____
- Water Explain: _____
- Traffic Control Explain: _____
- Police Services Explain: _____
- Fire/EMS Services Explain: _____
- Other Explain: _____

Section V- Fees

Application and Permit Fees		Unit Fee	Applicable Fee	
Parade Permit				
Application Fee		\$25.00		_____
Public Assembly Permit				
		\$0.00 (No Fee)		_____
Street Use Permit				
Application Fee		\$25.00		_____
Permit Fee - Events lasting 2 days or less		\$40.00		_____
Permit Fee - Events lasting more than 2 days		\$100.00		_____
Parking Stall Bag Request				
Administrative Fee		\$10.00		_____
Parking Stall Usage/Blockage Fee - Per Stall, Per Day				
March 1 - November 14		\$20.00		_____
November 15 - February 29		\$10.00		_____
Park Reservation Permit				
Application Fee		\$25.00		25.00
Security Deposit				
Non-Profit or Resident				
49 Attendees or Less		\$50.00		_____
50-149 Attendees		\$100.00		100.00
150 or more Attendees		<i>Determined by Park Board</i>		_____
Non-Resident				
49 Attendees or Less		\$100.00		_____
50-149 Attendees		\$150.00		_____
150 or more Attendees		<i>Determined by Park Board</i>		_____
Park Reservation Fees - Per Location, Per Day				
			# of Parks	# of Days
Non-Profit or Resident				
49 Attendees or Less		\$30.00	_____	_____
50-149 Attendees		\$55.00	_____	55.00
150 or more Attendees		\$105.00	_____	_____
Non-Resident				
49 Attendees or Less		\$75.00	_____	_____
50-149 Attendees		\$125.00	_____	_____
150 or more Attendees		\$225.00	_____	_____
				Subtotal: \$ 180.00
Additional Park Amenities				
Equipment (with delivery)	Security Deposit	Rental Fee	# Requested	Applicable Fee
Benches	\$50.00	\$5.00 each	_____	_____
Picnic Tables	\$50.00	\$15.00 each	_____	_____
Barricades	\$50.00	\$5.00 each	_____	_____
Trash Receptacles	\$50.00	\$8.00 each	_____	_____
Dumpster Delivery	\$0	\$50.00 each	_____	_____
Dumpster Pick-up	\$50.00 plus additional landfill fees		_____	_____
Fencing - Snow	\$30.00 per 50 feet		_____	_____
<i>Requests for equipment are subject to availability.</i>				Subtotal: \$ 0.00

Total due with application: \$ 180.00

Accepted by cash, credit card or checks (payable to the City of Lake Geneva)

Section VI - Signature of Applicant

"The information provided in this application is true and correct to the best of my knowledge and belief. I understand that cancellation of any event, for any reason, shall result in the forfeiture of permit fees. I understand that application fees are not refunded in the event the application is not approved. I understand that in addition to the schedule of fees, if any additional City services are requested or determined to be impacted, an additional fee will be charged for those services. I agree to comply with all applicable state, federal and municipal regulations and ordinances."

APPLICANT SIGNATURE:

Mauid J. Johnson DATE: 5-1-2015

For Office Use Only

Date Filed with Clerk: 5/22/15 Payment with application: \$ 180- Receipt: C150522-42

Departmental review (all that apply):

Police Chief: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Fire Chief: Approved Denied Signed: Brent Connelly

Additional services needed: _____

Additional fees or deposit: _____

Street Dept.: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Parking Dept.: Approved Denied Signed: _____

Additional services needed: _____

Additional fees or deposit: _____

Piers, Harbors & Lakefront: Approved Denied Signed: _____

Additional services needed: _____

Additional fees or deposit: _____

Committee/Council review (all that apply):

Park Board: Meeting Date(s): 6-3-15 Approved Denied

Reasons/Conditions: D.M. 6

Finance, License & Regulation: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Council: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Clerk's Office Completion:

Total Add'l fee/deposit to be collected: \$ _____ Receipt # _____

Permit(s) issued: Parade/PA Street Use Park Permit

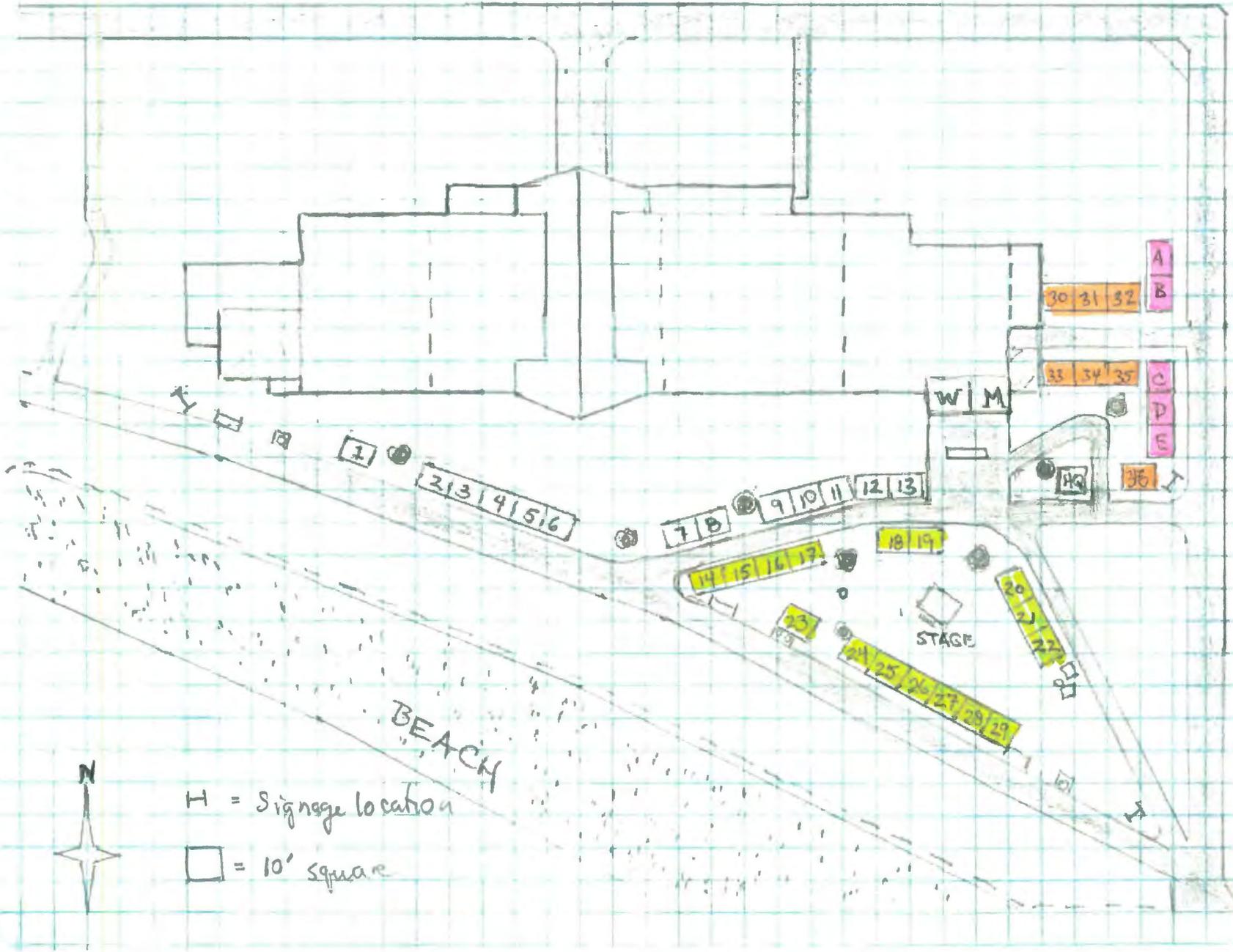
Date of issue: _____ Deposit Returned: \$ _____ Deposit withheld: \$ _____

Reason withheld: _____

MAIN STREET

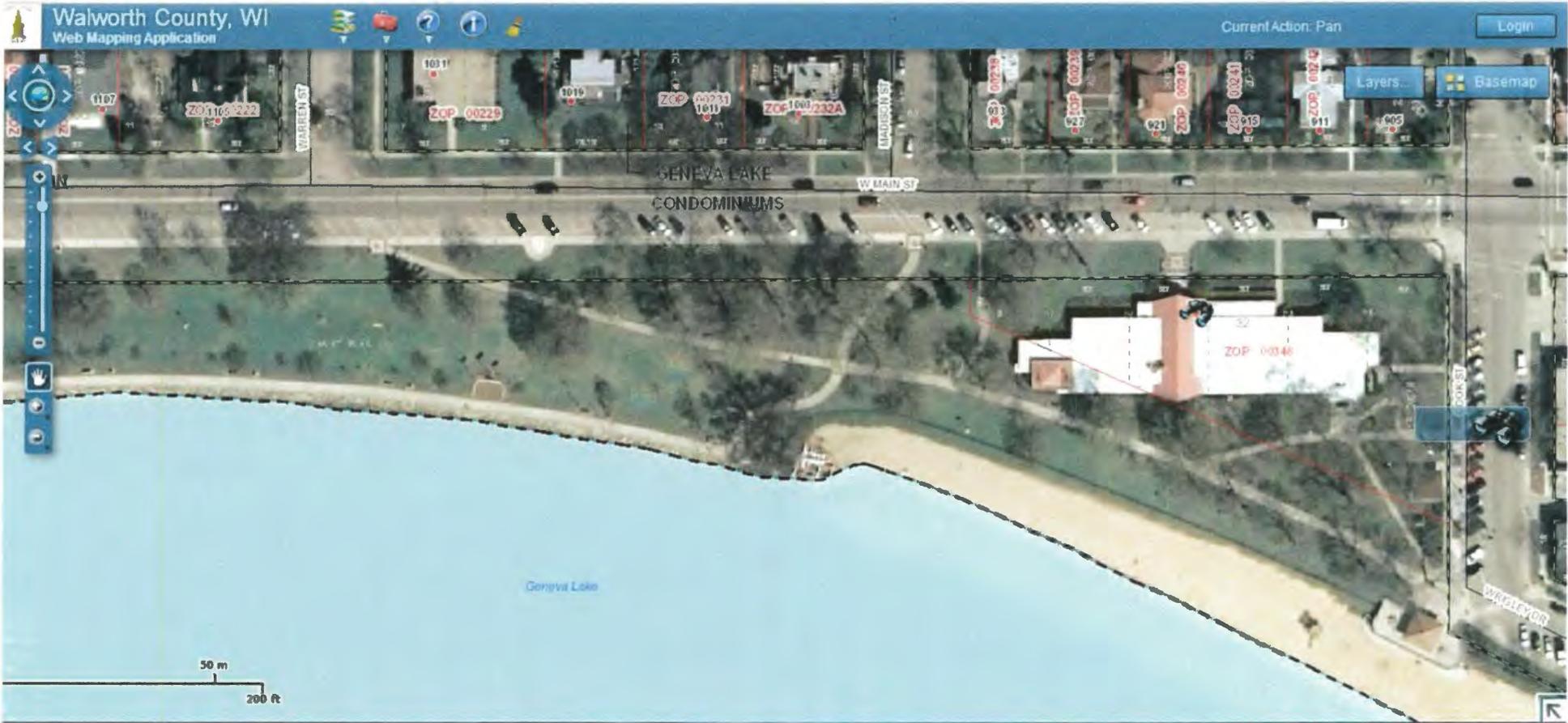
MAIN STREET

WRIGLEY ST



H = Signage location

□ = 10' square



BREADLOAF BOOKSHOP
Harold Johnson - Proprietor
727 Geneva Street
Lake Geneva, WI 53147
(262) 248-9446

City of Lake Geneva
Park Board
626 Geneva Street
Lake Geneva, WI 53147

Subject: Application for Park Use Permit to Host the First Beachside Books Festival

Dear Park Board Members,

Breadloaf Bookshop and The Friends of the Lake Geneva Library are asking for a permit to use Library Park in Lake Geneva on Saturday, July 11th, 2015 to host the first Beachside Bookfest, an event designed to celebrate the many independent authors our locale has to offer. This event would be open to the public providing an opportunity for the community to discover these writers and to buy their books and get them autographed. The event is supported by donations from local businesses, such as Breadloaf, and a small exhibitor fee from the authors to become members of The Friends of the Lake Geneva Library.

The inspiration for this event is actually the brain child of Robb Chase, a local author from Genoa City who hosted several meet & greet signings at Breadloaf Books over the last two years. We at Breadloaf Bookshop recognize the value support from the community has in keeping small businesses, alive. Thus, Books are constantly looking for ways to support other businesses, services and community events that will help grow and celebrate our fine town.

I, Harold Johnson, am the present owner of Breadloaf Books, but I have a varied past including over 40 years of planning, marketing and managing group meetings, events and conventions. Thus, when invited by Robb Chase to participate as a sponsor for the Beachside Bookfest, I not only offered to pay the permit fees, but also to use my experience to help organize this event. It took several months to learn the ins and outs of permits, but with the coaching of several people at city hall, I trust we have dotted all the "I's" and crossed the "T's" to answer all the necessary requirements for a permit. Our alliance with The Friends of the Lake Geneva Library is to attach this event to a not-for-profit organization who would benefit from it.

The Beachside Bookfest has been created as an event to support our community and to attract more people to experience the bounty that may be found in downtown Lake Geneva.

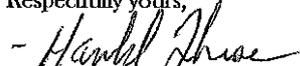
A site map of the proposed layout for the Beachside Bookfest has been attached for your review. This design is flexible and can expand from a dozen booths to provide for up to 40 booths if demand grows before the event. It is our intention that we will assign booths and keep our event space as compact as possible, thus unassigned booths will simply not be erected. We have visited similar events and farmers markets to get an idea of what works best and we noticed that performances, such as drama, music or professional storytelling, attracts attention to the event. Thus, we have provided for an 8' stage.

To date, we have already received confirmations from a dozen authors willing to attend and help inaugurate Lake Geneva's first festival devoted to promoting local writers. We have compiled a list of another two dozen authors to whom we will proffer invitations to join us if our request for a park permit is approved. Further, during our explorations to host this event we have received encouragement and offers of support from other community groups and local businesses. We were so excited about the possibilities we have organized a seminar at the Lake Geneva Library to promote the festival and, as available, we can arrange author signings and events at sponsoring businesses and organizations.

Since it is our intention that this event should appeal to all ages without causing offense, we are planning to review the content of books offered for sale to insure that they are truly suitable family fare.

Please review our application and call me with any requests for clarifications or changes necessary to meet your standards. Thank you for your support and kind consideration.

Respectfully yours,


Harold J. Johnson

Site Plan Overview -

Our site plan for the first Beachside Books Festival has been kept simple, but provides the possibility for expansion if the response from local authors exceeds the initial baker's dozen already committing.

The Event Site Plan is designed to feature the Lake Geneva Library behind the visiting Author booths to showcase the beautiful building of our hosting organization.

Author Booth Spaces -

Each Author space will contain a table (not to exceed 8') and two chairs and an identifying Author Sign. Tables and chairs may be provided by the organizing committee though Authors can provide their own furnishings including an awning to guard against rain, thus each booth is planned to equal 10'x10'. Each booth will also be provided with a waste basket for trash.

Booths will be set back 5' from the sidewalks to provide an unimpeded flow for traffic on walkways. Browsers will be drawn forward off the paths to visit with the authors and examine their books.

Since not all the planned booths may be needed to accommodate our Authors, we plan to assign rows of booths in the following manner. Only occupied booths will be assembled leaving other areas clear.

First Group (committed)	Booths # 1 to #13 plus Headquarters (HQ)	(WHITE)
Second Group	Booths #14 to #19	(YELLOW)
Third Group	Booths #20 to #22	(YELLOW)
Fourth Group	Booths #23 to #29	(YELLOW)
Fifth Group	Booths #30 to #36	(ORANGE)
Final Group	Booths # A to# E	(PINK)

Signage:

Only signage is basic in the form of three free-standing sandwich boards (24" wide x 30" tall) which will be used at the entrance to the event area. (see the Site Plan Map for placement.)

CITY OF LAKE GENEVA EVENT PERMIT APPLICATION



PLEASE FILL IN ALL BLANKS COMPLETELY, AS INCOMPLETE APPLICATIONS WILL BE REJECTED. APPLICATIONS FOR STREET USE AND/OR PARK PERMITS SHALL BE SUBMITTED AT LEAST 10 WEEKS PRIOR TO THE PROPOSED EVENT DATE(S).

Section I - What type of Permit(s) will your event require?

- Parade & Public Assembly Permit.** Required for any public gathering or parade on public property.
 - If the event is a parade, please attach a map or description of the requested route to be traveled.
- Street Use Permit.** Required for any event using a public street. Per Sec. 62-243 of the municipal code, this application must include the following attachments:
 - Certificate of Comprehensive General Liability Insurance with the City, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
 - Petition signed by more than half of the residential dwelling units and/or commercial units residing along that portion of the street designated for the proposed use or whose property is denied access by virtue of the granting of the permit.
- Parking Stall Bag Request.** Required for reserving the use of any City parking stall.
- Park Reservation Permit.** Required for reserving the use of a park facility or shelter. Please see the Parks Information Packet for more information about available parks and their amenities, park use policies and application procedures.

Section II - Applicant Information

1. Applicant Name: Gertrude Suhajda Date of Application: 5/26/15
2. Organization Name: Anchor Covenant Church
3. Organization Type: For Profit Non-Profit (501(c) 3) Tax ID: _____
4. Mailing Address: 1229 Park Row
5. City, State, Zip: Lake Geneva WI 53147
6. Phone: _____ E-mail: office@anchorcovenant.org
7. Applicant's Drivers License #: _____ State license issued: _____

Section III - Event Information

1. Title of Event: Troastapalooza
2. Date(s) of Event: June 20th
3. Location(s) of Event: 1229 Park Row L.G. WI 53147
4. Hours: 12pm 8pm
Start Time End Time

5. Event Chair/Contact Person: Bruce Brun s Phone: _____

6. Day of Event Contact Name: Neal DeVries Phone: _____

7. Is the event open to the public? Yes No

8. Will you charge an admission fee? Yes No

9. Estimated Attendance Number: 120-150

10. Basis for Estimate: Past events

11. Will you be setting up a tent? Yes No
If yes, list the location, size and rental company: _____

12. Will there be any animals? Yes No
If yes, what type and how many: _____

13. Detailed description of proposed event. Please attach a map of the exact location of the event and/or route.
A music festival / Block party to be held in the parking lot of Anchor Covenant Church 1229 Park Row L.G.

14. Description of plan for handling refuse collection and after-event clean-up:
A volunteer crew from church will have everything Clean by 10pm

15. Description of plan for providing event security (if applicable):
A volunteer team from the church. It shouldn't be necessary

16. Will there be fireworks or pyrotechnics at your event? Yes No
If yes, please attach a fireworks display permit or application.

17. Will your event include the sale of beer and/or wine? Yes No
If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application.

18. Will you or any other vendors be selling food or merchandise? Yes No
If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.

Section IV - Street Use

Check if this section does not apply.

1. Description of the portion(s) of road(s) to be used:

Park Row between Maxwell + Clover west bound lane Only.

2. Will any parking stalls be used or blocked during the event? Yes No

If yes, list where and how many:

Date(s) of use: _____

Total Number of Stalls Request: _____

Stall Number(s) and Location: _____

Additional Information:

3. Description of signage to be used during event:

Please attach a Street Banner Display Application for use of city banner poles.

Banner on Church property

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- Electricity Explain: _____
- Water Explain: _____
- Traffic Control Explain: _____
- Police Services Explain: _____
- Fire/EMS Services Explain: _____
- Other Explain: _____

Section V- Fees

Application and Permit Fees		Unit Fee	Applicable Fee	
Parade Permit				
Application Fee		\$25.00		_____
Public Assembly Permit				
		\$0.00 (No Fee)		_____
Street Use Permit				
Application Fee		\$25.00		_____
Permit Fee - Events lasting 2 days or less		\$40.00		_____
Permit Fee - Events lasting more than 2 days		\$100.00		_____
Parking Stall Bag Request				
Administrative Fee		\$10.00		_____
Parking Stall Usage/Blockage Fee - Per Stall, Per Day				
March 1 - November 14		\$20.00		_____
November 15 - February 29		\$10.00		_____
Park Reservation Permit				
Application Fee		\$25.00		_____
Security Deposit				
Non-Profit or Resident				
49 Attendees or Less		\$50.00		_____
50-149 Attendees		\$100.00		_____
150 or more Attendees		<i>Determined by Park Board</i>		_____
Non-Resident				
49 Attendees or Less		\$100.00		_____
50-149 Attendees		\$150.00		_____
150 or more Attendees		<i>Determined by Park Board</i>		_____
Park Reservation Fees - Per Location, Per Day				
			# of Parks	# of Days
Non-Profit or Resident				
49 Attendees or Less	\$30.00		_____	_____
50-149 Attendees	\$55.00		_____	_____
150 or more Attendees	\$105.00		_____	_____
Non-Resident				
49 Attendees or Less	\$75.00		_____	_____
50-149 Attendees	\$125.00		_____	_____
150 or more Attendees	\$225.00		_____	_____
				Subtotal: \$
Additional Park Amenities				
Equipment (with delivery)	Security Deposit	Rental Fee	# Requested	Applicable Fee
Benches	\$50.00	\$5.00 each	_____	_____
Picnic Tables	\$50.00	\$15.00 each	_____	_____
Barricades	\$50.00	\$5.00 each	_____	_____
Trash Receptacles	\$50.00	\$8.00 each	_____	_____
Dumpster Delivery	\$0	\$50.00 each	_____	_____
Dumpster Pick-up	\$50.00 plus additional landfill fees		_____	_____
Fencing - Snow	\$30.00 per 50 feet		_____	_____
<i>Requests for equipment are subject to availability.</i>				Subtotal: \$

Handwritten: \$25
\$40

Total due with application: \$ 105.00

Accepted by cash, credit card or checks (payable to the City of Lake Geneva)

Section VI - Signature of Applicant

"The information provided in this application is true and correct to the best of my knowledge and belief. I understand that cancellation of any event, for any reason, shall result in the forfeiture of permit fees. I understand that application fees are not refunded in the event the application is not approved. I understand that in addition to the schedule of fees, if any additional City services are requested or determined to be impacted, an additional fee will be charged for those services. I agree to comply with all applicable state, federal and municipal regulations and ordinances."

APPLICANT SIGNATURE:

[Handwritten Signature] DATE: 5/26/15
For Office Use Only

Date Filed with Clerk: 5/28/15 Payment with application: \$ 65.00 Receipt: C150528-23

Departmental review (all that apply):

- Police Chief: Approved Denied Signed: *[Signature]*
 Additional services needed: _____
 Additional fees or deposit: _____
- Fire Chief: Approved Denied Signed: *Brent Connelly*
 Additional services needed: _____
 Additional fees or deposit: _____
- Street Dept.: Approved Denied Signed: *Pat W...*
 Additional services needed: May Need Barricades to close Rd. PD?
 Additional fees or deposit: _____
- Parking Dept.: Approved Denied Signed: _____
 Additional services needed: _____
 Additional fees or deposit: _____
- Piers, Harbors & Lakefront: Approved Denied Signed: _____
 Additional services needed: _____
 Additional fees or deposit: _____

Committee/Council review (all that apply):

- Park Board: Meeting Date(s): _____ Approved Denied
 Reasons/Conditions: _____
- Finance, License & Regulation: Meeting Date(s): _____ Approved Denied
 Reasons/Conditions: _____
- Council: Meeting Date(s): _____ Approved Denied
 Reasons/Conditions: _____

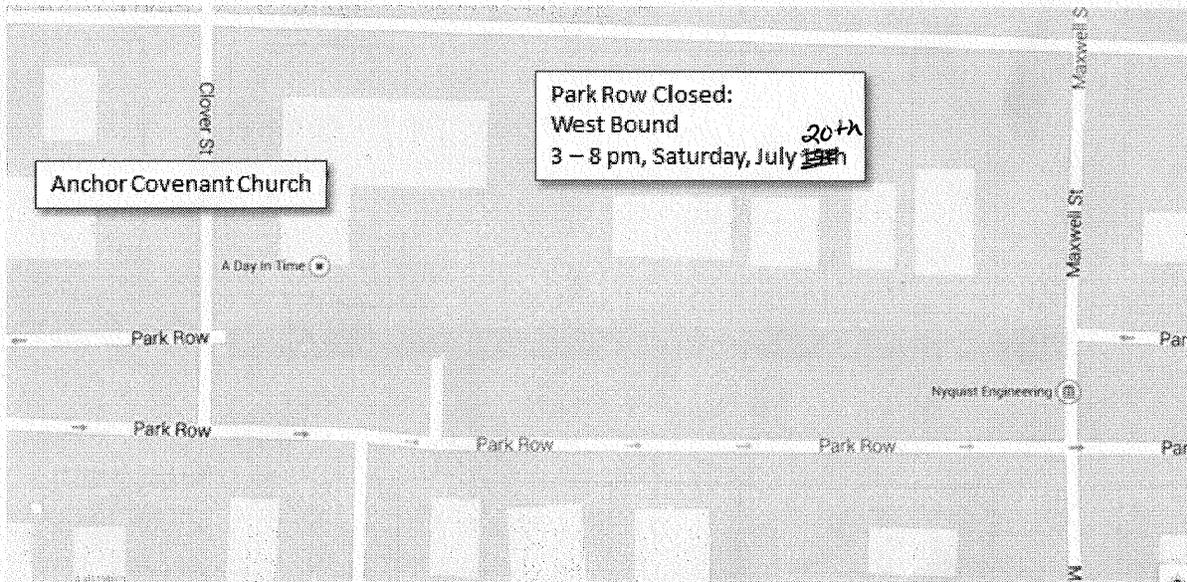
Clerk's Office Completion:

Total Add'l fee/deposit to be collected: \$ _____ Receipt # _____
 Permit(s) issued: Parade/PA Street Use Park Permit
 Date of issue: _____ Deposit Returned: \$ _____ Deposit withheld: \$ _____
 Reason withheld: _____

Petition to Close Park Row

Dear Neighbor,

Anchor Covenant Church is hosting a family friendly concert event on June 20th. We would like to ask your permission to temporarily close the west bound side of Park Row, between Clover Street and Maxwell Street from 3 pm to 8 pm on that day. Additionally, we would love to have you and your family and friends join us for this fun evening of music and food.



By signing below, you give your permission to Anchor Covenant Church, and the City of Lake Geneva to execute this temporary closure. Thank you!

Name

Address

J A Sheen

1213 Park Row

Cheryl Fringer

1209 Park Row

[Signature]

1207 Park Row left letter

1205 Park Row left letter

[Signature]

1229 Park Row

STARK
PT

CITY OF LAKE GENEVA EVENT PERMIT APPLICATION



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Section I - What type of Permit(s) will your event require?

- Parade & Public Assembly Permit.** Required for any public gathering or parade on public property.
 - If the event is a parade, please attach a map or description of the requested route to be traveled.
- Street Use Permit.** Required for any event using a public street. Per Sec. 62-243 of the municipal code, this application must include the following attachments:
 - Certificate of Comprehensive General Liability Insurance with the City, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
 - Petition signed by more than half of the residential dwelling units and/or commercial units residing along that portion of the street designated for the proposed use or whose property is denied access by virtue of the granting of the permit.
- Parking Stall Bag Request.** Required for reserving the use of any City parking stall.
- Park Reservation Permit.** Required for reserving the use of a park facility or shelter. Please see the Parks Information Packet for more information about available parks and their amenities, park use policies and application procedures.

Section II - Applicant Information

1. Applicant Name: Kimberly Armitage Date of Application: 5/15/15
2. Organization Name: _____
3. Organization Type: For Profit Non-Profit (501(c)____) Tax ID: _____
4. Mailing Address: 681 Southwind Dr. #104
5. City, State, Zip: Lake Geneva, WI 53147
6. Phone: _____ ail: _____
7. Applicant's Drivers License #: _____ license issued: _____

Section III - Event Information

1. Title of Event: Jaxons 1st Birthday Party (my grandson)
2. Date(s) of Event: JULY 25, 2015
3. Location(s) of Event: Veterans Park
4. Hours: 2 p.m. Start Time 4 p.m. End Time

5. Event Chair/Contact Person: Kim Armitage Phone: _____
6. Day of Event Contact Name: Cassie Saylor Phone: _____
7. Is the event open to the public? Yes No
8. Will you charge an admission fee? Yes No
9. Estimated Attendance Number: 25-35

10. Basis for Estimate: _____

11. Will you be setting up a tent? Yes No
If yes, list the location, size and rental company: _____

12. Will there be any animals? Yes No
If yes, what type and how many: _____

13. Detailed description of proposed event. Please attach a map of the exact location of the event and/or route.
Shelter in Park (Veterans Park)

14. Description of plan for handling refuse collection and after-event clean-up: Garbage cans brought in as well as we will not serve meals just snacks & cake.

15. Description of plan for providing event security (if applicable):

16. Will there be fireworks or pyrotechnics at your event? Yes No
If yes, please attach a fireworks display permit or application.
17. Will your event include the sale of beer and/or wine? Yes No
If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application.
18. Will you or any other vendors be selling food or merchandise? Yes No
If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.

Section IV - Street Use

Check if this section does not apply.

1. Description of the portion(s) of road(s) to be used:

2. Will any parking stalls be used or blocked during the event? Yes No
If yes, list where and how many:
Date(s) of use: _____
Total Number of Stalls Request: _____
Stall Number(s) and Location: _____

Additional Information:

3. Description of signage to be used during event:
Please attach a Street Banner Display Application for use of city banner poles.

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- Electricity Explain: _____
- Water Explain: _____
- Traffic Control Explain: _____
- Police Services Explain: _____
- Fire/EMS Services Explain: _____
- Other Explain: _____

Section V- Fees

Application and Permit Fees		Unit Fee			Applicable Fee
Parade Permit					\$25.00
Application Fee		\$25.00			
Public Assembly Permit		\$0.00 (No Fee)			
Street Use Permit					
Application Fee		\$25.00			
Permit Fee - Events lasting 2 days or less		\$40.00			
Permit Fee - Events lasting more than 2 days		\$100.00			
Parking Stall Bag Request					
Administrative Fee		\$10.00			
Parking Stall Usage/Blockage Fee - Per Stall, Per Day					
March 1 - November 14		\$20.00			
November 15 - February 29		\$10.00			
Park Reservation Permit					
Application Fee		\$25.00			\$25.00
Security Deposit					
Non-Profit or Resident					
49 Attendees or Less		\$50.00			\$50.00
50-149 Attendees		\$100.00			
150 or more Attendees		Determined by Park Board			
Non-Resident					
49 Attendees or Less		\$100.00			
50-149 Attendees		\$150.00			
150 or more Attendees		Determined by Park Board			
Park Reservation Fees - Per Location, Per Day			# of Parks	# of Days	
Non-Profit or Resident					
49 Attendees or Less		\$30.00	1	1	\$30.00
50-149 Attendees		\$55.00			
150 or more Attendees		\$105.00			
Non-Resident					
49 Attendees or Less		\$75.00			
50-149 Attendees		\$125.00			
150 or more Attendees		\$225.00			
			Subtotal: \$		
Additional Park Amenities					
Equipment (with delivery)	Security Deposit	Rental Fee	# Requested		Applicable Fee
Benches	\$50.00	\$5.00 each			
Picnic Tables	\$50.00	\$15.00 each			
Barricades	\$50.00	\$5.00 each			
Trash Receptacles	\$50.00	\$8.00 each			
Dumpster Delivery	\$0	\$50.00 each			
Dumpster Pick-up	\$50.00 plus additional landfill fees				
Fencing - Snow	\$30.00 per 50 feet				
<i>Requests for equipment are subject to availability.</i>			Subtotal: \$		\$105.00

Total due with application: \$105.00

Accepted by cash, credit card or checks (payable to the City of Lake Geneva)

Section VI - Signature of Applicant

"The information provided in this application is true and correct to the best of my knowledge and belief. I understand that cancellation of any event, for any reason, shall result in the forfeiture of permit fees. I understand that application fees are not refunded in the event the application is not approved. I understand that in addition to the schedule of fees, if any additional City services are requested or determined to be impacted, an additional fee will be charged for those services. I agree to comply with all applicable state, federal and municipal regulations and ordinances."

APPLICANT SIGNATURE:

Kimberly Amateau DATE: 5/15/15

Fee Office Use Only

Event Filed with Clerk: 5/15 Payment with application: \$105 Receipt: C15055-6

Departmental review (all that apply)

Police Dept. Approved Denied Signed: [Signature]
 Additional services needed: _____
 Additional fee or deposit: _____

Fire Dept. Approved Denied Signed: Burt Connelly
 Additional services needed: _____
 Additional fee or deposit: _____

Street Dept. Approved Denied Signed: [Signature]
 Additional services needed: _____
 Additional fee or deposit: _____

Parking Dept. Approved Denied Signed: _____
 Additional services needed: _____
 Additional fee or deposit: _____

Parks, Recreation & Leisure Approved Denied Signed: _____
 Additional services needed: _____
 Additional fee or deposit: _____

Consulting/ Council review (all that apply)

Park Board Meeting Date: 6-2-15 Approved Denied
 Reasons/Conditions: [Signature]

Finance, License & Regulation Meeting Date: _____ Approved Denied
 Reasons/Conditions: _____

Council Meeting Date: _____ Approved Denied
 Reasons/Conditions: _____

Clerk's Office Completion

Total dollar fee/deposit to be collected: \$ _____ Receipt # _____

Permitty issued: Permits/PS Street Use Park Permit

Date of issue: _____ Deposit returned: \$ _____ Deposit withheld: \$ _____

Reason withheld: _____

CITY OF LAKE GENEVA EVENT PERMIT APPLICATION



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Section I - What type of Permit(s) will your event require?

- Parade & Public Assembly Permit.** Required for any public gathering or parade on public property.
 - If the event is a parade, please attach a map or description of the requested route to be traveled.
- Street Use Permit.** Required for any event using a public street. Per Sec. 62-243 of the municipal code, this application must include the following attachments:
 - Certificate of Comprehensive General Liability Insurance with the City, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
 - Petition signed by more than half of the residential dwelling units and/or commercial units residing along that portion of the street designated for the proposed use or whose property is denied access by virtue of the granting of the permit.
- Parking Stall Bag Request.** Required for reserving the use of any City parking stall.
- Park Reservation Permit.** Required for reserving the use of a park facility or shelter. Please see the Parks Information Packet for more information about available parks and their amenities, park use policies and application procedures.

Section II - Applicant Information

1. Applicant Name: Ray Ortiz Date of Application: 5-28-15
2. Organization Name: _____
3. Organization Type: For Profit Non-Profit (501(c)____) Tax ID: N/A
4. Mailing Address: 529 Beloit St Apt 6
5. City, State, Zip: Delavan, WI 53115
6. Phone: _____ E-mail: _____
7. Applicant's Drivers License #: _____ State license issued: _____

Section III - Event Information

1. Title of Event: Natalia's Birthday
2. Date(s) of Event: 6/20/15
3. Location(s) of Event: Seminary Park
4. Hours: 2 pm Start Time 7 pm End Time

5. Event Chair/Contact Person: _____ Phone: _____

6. Day of Event Contact Name: Ray Ortiz Phone: _____

7. Is the event open to the public? Yes No

8. Will you charge an admission fee? Yes No

9. Estimated Attendance Number: ~~50~~ 45

10. Basis for Estimate: immediate family only

11. Will you be setting up a tent? Yes No
If yes, list the location, size and rental company: _____

12. Will there be any animals? Yes No
If yes, what type and how many: _____

13. Detailed description of proposed event. Please attach a map of the exact location of the event and/or route. Birthday party for my daughter. Cake, food, + none alcoholic beverages

14. Description of plan for handling refuse collection and after-event clean-up: waste will be cleaned + disposed of by us.

15. Description of plan for providing event security (if applicable): N/A

16. Will there be fireworks or pyrotechnics at your event? Yes No
If yes, please attach a fireworks display permit or application.

17. Will your event include the sale of beer and/or wine? Yes No
If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application.

18. Will you or any other vendors be selling food or merchandise? Yes No
If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.

Section IV - Street Use

Check if this section does not apply.

1. Description of the portion(s) of road(s) to be used:

2. Will any parking stalls be used or blocked during the event? Yes No
If yes, list where and how many:
Date(s) of use: _____
Total Number of Stalls Request: _____
Stall Number(s) and Location: _____
Additional Information:

3. Description of signage to be used during event:
Please attach a Street Banner Display Application for use of city banner poles.

N/A

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- Electricity Explain: _____
- Water Explain: _____
- Traffic Control Explain: _____
- Police Services Explain: _____
- Fire/EMS Services Explain: _____
- Other Explain: _____

Section V- Fees

Application and Permit Fees		Unit Fee	Applicable Fee	
Parade Permit				
Application Fee		\$25.00		_____
Public Assembly Permit				
		\$0.00 (No Fee)		_____
Street Use Permit				
Application Fee		\$25.00		_____
Permit Fee - Events lasting 2 days or less		\$40.00		_____
Permit Fee - Events lasting more than 2 days		\$100.00		_____
Parking Stall Bag Request				
Administrative Fee		\$10.00		_____
Parking Stall Usage/Blockage Fee - Per Stall, Per Day				
March 1 - November 14		\$20.00		_____
November 15 - February 29		\$10.00		_____
Park Reservation Permit				
Application Fee		\$25.00		<u>25.00</u>
Security Deposit				
Non-Profit or Resident				
49 Attendees or Less		\$50.00		_____
50-149 Attendees		\$100.00		_____
150 or more Attendees		<i>Determined by Park Board</i>		_____
Non-Resident				
49 Attendees or Less		\$100.00		<u>100.00</u>
50-149 Attendees		\$150.00		_____
150 or more Attendees		<i>Determined by Park Board</i>		_____
Park Reservation Fees - Per Location, Per Day				
			# of Parks	# of Days
Non-Profit or Resident				
49 Attendees or Less	\$30.00		_____	_____
50-149 Attendees	\$55.00		_____	_____
150 or more Attendees	\$105.00		_____	_____
Non-Resident				
49 Attendees or Less	\$75.00	1	1	<u>75.00</u>
50-149 Attendees	\$125.00			_____
150 or more Attendees	\$225.00			_____
				Subtotal: \$ _____
Additional Park Amenities				
Equipment (with delivery)	Security Deposit	Rental Fee	# Requested	Applicable Fee
Benches	\$50.00	\$5.00 each	_____	_____
Picnic Tables	\$50.00	\$15.00 each	_____	_____
Barricades	\$50.00	\$5.00 each	_____	_____
Trash Receptacles	\$50.00	\$8.00 each	_____	_____
Dumpster Delivery	\$0	\$50.00 each	_____	_____
Dumpster Pick-up	\$50.00 plus additional landfill fees		_____	_____
Fencing - Snow	\$30.00 per 50 feet		_____	_____
<i>Requests for equipment are subject to availability.</i>				Subtotal: \$ <u>200.00</u>

Total due with application: \$ 200.00

Accepted by cash, credit card or checks (payable to the City of Lake Geneva)

Section VI - Signature of Applicant

"The information provided in this application is true and correct to the best of my knowledge and belief. I understand that cancellation of any event, for any reason, shall result in the forfeiture of permit fees. I understand that application fees are not refunded in the event the application is not approved. I

understand that in addition to the schedule of fees, if any additional City services are requested or determined to be impacted, an additional fee will be charged for those services. I agree to comply with all applicable state, federal and municipal regulations and ordinances."

APPLICANT SIGNATURE:



DATE: 5/27/15

Fee Copy Use Only

Event Title with Class: 5/27/15 Permit with application #: 100-00 Fee #: 012028-03

Department/office (all fee items):

<input checked="" type="checkbox"/> Police Dept	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	Sign: 
Additional services needed: _____			
Additional fee or deposit: _____			
<input checked="" type="checkbox"/> Fire Dept	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	Sign: <u>Ronald Gonzalez</u>
Additional services needed: _____			
Additional fee or deposit: _____			
<input checked="" type="checkbox"/> Health Dept	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	Sign: <u>Al Al</u>
Additional services needed: _____			
Additional fee or deposit: _____			
<input type="checkbox"/> Public Works	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Sign: _____
Additional services needed: _____			
Additional fee or deposit: _____			

Community-based review (all fee items):

<input checked="" type="checkbox"/> Police Dept	Meeting Dates: <u>5/15</u>	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied
Review Comments: <u>OK</u>			
<input type="checkbox"/> Fire Dept	Meeting Dates: _____	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Review Comments: _____			
<input type="checkbox"/> Health Dept	Meeting Dates: _____	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Review Comments: _____			

City Office Completion:

Total additional departmental fee collected: \$ _____ Receipt # _____

Permit fee: Permit Fee Application Fee Other Permit _____

Fee of \$ _____ Deposit returned: Deposit returned: _____

Review comments: _____

2014-2015

City Clerk's Office
626 Geneva Street
Lake Geneva, WI 53147
(262) 248-3673
www.cityoflakegeneva.com



CITY OF LAKE GENEVA

ALCOHOL LICENSE PREMISES EXTENSION APPLICATION

PLEASE FILL IN ALL BLANKS COMPLETELY, AS INCOMPLETE APPLICATIONS WILL BE REJECTED.

Please Check:

- Request for premises extension to sidewalk café
- Request for temporary (special event) premises extension
- Request for premises extension to permanent outdoor area
- Other request for premises extension

Application Checklist:

- Applicant must currently hold a valid alcohol license
- Applicant obtained a Temporary Use Permit or Conditional Use Permit from the Building and Zoning Department (for special events and permanent outdoor areas)
- Scaled diagram which accurately depicts the location of the premises extension. Such drawing shall include the access points, fencing (if applicable) and the location of where alcohol will be stored and/or served.
- Application Fee of \$25.00 to amend an already approved licensed premises. This fee is charged to defray the cost of review and re-issuance of the license. This fee does NOT apply to premises extensions requested at the time of annual renewal of the license.

APPLICANT INFORMATION

Applicant Name: Linda Chronis

Establishment Name: Hops & Kisses

Address: 149 Broad Street PO Box 536 Lake Geneva WI

Alcohol License No.: _____ Phone: _____

Describe area of premises extension:

Area along the front of the building under the existing awning

SPECIAL EVENT INFORMATION (For Temporary Premises Extension Only)

Event Title: _____

Date and Time of Event: _____

Have you obtained a Temporary Use Permit (or Conditional Use Permit) from the Building and Zoning Department? Yes No

Event Description:

SIGNATURE OF APPLICANT

DATE

For Office Use Only

Date Filed with Clerk: 4/21/15

Total Amount: \$ 25.00

Receipt No.: C150421-13

Date Forwarded to Police Chief: 4/21/15

Police Chief Signature: _____

Approved

Denied

Date Forwarded to Zoning Administrator: 4/27/15 (for non-sidewalk café applications)

Zoning Administrator Signature: _____

Approved

Denied

Date of FLR/Council Approval: _____

Copies Provided to:

Police Chief

EAST

KITCHEN

FOYER

Building

ALLEY

South →

32"

TABLE

TABLE

TABLE

UNDER CANOPY

ROPE

ROPE

9'9"

Sidewalk

ALLEY

Keoni

WEST

BROAD STREET

Hobs & Kisses
149 BROAD ST.

SCALE: 1/4" = 1'	APPROVED BY	DRAWN BY
DATE:		
SIDE WALK SEATING		
		DRAWING NUMBER

2014-2015

City Clerk's Office
626 Geneva Street
Lake Geneva, WI 53147
(262) 248-3673
www.cityoflakegeneva.com



CITY OF LAKE GENEVA

SIDEWALK CAFÉ PERMIT APPLICATION

PLEASE FILL IN ALL BLANKS COMPLETELY, AS INCOMPLETE APPLICATIONS WILL BE REJECTED.

Please Check:

- Initial Sidewalk Café Permit with Alcohol
- Initial Sidewalk Café Permit without Alcohol
- Renewal of Sidewalk Café Permit with Alcohol
- Renewal of Sidewalk Café Permit without Alcohol

Application Checklist:

- Certificate of Comprehensive General Liability Insurance naming the City as a party insured against liability resulting from the uses permitted herein. The coverage shall be in an amount not less than \$1,000,000.00.
- Scaled diagram which accurately depicts the dimensions of the existing sidewalk area and adjacent private property, the proposed location of the sidewalk café, size and number of tables, seats, bollards (and chains or ropes), planters, umbrellas, location of doorways, tree, signage, parking meters, obstructions (either existing or proposed, within the pedestrian way). Site plan must depict five (5) feet of unobstructed sidewalk for public use.
- Copy of restaurant license issued by the Wisconsin Department of Health and Human Services under Wis. Stat. 254.64.
- Application Fee of \$15.00 per seat: 6 seats x \$15.00 = \$ 90
(# OF SEATS) (TOTAL FEE)
- Alcohol License Premises Extension Application. If the applicant wishes to serve alcohol in the sidewalk café area, the applicant must currently hold a valid license to serve alcohol and submit an application requesting the premises description of the license be amended to include the sidewalk café area.

APPLICANT INFORMATION

Applicant Name: Linda Chronis
 Establishment Name: Hugs + Kisses, LLC
 Address: 149 Broad Street, PO Box 536 Lake Geneva
 Phone: 262 248 7447 E-mail: hugs@att.net

- Do food sales generate more than 50% of gross receipts? Yes No
- Are you requesting to serve alcoholic beverages? Yes No

If so, please provide the following information:

Agent Name: Linda Chromis
 Agent Address: W3441 McDonald Road Lake Geneva WI 53147
 Agent Phone: _____
 Agent E-mail: _____
 Signature of Agent: Linda Chromis Date: _____

INDEMNIFICATION STATEMENT

I, Linda Marie Chromis representing Hops & Kisses as its
(FULL NAME) (ESTABLISHMENT)

President/Partner agree to hold harmless and indemnify the City, its directors,
(TITLE)
 officers, employees and agents, from and against any and all liabilities, losses, claims, demands,
 damages, fines, penalties, costs and expenses, including, but not limited to, reasonable attorney's
 fees and costs of litigation, and all causes of action of any kind or character resulting from my use
 of the public sidewalk as a café. I certify that I have read and understand the rules of Section 62-67

(6) Sidewalk Café permits.

Linda Chromis
 SIGNATURE OF APPLICANT DATE

For Office Use Only

Date Filed with Clerk: <u>4/21/15</u>		Receipt No.: <u>C150421-13</u>	
Total Amount: \$ <u>90.00</u>			
Date Forwarded to Police Chief: <u>4/21/15</u>	Police Chief Signature: _____	<input checked="" type="radio"/> Approved	<input type="radio"/> Denied
Date Forwarded to Director of Public Works: <u>4/27/15</u>	Director of Public Works Signature: _____	<input checked="" type="radio"/> Approved	<input type="radio"/> Denied <u>VERY TICKET (32")</u>
Date of FLR/Council Approval (for alcohol license amendment, if applicable): _____			
Permit Issue Date: _____		Permit Number: _____	
Copies Provided to:	Police Chief	Fire Chief	
	DPW Director	Zoning Administrator	

2015 - 2016



CITY OF LAKE GENEVA

ALCOHOL LICENSE PREMISES EXTENSION APPLICATION

PLEASE FILL IN ALL BLANKS COMPLETELY, AS INCOMPLETE APPLICATIONS WILL BE REJECTED.

Please Check:

- Request for premises extension to sidewalk café Request for temporary (special event) premises extension
- Request for premises extension to permanent outdoor area Other request for premises extension

Application Checklist:

- Applicant must currently hold a valid alcohol license
- Applicant obtained a Temporary Use Permit or Conditional Use Permit from the Building and Zoning Department (for special events and permanent outdoor areas)
- Scaled diagram which accurately depicts the location of the premises extension. Such drawing shall include the access points, fencing (if applicable) and the location of where alcohol will be stored and/or served.
- Application Fee of \$25.00 to amend an already approved licensed premises. This fee is charged to defray the cost of review and re-issuance of the license. This fee does NOT apply to premises extensions requested at the time of annual renewal of the license.

APPLICANT INFORMATION

Applicant Name: Linda Chronis

Establishment Name: Hogs & Kisses

Address: 149 Broad Street PO Box 536 Lake Geneva WI

Alcohol License No.: _____ Phone: _____

Describe area of premises extension:

Area along the front of the building under the existing awning

SPECIAL EVENT INFORMATION (For Temporary Premises Extension Only)

Event Title: _____

Date and Time of Event: _____

Have you obtained a Temporary Use Permit (or Conditional Use Permit) from the Building and Zoning Department? Yes No

Event Description:

SIGNATURE OF APPLICANT

DATE

For Office Use Only

Date Filed with Clerk:	<u>4/21/15</u>
Total Amount: \$	<u>25.00</u>
Receipt No.:	<u>C150421-13</u>
Date Forwarded to Police Chief:	<u>4/21/15</u>
Police Chief Signature:	<u>[Signature]</u> <input checked="" type="radio"/> Approved <input type="radio"/> Denied
Date Forwarded to Zoning Administrator:	<u>4/27/15</u> (for non-sidewalk café applications)
Zoning Administrator Signature:	_____ <input type="radio"/> Approved <input type="radio"/> Denied
Date of FLR/Council Approval:	_____
Copies Provided to:	Police Chief

EAST

KITCHEN

Hops & Kisses

ALLEY

South →

Foyer

32"

TABLE

TABLE

TABLE

9'9"

Stanchion

UNDER CANOPY

Stanchion

Sidewalk

ALLEY

WEST

BROAD STREET

Hops & Kisses
149 BROAD ST.

SCALE: 1/4" = 1'

APPROVED BY

DRAWN BY

DATE:

SIDE WALK SEATING

DRAWING NUMBER

2015-2016



CITY OF LAKE GENEVA

ALCOHOL LICENSE PREMISES EXTENSION APPLICATION

PLEASE FILL IN ALL BLANKS COMPLETELY, AS INCOMPLETE APPLICATIONS WILL BE REJECTED.

Please Check:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Request for premises extension to sidewalk café | <input type="checkbox"/> Request for temporary (special event) premises extension |
| <input type="checkbox"/> Request for premises extension to permanent outdoor area | <input type="checkbox"/> Other request for premises extension |

Application Checklist:

- Applicant must currently hold a valid alcohol license
- Applicant obtained a Temporary Use Permit or Conditional Use Permit from the Building and Zoning Department (for special events and permanent outdoor areas)
- Scaled diagram which accurately depicts the location of the premises extension. Such drawing shall include the access points, fencing (if applicable) and the location of where alcohol will be stored and/ or served.
- Application Fee of \$25.00 to amend an already approved licensed premises. This fee is charged to defray the cost of review and re-issuance of the license. This fee does NOT apply to premises extensions requested at the time of annual renewal of the license.

APPLICANT INFORMATION

Applicant Name: TOM TRILLA

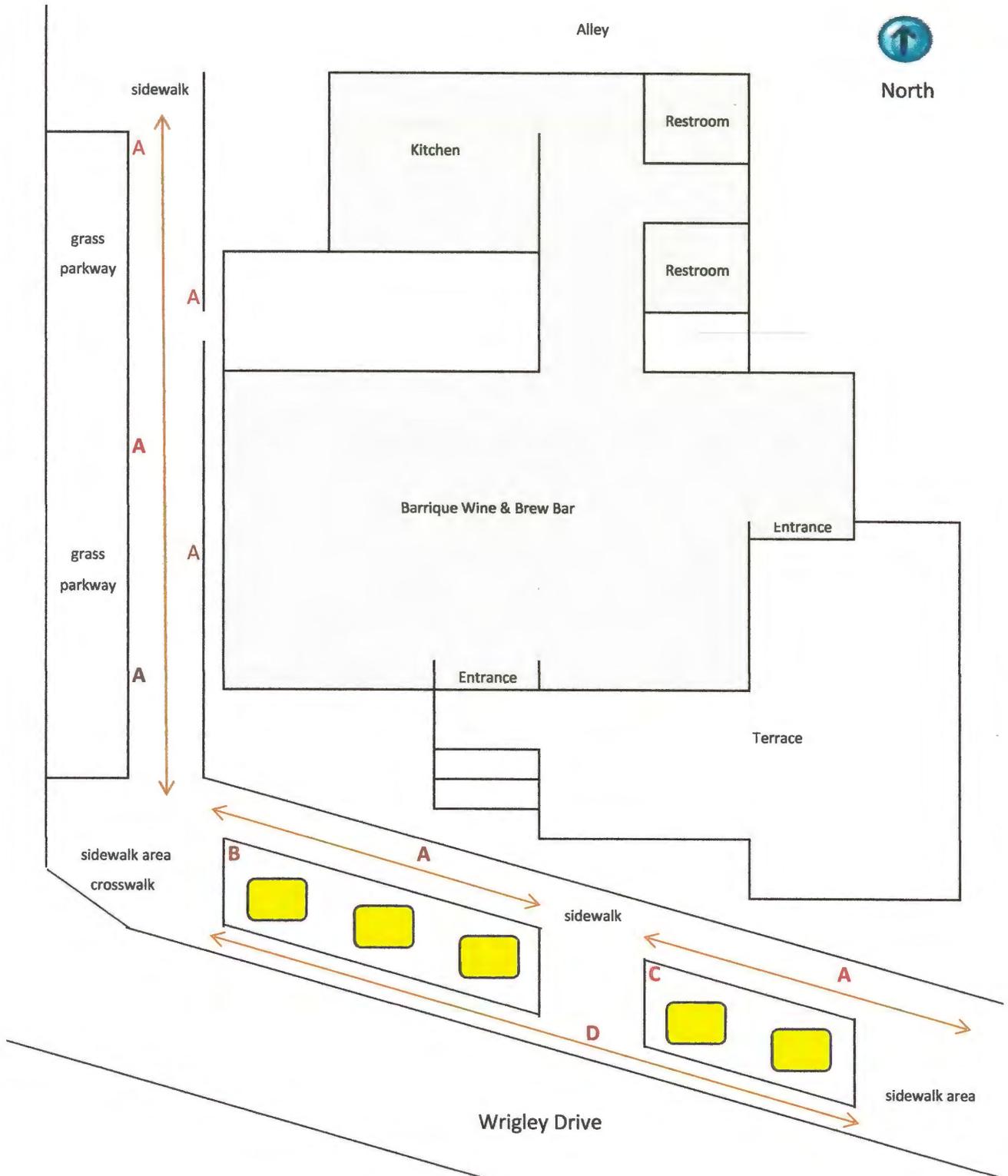
Establishment Name: BARRIQUE WINE & BREW BAR

Address: 835 WRIGLEY DR., LAKE GENEVA, WI 53147

Alcohol License No.: 20141 Phone: 262-248-1948

Describe area of premises extension:

SEASONAL SIDEWALK SEATING FOR FOOD & BEVERAGE. TOTAL 5 TABLES & 20 CHAIRS BETWEEN 5' SIDEWALK & ROADWAY. SEATING AREA WILL BE SEPARATED BY THEATER STYLE ROPES.



A = Existing 5' Wide Concrete Pedestrian Sidewalk

B = Proposed Concrete Finish Area (20.5 ft x 6.5 ft)

C = Proposed Concrete Finish Area (14 ft x 6.5 ft)

D = Existing 3' Wide Concrete Curb Buffer

■ 1-28" sq. table, 4 small chairs & 1 umbrella w/stand

Note: Proposed seating areas will be bordered on three sides with theater-style standards and chains/ropes.

2015-2016



CITY OF LAKE GENEVA

SIDEWALK CAFÉ PERMIT APPLICATION

PLEASE FILL IN ALL BLANKS COMPLETELY, AS INCOMPLETE APPLICATIONS WILL BE REJECTED.

Please Check:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Initial Sidewalk Café Permit with Alcohol | <input type="checkbox"/> Renewal of Sidewalk Café Permit with Alcohol |
| <input type="checkbox"/> Initial Sidewalk Café Permit without Alcohol | <input type="checkbox"/> Renewal of Sidewalk Café Permit without Alcohol |

Application Checklist:

- Certificate of Comprehensive General Liability Insurance naming the City as a party insured against liability resulting from the uses permitted herein. The coverage shall be in an amount not less than \$1,000,000.00.
- Scaled diagram which accurately depicts the dimensions of the existing sidewalk area and adjacent private property, the proposed location of the sidewalk café, size and number of tables, seats, bollards (and chains or ropes), planters, umbrellas, location of doorways, tree, signage, parking meters, obstructions (either existing or proposed, within the pedestrian way). Site plan must depict five (5) feet of unobstructed sidewalk for public use.
- Copy of restaurant license issued by the Wisconsin Department of Health and Human Services under Wis. Stat. 254.64.
- Application Fee of \$15.00 per seat: 20 seats x \$15.00 = \$ 300.00
(# OF SEATS) (TOTAL FEE)
- Alcohol License Premises Extension Application. If the applicant wishes to serve alcohol in the sidewalk café area, the applicant must currently hold a valid license to serve alcohol and submit an application requesting the premises description of the license be amended to include the sidewalk café area.

APPLICANT INFORMATION

Applicant Name: TOM TRILLA

Establishment Name: BARRIQUE WINE & BREW BAR

Address: 835 WRIGLEY DR.

Phone: 262-248-1948 E-mail: _____

Do food sales generate more than 50% of gross receipts? Yes No

Are you requesting to serve alcoholic beverages? Yes No

If so, please provide the following information:

Agent Name: NANCY TRILLA
 Agent Address: 424 WAYBUN DR., FONTANA, WI 53125
 Agent Phone: _____ Alt. # _____
 Agent E-mail: _____
 Signature of Agent: _____ Date: _____

INDEMNIFICATION STATEMENT

I, TOM TRILLA (FULL NAME) representing BARDIQUE WINE & PAEN BAR (ESTABLISHMENT) as its

OWNER (TITLE) agree to hold harmless and indemnify the City, its directors, officers, employees and agents, from and against any and all liabilities, losses, claims, demands, damages, fines, penalties, costs and expenses, including, but not limited to, reasonable attorney's fees and costs of litigation, and all causes of action of any kind or character resulting from my use of the public sidewalk as a café. I certify that I have read and understand the rules of Section 62-67 (6) Sidewalk Café permits.

[Signature] 5-22-15
 SIGNATURE OF APPLICANT DATE

For Office Use Only

Date Filed with Clerk: 5/27/15
 Total Amount: \$ 300.00 Receipt No.: C150527-23

Date Forwarded to Police Chief: _____
 Police Chief Signature: _____ Approved Denied

Date Forwarded to Director of Public Works: _____
 Director of Public Works Signature: _____ Approved Denied

Date of FLR/ Council Approval (for alcohol license amendment, if applicable): _____

Permit Issue Date: _____ Permit Number: _____

Copies Provided to: Police Chief Fire Chief
 DPW Director Zoning Administrator

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning July 1 2015 ;
ending June 30 2016

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100.00</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$ <u>500.00</u>
<input type="checkbox"/> Reserve Class B liquor	\$
Publication fee	\$ <u>25.00</u>
TOTAL FEE	\$ <u>625.00</u>

1. The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY
 CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (Individual/partners give last name, first, middle; corporations/limited liability companies give registered name): William Strangeway, Agent

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

	Title	Name	Home Address	Post Office & Zip Code
President/Member	<u>Pres</u>	<u>Carmel Weaver Jr</u>	<u>2444 Rolling Ridge Ln. Elgin IL 60124</u>	
Vice President/Member	<u>VP</u>	<u>Kevin Elbert</u>	<u>829 Hamerschmidt Lombard IL 60148</u>	
Secretary/Member	<u>Sec</u>	<u>George Walsh</u>	<u>225 Ashbury Park Ridge IL 60078</u>	
Treasurer/Member	<u>Treas</u>	<u>Kevin O'Connell</u>	<u>3123 W Windsor Dr Arlington Heights IL 60004</u>	
Agent		<u>William Strangeway</u>	<u>5407 W Princeton Pines Franklin WI 53132</u>	

3. Trade Name Harbor Shores on Lake Geneva Business Phone Number 262-248-9181
4. Address of Premises 300 Wrigley Dr Post Office & Zip Code Lake Geneva 53147

5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
8. (a) Corporate/limited liability company applicants only: Insert state WI and date 10/19/98 of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? Yes No
9. (c) Does the corporation, or any officer, director, stockholder or agent of limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? Yes No
- (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

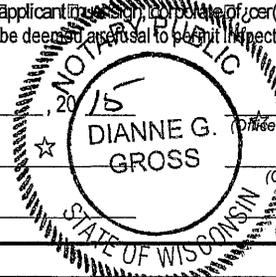
9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. (The applicant must include all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Restaurant, meeting room, hotel room, pool

10. Legal description (omit if street address is given above): _____
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
(b) If yes, under what name was license issued? Harbor Shores Hotel Kingst Inc
12. Does the applicant understand they must file a Special Occupational Tax return (ITB form 5630.5) before beginning business? [phone 1-800-937-8864] Yes No
13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [phone (608) 266-2776] Yes No
14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign.) (Officer(s), members/managers of limited liability companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME

this 23 day of May
Deanne H Gross
(Clerk/Notary Public)



William E Strangeway
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

My commission expires 3-15-2019
Milwaukee WI

(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK			
Date received and filed with municipal clerk <u>5/22/15</u>	Date reported to council/board	Date provisional license issued	Signature of Clerk/Deputy Clerk
Date license granted	Date license issued	License number issued	

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

To the governing body of: Village of Lake Geneva County of Walworth

City

The undersigned duly authorized officer(s)/members/managers of Harbor Shores Hotel Mgmt Co
(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 Harbor Shores & Ginos East
(trade name)

located at 300 Wrigley Dr

appoints William Strangeway
(name of appointed agent)
5407 W Princeton Pines, Franklin WI 53132
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No - Completed

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 12/12

Place of residence last year Wisconsin

For: Harbor Shores Hotel Mgmt Co
(name of corporation/organization/limited liability company)

By: Samuel Strangeway, Pres
(signature of Officer/Member/Manager)

And: Connie Conantson, J.M.
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, William Strangeway, hereby accept this appointment as agent for the
(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.

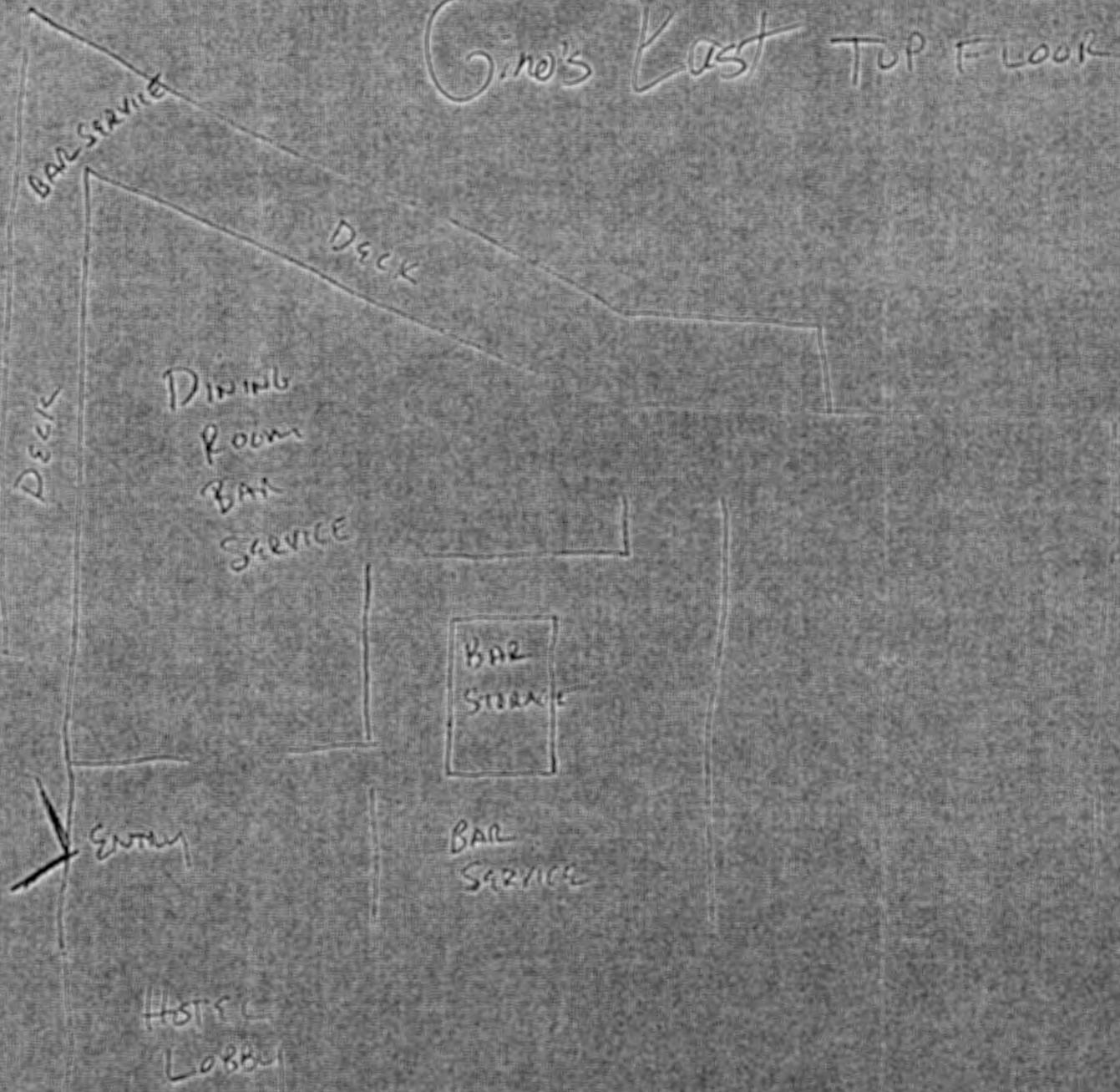
X William Strangeway Agent's age _____
(signature of agent) (date)
5407 W. Princeton Pines Franklin WI 53132 Date of birth _____
(home address of agent)

APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)

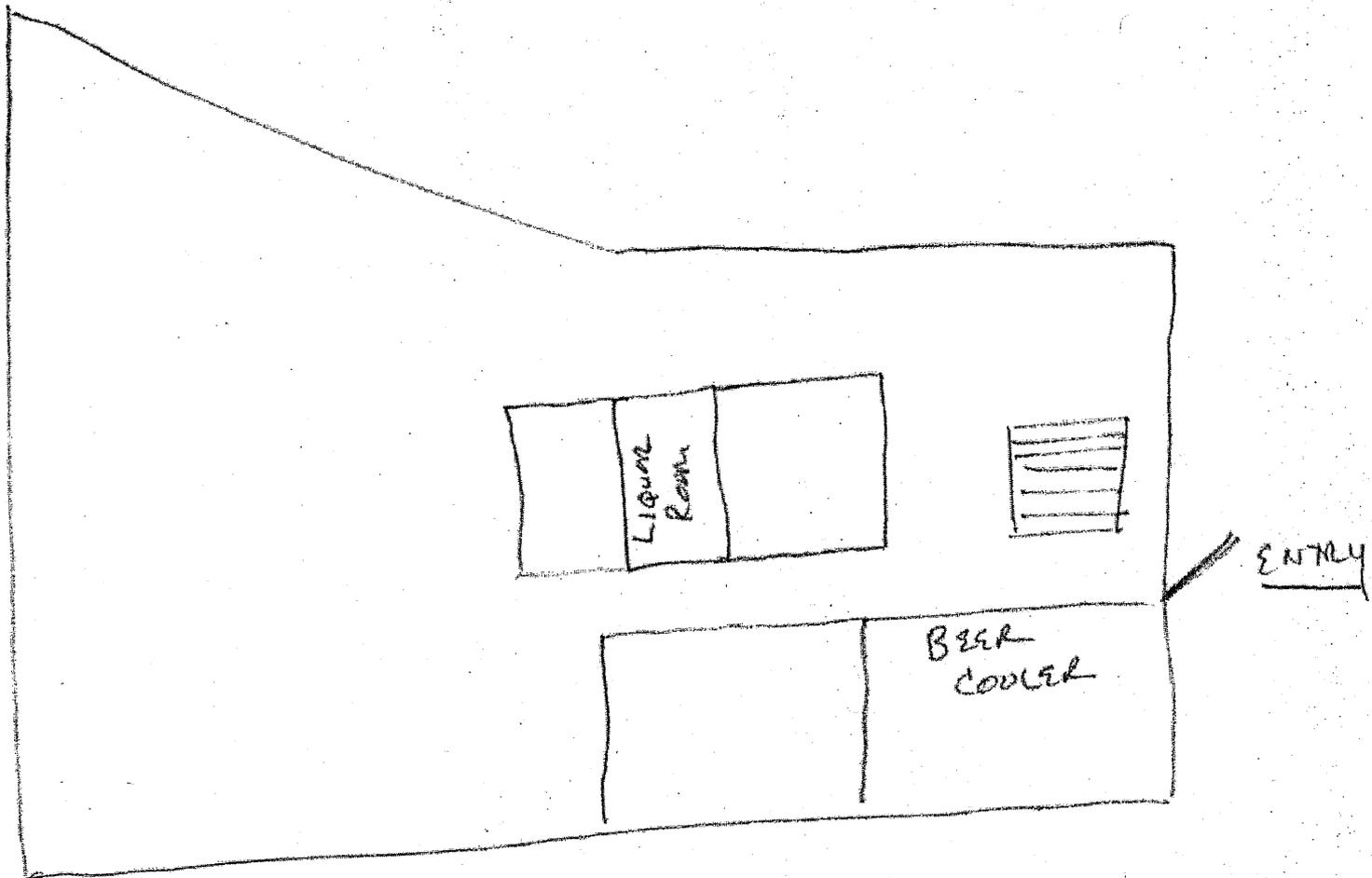
I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on 5-2-15 by _____ Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

Gino's East TOP FLOOR



Bottom Floor

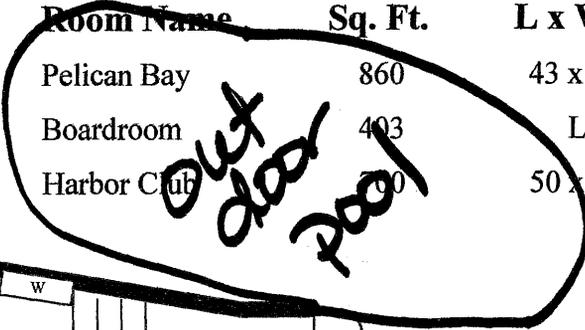




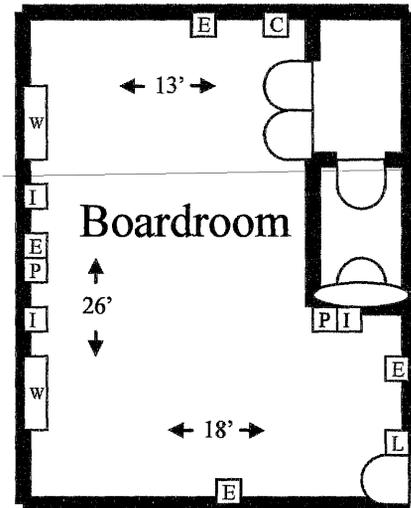
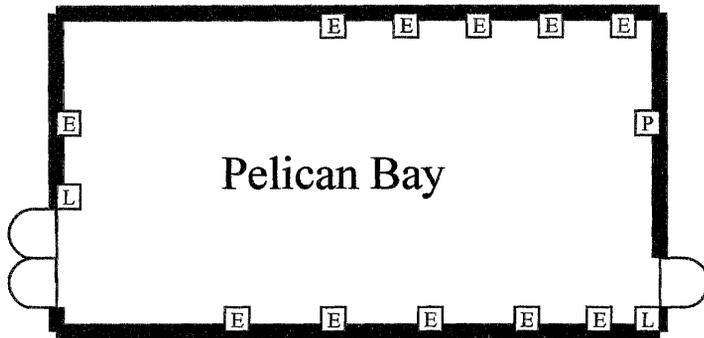
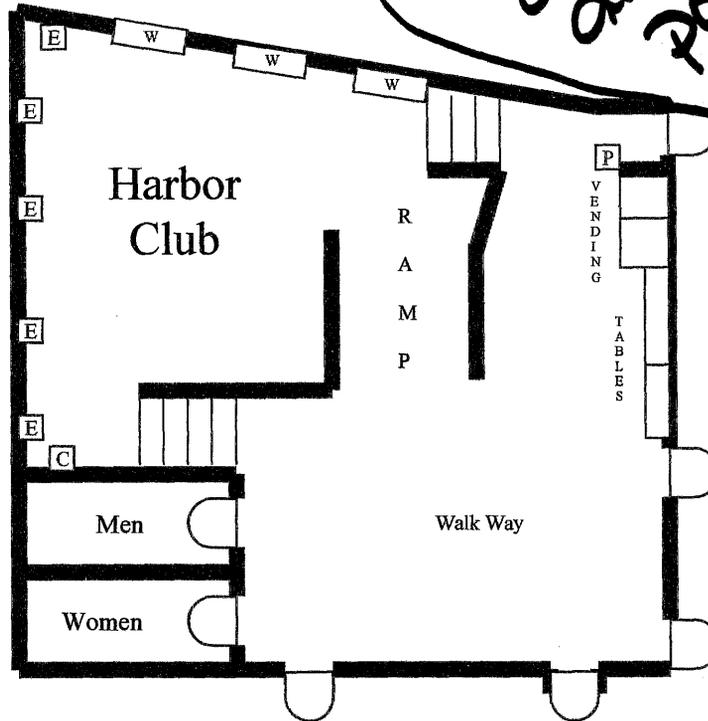
Meeting Rooms

Dimensions
L x W x H

Room Name	Sq. Ft.	Dimensions
Pelican Bay	860	43 x 20 x 9
Boardroom	403	L-Shape
Harbor Club	700	50 x 14 x 9



- E – Electrical Outlet
- I – Internet
- L – Light Switch
- M – Microphone
- P – Phone Jack
- W – Window
- C – Cable Hookup



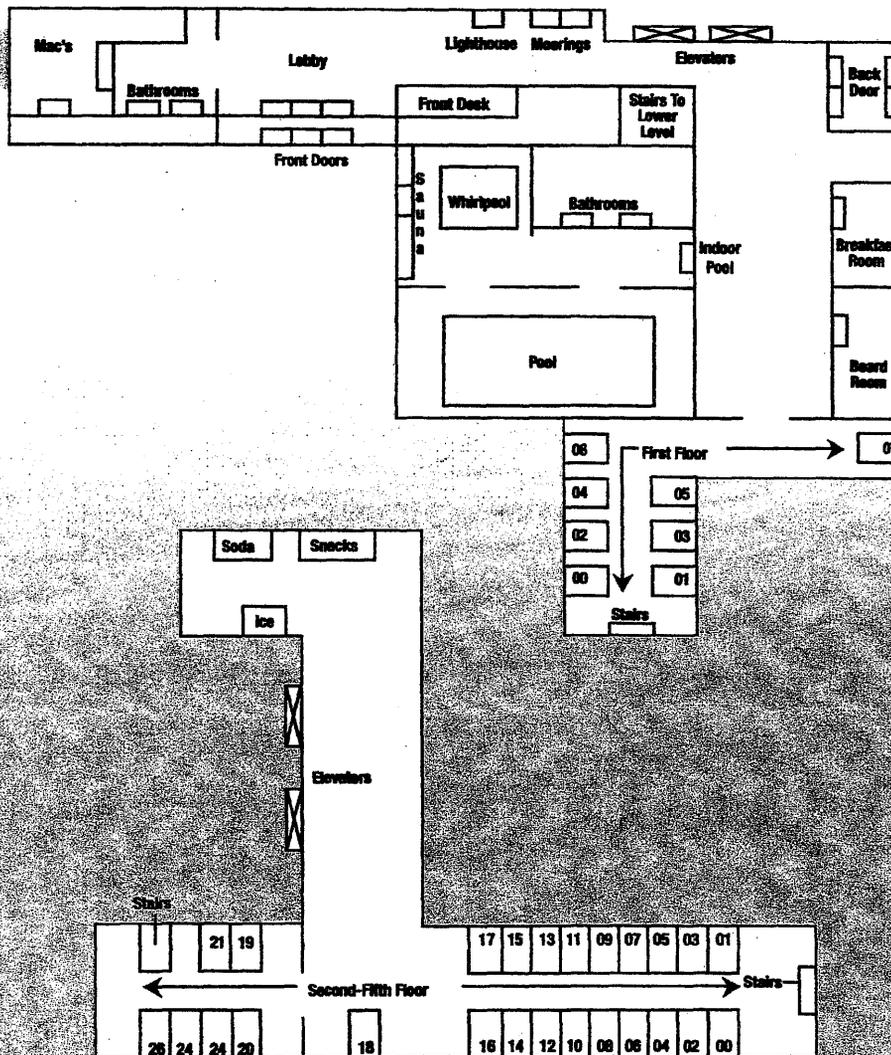
Meeting Room Capacities	Classroom	Theatre	Banquet	Conference	Cost
Pelican Bay	40ppl	50ppl	48ppl	40ppl	\$350.00
Boardroom	20ppl	20ppl	20ppl	20ppl	\$150.00
Harbor Club	20ppl	40ppl	40ppl	20ppl	\$250.00

TV Channels

02.....	WBBM-CBS	30.....	ESPN	57.....	CARTOON NETWORK
03.....	TBS	31.....	FSN	58.....	DISNEY
04.....	WTMJ-NBC	32.....	TWS	59.....	AMC
05.....	WMAQ-NBC	33.....	TNT	60.....	TCM
06.....	WITI-FOX	34.....	USA	61.....	TV LAND
07.....	WLS-ABC	35.....	FX	62.....	HALLMARK
08.....	WDJT-CBS	36.....	LIFETIME NETWORK	63.....	JWLTV
09.....	WGN	37.....	HOME & GARDEN	64.....	THE WEATHER CHANNEL
10.....	WMVS-PBS	38.....	TRAVEL CHANNEL	65.....	LMN
11.....	WTTW-PBS	39.....	HISTORY CHANNEL	66.....	DISCOVERY HEALTH
12.....	WISN-ABC	40.....	TLC	67.....	FOOD NETWORK
13.....	WFLD-FOX	41.....	DISCOVERY CHANNEL	68.....	VERSUS
15.....	WPXE-PAX	42.....	A&E	69.....	NGC
16.....	WMVT-PBS	43.....	ANIMAL PLANET	70.....	BRAVO
17.....	ABC FAMILY	44.....	CNN	71.....	STYLE
18.....	WVTV	45.....	CNN HEADLINE NEWS	72.....	EI
19.....	WJJA-IND	46.....	MSNBC	73.....	OXYGEN
20.....	EDUCATIONAL ACCESS	47.....	CNBC	74.....	WE
21.....	UNIVISION	48.....	FOX NEWS	75.....	HSN
22.....	CHRISTIAN	49.....	COURT TV	77.....	BRAVO
23.....	WVCY	50.....	VH-1	78.....	C-SPAN
24.....	WCGV-UPN	51.....	SPIKE TV	95.....	LEASED
25.....	LOCAL GOVERNMENT ACCESS	52.....	MTV	96.....	LOCAL ACCESS
26.....	QVC	53.....	GAC	99.....	TV GUIDE
27.....	TELEMUNDO	54.....	COMEDY CENTRAL		
28.....	GOLF	55.....	SCI-FI		
29.....	ESPN2	56.....	NICKELODEON		

*Channels are subject to change.
See channel 99 for an up-to-date guide.

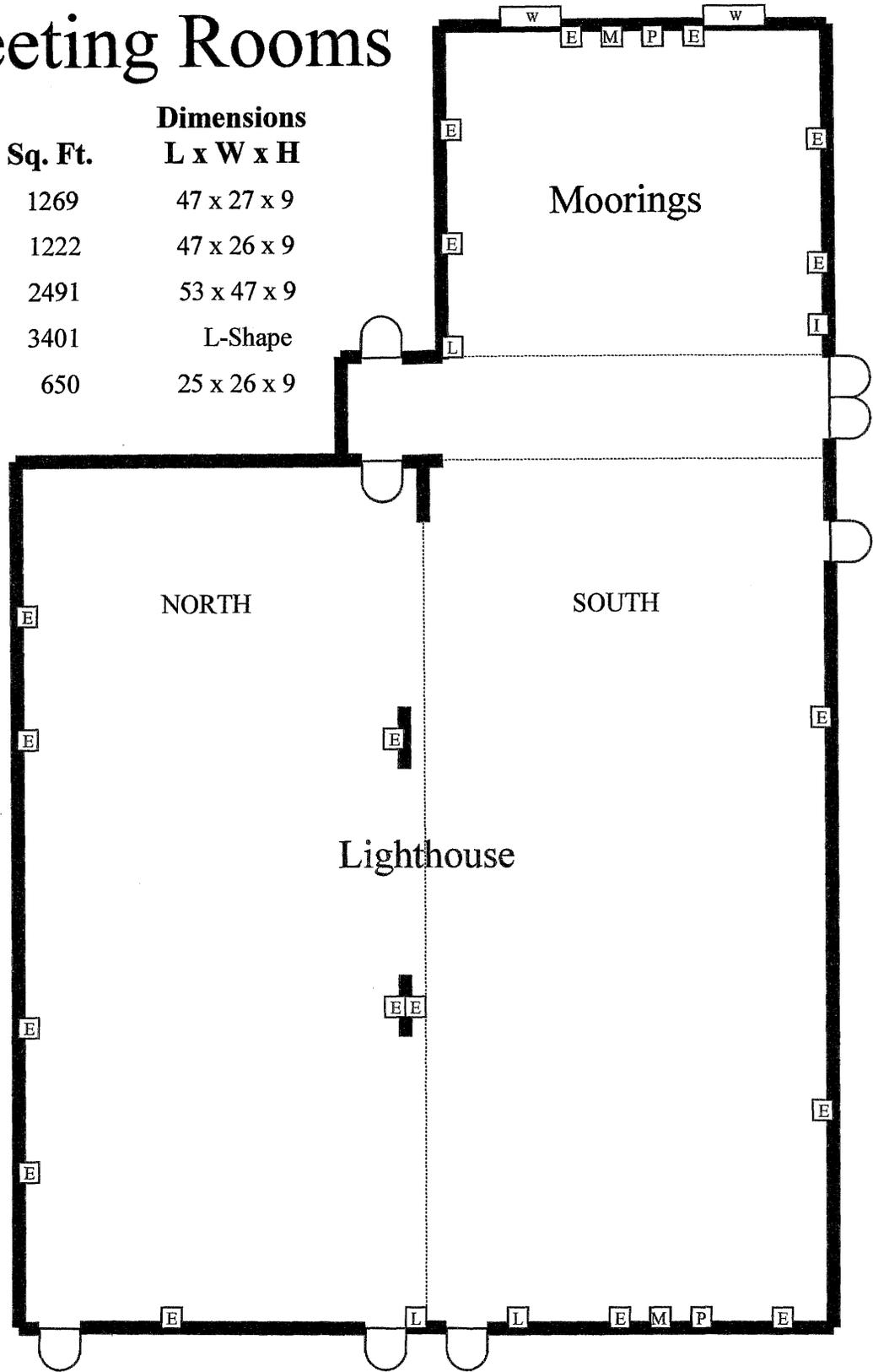
Property Layout





Meeting Rooms

Room Name	Sq. Ft.	Dimensions L x W x H
Lighthouse North	1269	47 x 27 x 9
Lighthouse South	1222	47 x 26 x 9
Lighthouse N & S	2491	53 x 47 x 9
Lighthouse Ballroom	3401	L-Shape
Moorings	650	25 x 26 x 9



- E – Electrical Outlet
- I – Internet
- L – Light Switch
- M – Microphone
- P – Phone Jack
- W – Window

Meeting Room Capacities	Classroom	Theatre	Banquet	Conference	Cost
Lighthouse North or South	65ppl	125ppl	80ppl	65ppl	\$500.00
Lighthouse North & South	150ppl	200ppl	150ppl	150ppl	\$750.00
Lighthouse Ballroom	150ppl	250ppl	200ppl	150ppl	\$1000.00
Moorings	32ppl	50ppl	25ppl	32ppl	\$200.00

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's Wis. Seller's Permit No. / FEIN Number

LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$ 500
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company GLENEAGLES LLC.
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>ALASTAIR MUNRO CUMMING</u>	<u>W3423 MCDONALD RD, LAKE GENEVA</u>	<u>53147</u>
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>ALASTAIR M. CUMMING</u>	_____	_____
Directors/Managers	<u>SOPRA</u>	_____	_____

C.1. Trade Name SOPRA Business Phone Number 262 249 0800
 2. Address of Premises 724 MAIN ST. LAKE GENEVA Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Sidewalk cafe, basement cellar & Restaurant

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** Yes No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this licensee? **If yes, explain fully on reverse side** Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted; will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 12 day of May, 20 15
Sabrina Wosno
(Clerk/Notary Public)

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/12/15</u>	Date reported to council/board <u>6/8/15</u>	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of GLENEAGLES LLC
(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 SOPRA

located at 724 MAIN ST. LAKE GENEVA, WI, 53147
(trade name)

appoints ALASTAIR M. CUMMING
(name of appointed agent)

W3423 McDONALD RD, LAKE GENEVA, WI, 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No 8 YEARS

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 8 YEARS

Place of residence last year LAKE GENEVA, WI.

For: GLENEAGLES, LLC
(name of corporation/organization/limited liability company)

By: [Signature] Member
(signature of Officer/Member/Manager)

And: [Signature] MEMBER.
(signature of Officer/Member/Manager)

ALASTAIR M. CUMMING **ACCEPTANCE BY AGENT**
(print/type agent's name), hereby accept this appointment as agent for the

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.

[Signature] 5/12/15 Agent's age _____
(signature of agent) (date)
W3423 McDONALD A, LAKE GENEVA, WI, 53147 Date of birth _____
(home address of agent)

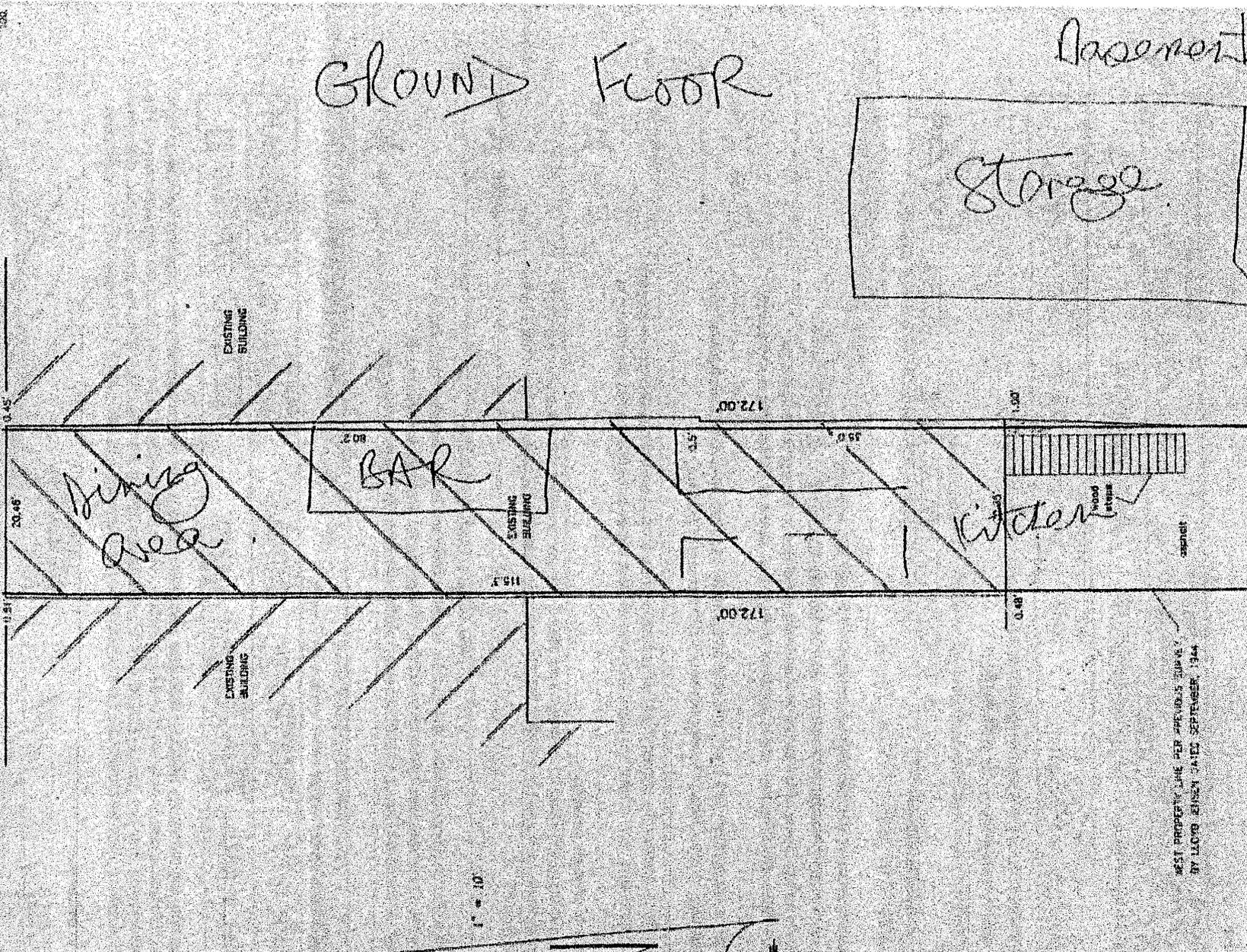
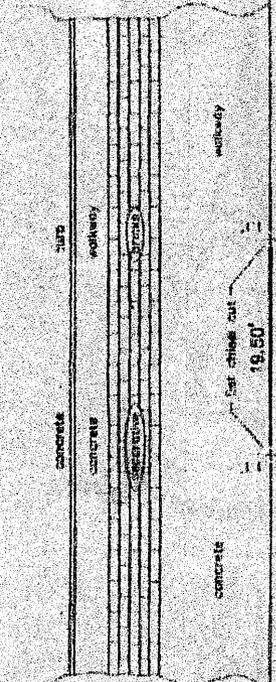
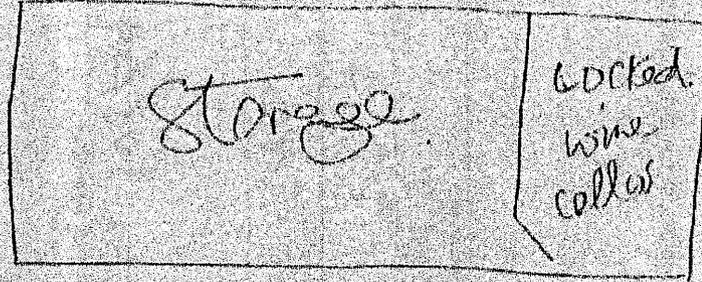
APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

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 5-18-15 by [Signature] Title Chief of Police
(date) (signature of proper local official) (town chair, village president, police chief)

GROUND FLOOR

Basement

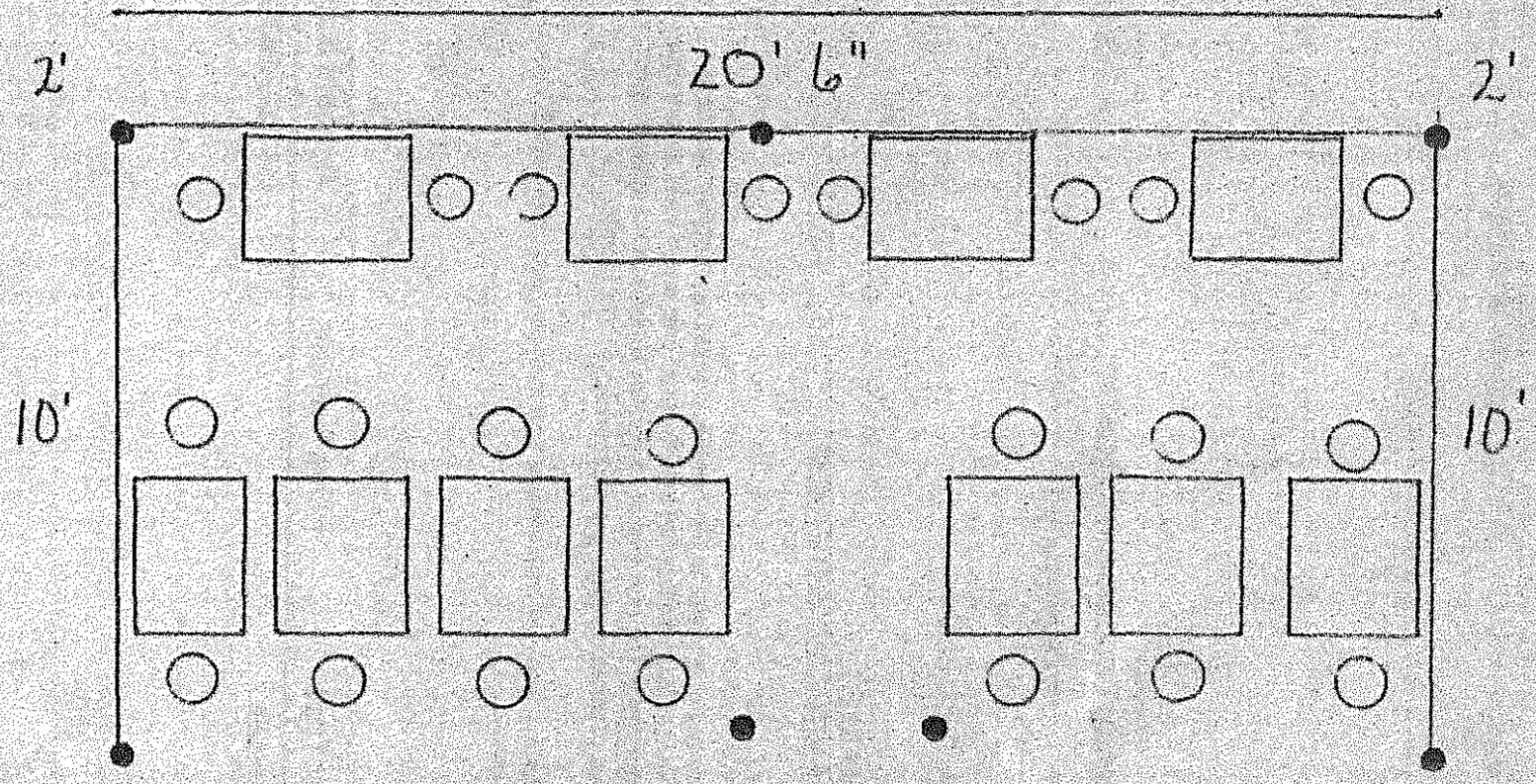


SOPM



WEST PROPERTY LINE PER PERMITS SUP 06.7
BY LLOYD BENZEL DATED SEPTEMBER 13/04

DBA SOPRA
724 Main St.
Lake Geneva.



6' 3" Sidewalk

6' 3" Sidewalk

Sofa

└ DOOR

┌ FRONT OF SOPRA RESTAURANT

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company L&B Main Street Inc.
 Address of Corporation/Limited Liability Company (if different from licensed premises) 747 W. Main St. Lake Geneva WI 53147

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member		<u>1107 West St.</u>	<u>Lake Geneva WI 53147</u>
Vice President/Member	<u>Gregory Bush</u>		
Secretary/Member	<u>Charles Arth</u>	<u>P.O. Box 1</u>	<u>SILVER LAKE WI</u>
Treasurer/Member			
Agent	<u>Gregory Bush</u>		
Directors/Managers	<u>Greg Bush</u> <u>Chuck LOTH</u>		

C. 1. Trade Name Champs Sports Bar & Grill Business Phone Number 262/248-6008
 2. Address of Premises 747 W. MAIN ST. Post Office & Zip Code LAKE GENEVA WI 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Restaurant, Bar Area, Storage & Outdoor Seated Garden.
5. Legal description (omit if street address is given above): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 12th day of May, 20 15
Stephanie Gunderson
(Clerk/Notary Public)
 My commission expires 4/13/18

Gregory Bush
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

Gregory Bush
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

Gregory Bush
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

NOTARY PUBLIC
 STATE OF WISCONSIN

TO BE COMPLETED BY CLERK	
Date received and filed with municipal clerk <u>5/12/15</u>	Date license granted
Date reported to council/board <u>6/8/15</u>	Signature of Clerk / Deputy Clerk
License number issued	Date license issued

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of L & B Main St - Champs Sports Bar
(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

Champs Sports Bar & Grill
(trade name)

located at 747 Main St Lake Geneva WI 53147

appoints GREGORY BUSH
(name of appointed agent)

(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin?

Place of residence last year 110-1 West St, Lake Geneva WI 53147

For: L & B Main St / Champs Sports Bar & Grill
(name of corporation/organization/limited liability company)

By: JOE T. Treasurer
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, GREGORY BUSH, hereby accept this appointment as agent for the
(print/type agent's name)

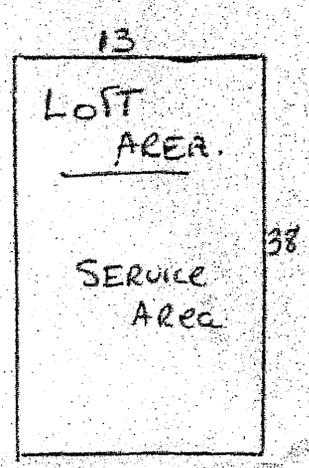
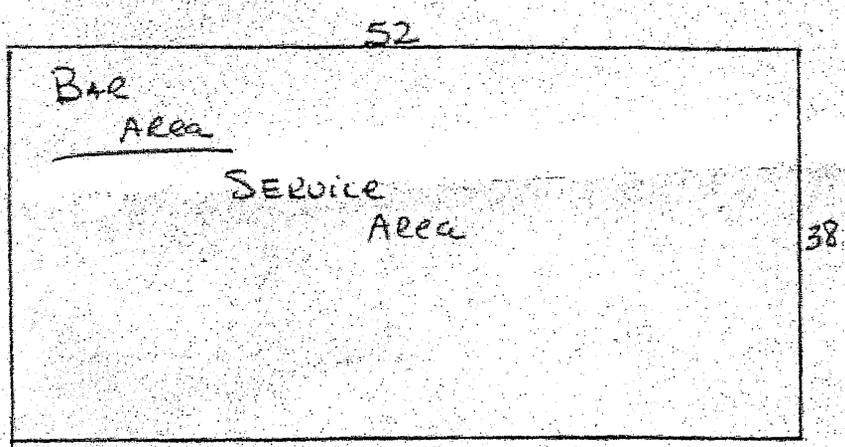
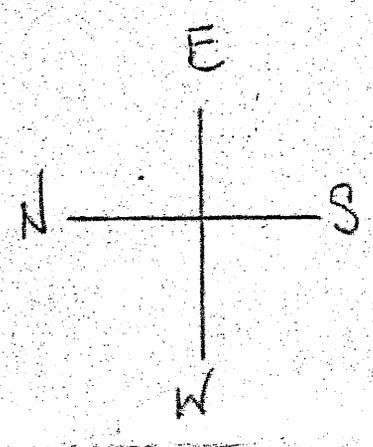
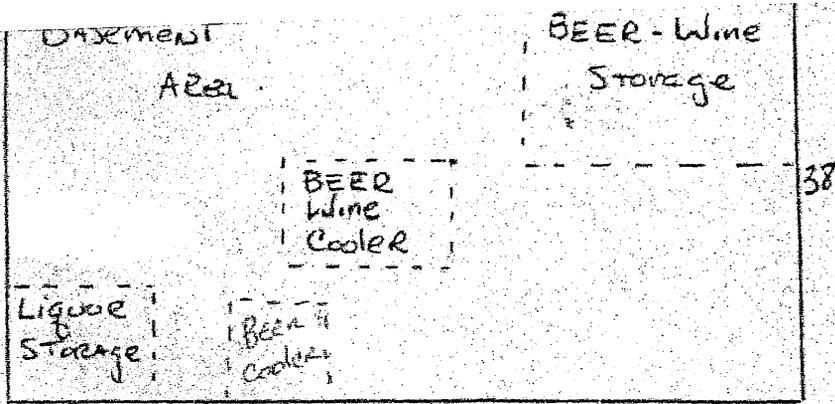
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

Greg Bush Agent's age _____
(signature of agent) (date)
110-1 West St, Lake Geneva WI 53147 Date of birth _____
(home address of agent)

**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
 (Clerk cannot sign on behalf of Municipal Official)**

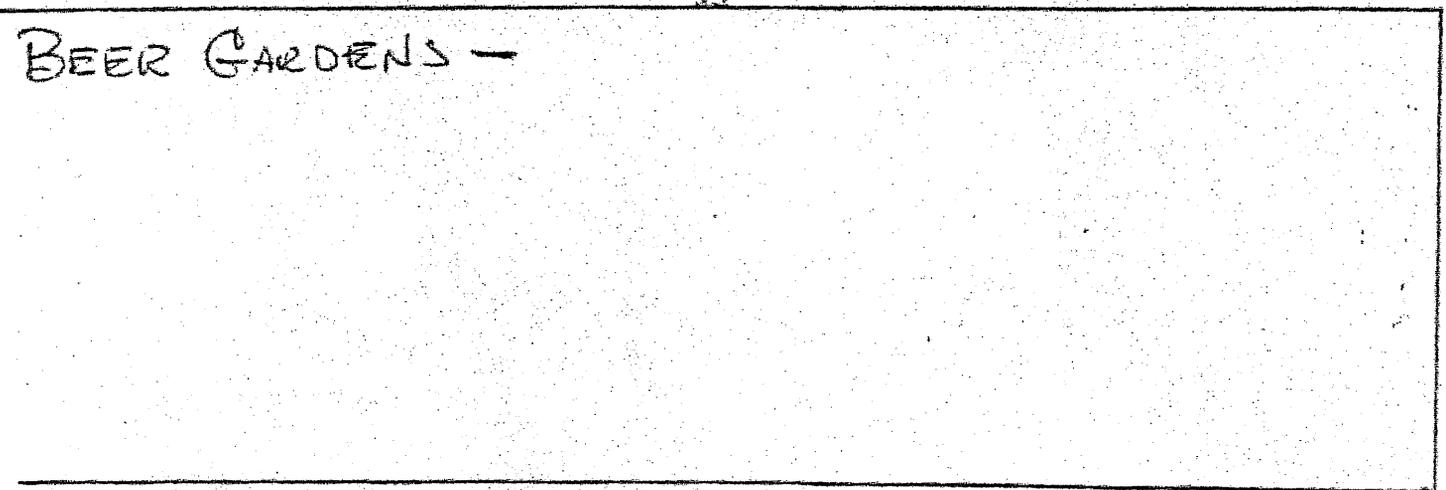
I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on 5-18-15 by _____ Title Chief of Police
(date) (signature of proper local official) (town chair, village president, police chief)

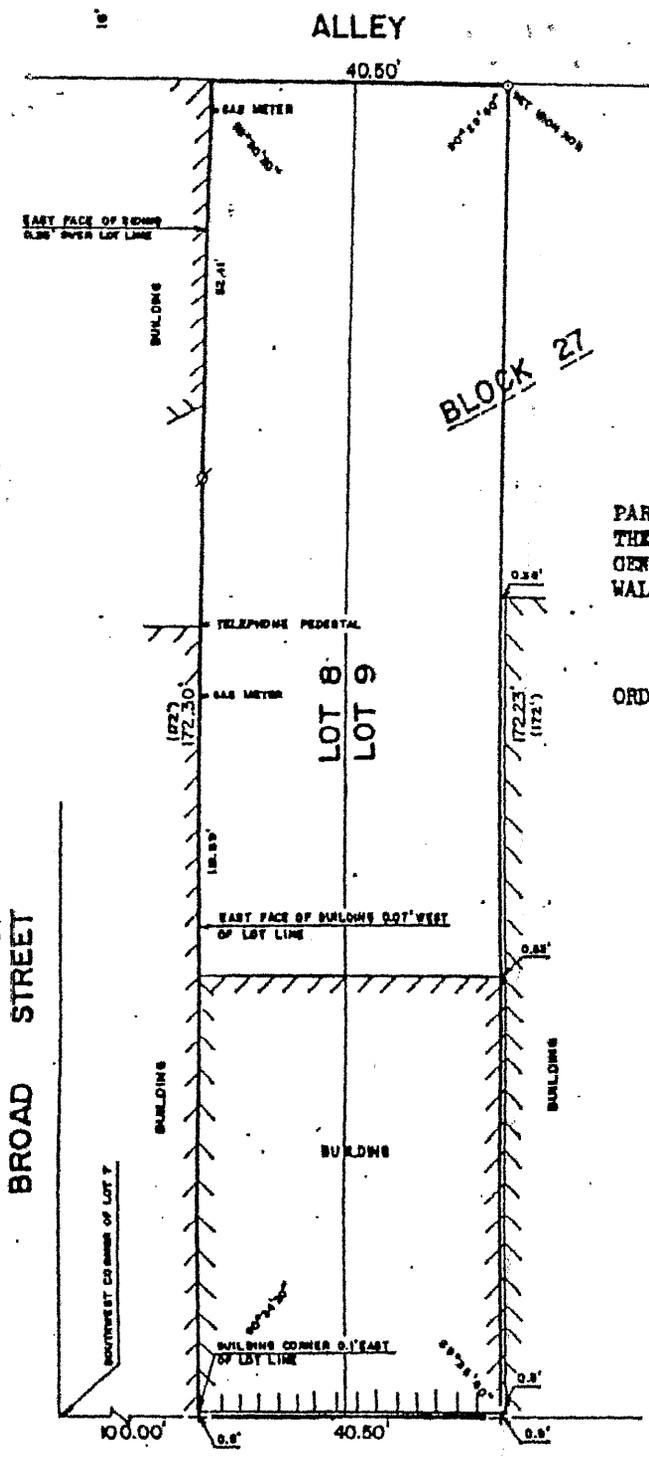


Champs Spts Bar
 747 MAIN ST.
 LAKE GEORGE Ws
 53147

115



This chart is NOT drawn to scale. Shows the area where Alcoholic Beverages are stored sold or consumed.



BLOCK 27

PLAT OF SURVEY OF
 PART OF LOTS 8 AND 9, BLOCK 27 OF
 THE ORIGINAL PLAT OF THE VILLAGE OF
 GENEVA (NOW CITY OF LAKE GENEVA),
 WALWORTH COUNTY, WISCONSIN.

ORDERED BY: CHARLES LOTH
 747 WEST MAIN STREET
 LAKE GENEVA, WISCONSIN

BROAD STREET

MAIN STREET



SCALE: 1"=20'

- o - IRON ROD FOUND
- + - CUT CROSS IN CONCRETE
- () - RECORDED AS

I, ROBERT M. BAERENWALD, DO HEREBY CERTIFY THAT I
 HAVE SURVEYED THE PROPERTY HEREON DESCRIBED ACCORDING
 TO THE OFFICIAL RECORDS AND THAT THE PLAT HEREON IS A
 CORRECT REPRESENTATION OF THE PROPERTY LINES TO THE
 BEST OF MY KNOWLEDGE AND BELIEF.

Robert M. Baerenwald
 ROBERT M. BAERENWALD
 WISCONSIN REGISTERED LAND SURVEYOR, S-1508

March 16, 1987
 DATE: _____ JOB NO. 0956

NOTE: THIS IS NOT A CERTIFIED COPY UNLESS SEALED.

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)	Home Address	Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company JACKSON WINE LLC

Address of Corporation/Limited Liability Company (if different from licensed premises)

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>KATHLEEN A. JACKSON</u>	<u>401 SHERIDAN SPRINGS RD</u>	<u> </u>
Vice President/Member	<u>DOUGLAS A JACKSON</u>	<u> </u>	<u>LAKE GENEVA WI 53147</u>
Secretary/Member			
Treasurer/Member			
Agent	<u>KATHLEEN A JACKSON</u>		
Directors/Managers			

C. 1. Trade Name STUDIO WINERY Business Phone Number 262 348 9100

2. Address of Premises 401 SHERIDAN SPRINGS RD. Post Office & Zip Code LAKE GENEVA 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) ENTIRE LOWER FIRST FLOOR + PATIO

5. Legal description (omit if street address is given above):

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** Yes No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on reverse side** Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 11 day of May, 2015

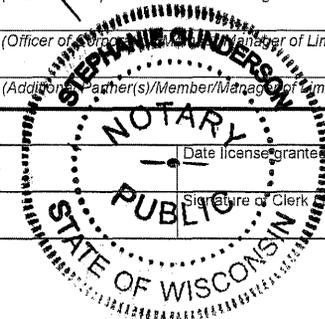
Stephanie Gunderson
(Clerk/Notary Public)

My commission expires 4/3/18

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

[Signature]
(Additional Officer(s)/Member/Manager of Limited Liability Company if Any)



TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/14/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of JACKSON WINE LLC
(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 STUDIO WINERY

located at 401 Sheridan Springs Road Lake Geneva (trade name)

appoints KATHLEEN A. JACKSON (name of appointed agent)
401 Sheridan Springs Rd. Lake Geneva (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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 52 yr

Place of residence last year Same as above

For: Jackson Wine LLC (name of corporation/organization/limited liability company)

By: [Signature] (signature of Officer/Member/Manager)

And: [Signature] (signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, KATHLEEN A. JACKSON (print/type agent's name), hereby accept this appointment as agent for the

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.

[Signature] 5.8.15 Agent's age _____
(signature of agent) (date)
401 Sheridan Springs Rd Lk Geneva Date of birth _____
(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 5.25.15 by [Signature] Title [Signature]
(date) (signature of proper local official) (town chair, village president, police chief)

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code
▶Oakfire, LLC 831 Wrigley Drive, Lake Geneva, WI 53147

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶Oakfire, LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title Name (Inc. Middle Name) Home Address Post Office & Zip Code
 President/Member David R. Scotney 1551 Orchard Lane, Lake Geneva, WI 53147

Vice President/Member _____

Secretary/Member _____

Treasurer/Member _____

Agent ▶ David R. Scotney, 1551 Orchard Lane, Lake Geneva, WI 53147

Directors/Managers _____

C.1. Trade Name ▶Oakfire Pizzeria and Restaurant Business Phone Number 262-248-1111

2. Address of Premises ▶831 Wrigley Drive, Lake Geneva Post Office & Zip Code ▶53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) served in bar and dining area and*

5. Legal description (omit if street address is given above): *stored in kitchen and basement area

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** Yes No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on reverse side** Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** new address for David A. Scotney Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

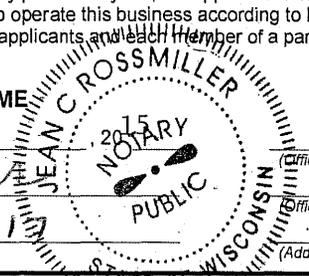
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 18th day of May

Jean Crossmiller
(Clerk/Notary Public)

My commission expires 12/11/2019



[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

[Signature]
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/7/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$ <u>500</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

To the governing body of: Village of Lake Geneva County of Walworth

City

The undersigned duly authorized officer(s)/members/managers of Oakfire, LLC
(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 Oakfire Pizzeria and Restaurant
(trade name)

located at 831 Wrigley Drive, Lake Geneva, WI 53147

appoints David R. Scotney
(name of appointed agent)

1551 Orchard Lane, Lake Geneva, WI 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 9 months

Place of residence last year 7423 N. Ozark, Chicago, IL 60631 and 1335 Edgewood Dr.*

For: Oakfire, LLC *Lake Geneva, WI 53147
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, David R. Scotney, hereby accept this appointment as agent for the
(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.

[Signature] May 18, 2015 Agent's age _____
(signature of agent) (date)

1551 Orchard Lane, Lake Geneva, WI 53147 Date of birth _____
(home address of agent)

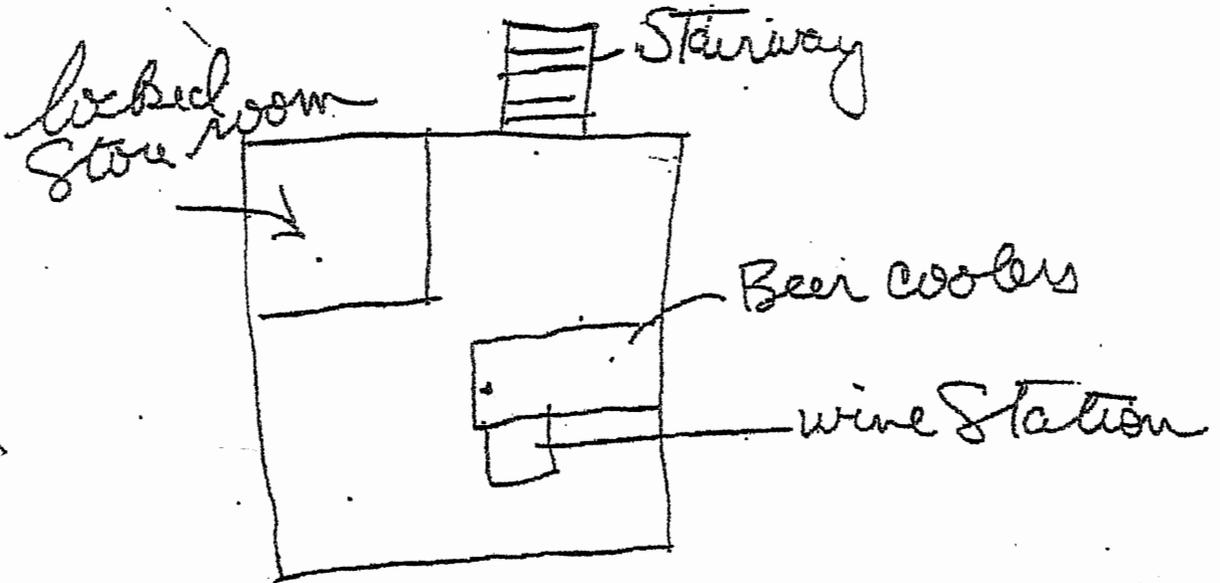
**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

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.

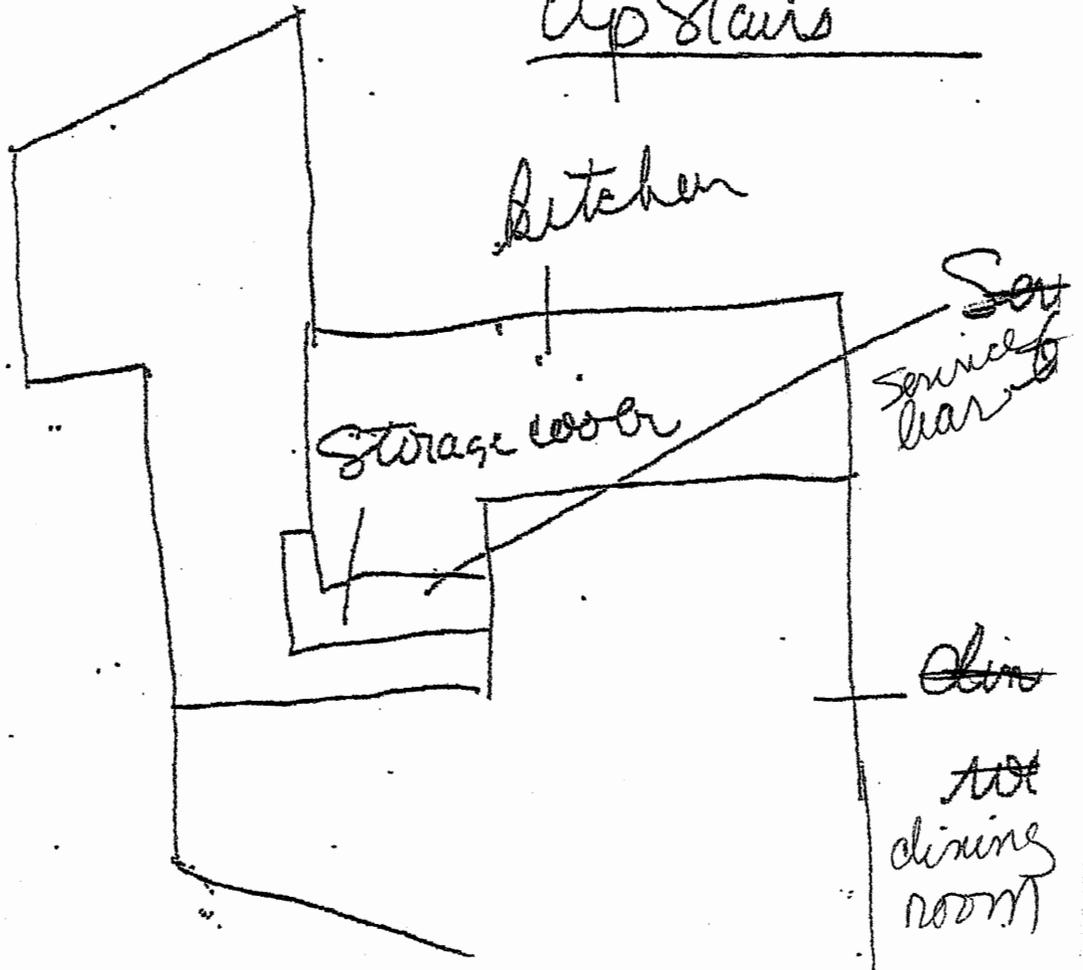
Approved on 5-25-15 by _____ Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

April 2014

Basement



Upstairs



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company DCR Restaurant Group, LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) 411 Interchange N. LG, 53147
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Chad R Bittner</u>	<u>2116 Heather Dr</u>	<u>Lake Geneva, WI 53147</u>
Vice President/Member	<u>Rick R Bittner</u>	<u>259 Sky Lane</u>	<u>Lake Geneva WI 53147</u>
Secretary/Member			
Treasurer/Member			
Agent	<u>Chad Bittner</u>	<u>2116 Heather Dr</u>	<u>Lake Geneva, WI 53147</u>
Directors/Managers			

C. 1. Trade Name Next Door Pub & Pizzeria Business Phone Number 262.248.9551
 2. Address of Premises 411 Interchange N Post Office & Zip Code Lake Geneva, 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Restaurant, Bar, Storage Area
5. Legal description (omit if street address is given above): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 6th day of May, 2015
Shawn K. Koch
(Clerk/Notary Public)
 My commission expires 1-17-17

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
(Additional Partner(s)/Member/Manager of Limited Liability Company if any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk	Date reported to council/board	Date license granted
<u>5/6/15</u>		
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town
 Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of DCR Restaurant Group LLC
(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 Next Door Pub & Pizzeria
(trade name)

located at 411 Interchange, Lake Geneva, WI 53147

appoints Chad Bittner
(name of appointed agent)
2116 Heather Dr., Lake Geneva, WI 53147
(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?

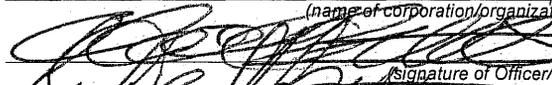
Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 15 years

Place of residence last year Lake Geneva, WI

For: DCR Restaurant Group LLC
(name of corporation/organization/limited liability company)

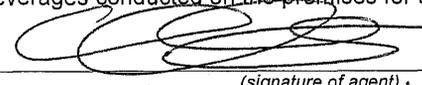
By: 
(signature of Officer/Member/Manager)

And: 
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Chad Bittner, hereby accept this appointment as agent for the
(print/type agent's name)

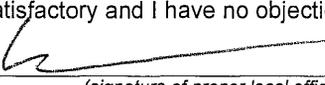
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

 5/6/15
(signature of agent) (date) Agent's age

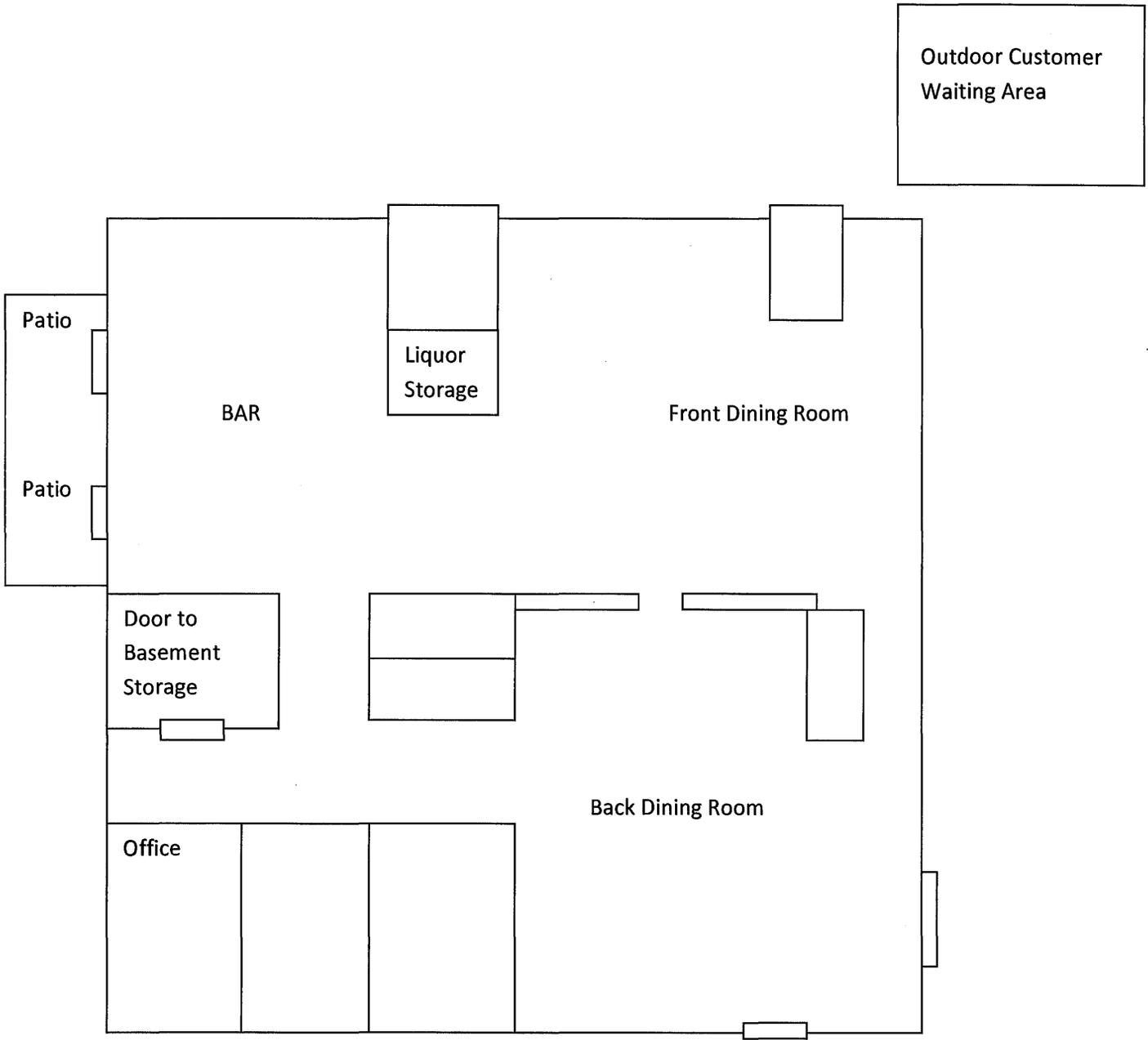
2116 Heather Dr., LG, WI 53147
(home address of agent) Date of birth

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 5-25-15 by  Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

The Next Door Pub & Pizzeria, 411 Interchange N, Lake Geneva, WI 53147



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Gregory Anagnos Home Address N1567 Clover Rd. Post Office & Zip Code Lake Geneva 53147

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company

Medusa Grill & Bistro LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) 501 Broad St.

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Gregory Anagnos</u>	<u>N1567 Clover Rd.</u>	<u>Lake Geneva 53147</u>
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Gregory Anagnos</u>		
Directors/Managers			

C. 1. Trade Name Medusa Grill & Bistro Business Phone Number 262-299-8644
 2. Address of Premises 501 Broad St. Post Office & Zip Code Lake Geneva 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Restaurant - 2 din. rms & full basement
5. Legal description (omit if street address is given above): RESTAURANT
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted** of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 6th day of May
[Signature]
(Clerk/Notary Public)
 My commission expires 4/17/2016

[Signature]
 ROBERT A LIMOSANI
 Notary Public
 State of Wisconsin
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5/7/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of Medusa Grill & Bistro LLC
(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 Medusa Grill & Bistro LLC
(trade name)

located at 501 Broad Street

appoints Gregory Anagnos
(name of appointed agent)

N 1567 Clover Rd Lake Geneva, WI 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).
Current Agent for Medusa Grill & Bistro LLC Only

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 53415

Place of residence last year N 1567 Clover Rd. Lake Geneva, WI 53147

For: Medusa Grill & Bistro LLC
(name of corporation/organization/limited liability company)

X By: [Signature]
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Gregory Anagnos, hereby accept this appointment as agent for the
(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.

X [Signature] 5-8-15 Agent's name _____
(signature of agent) (date)

N 1567 Clover Rd Lake Geneva, WI 53147 Date of birth _____
(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 5-25-15 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

W ← → E
S ← → N

→ ← = left to sale

16.5'

20.5'

5.0'

Built in Counter w/ Underneath storage

Counter

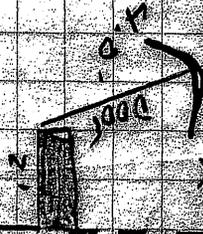
21.5'

Counter for seating

W

W

Windows 13.5'



7.5'

Bench

14.5'

Bench

4.5'

counter

7'

Window

9.5'

Bathrooms 8.5'

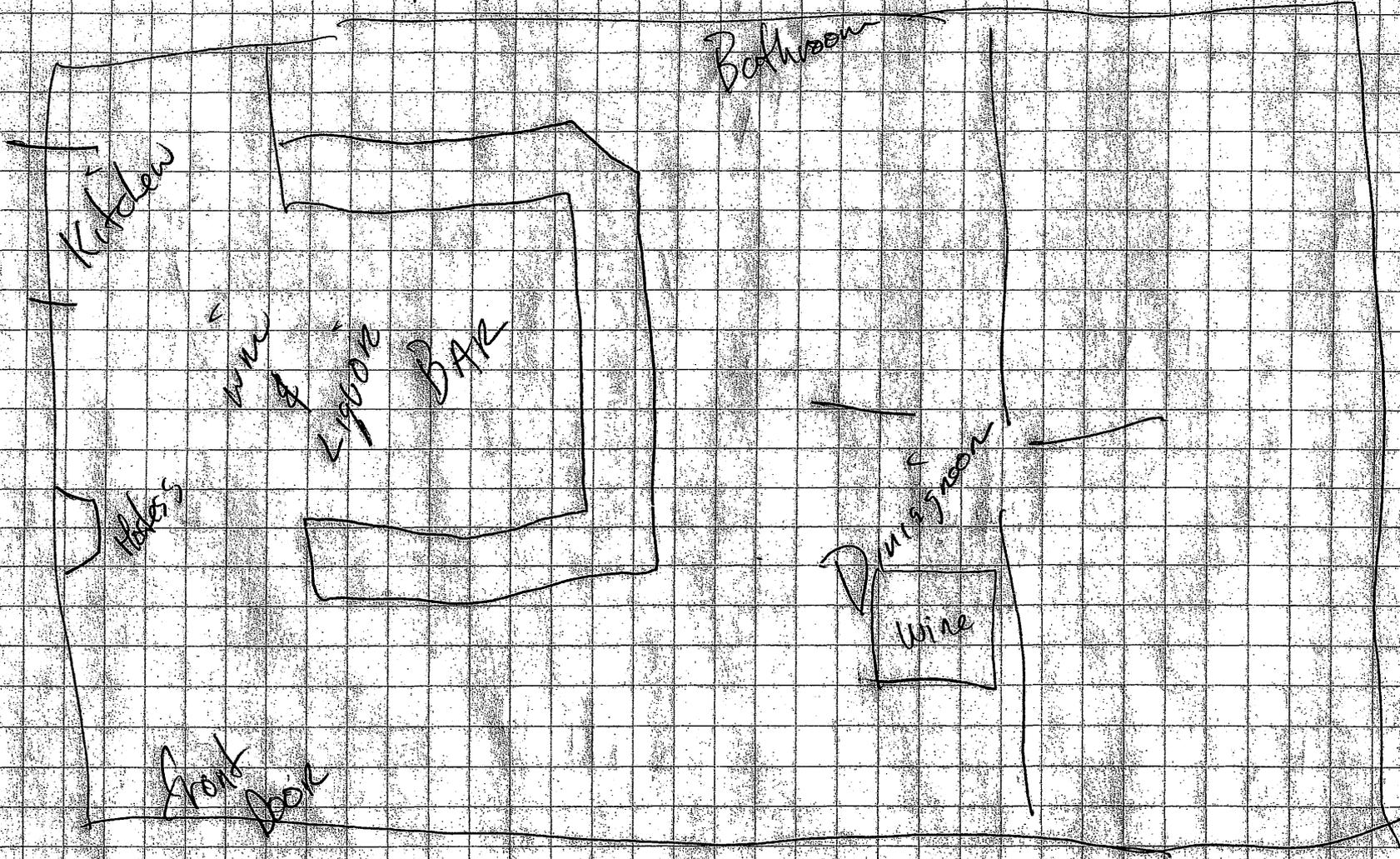
W

Windows

Medusa Lounge/Dining Rm

N

Bathroom



W

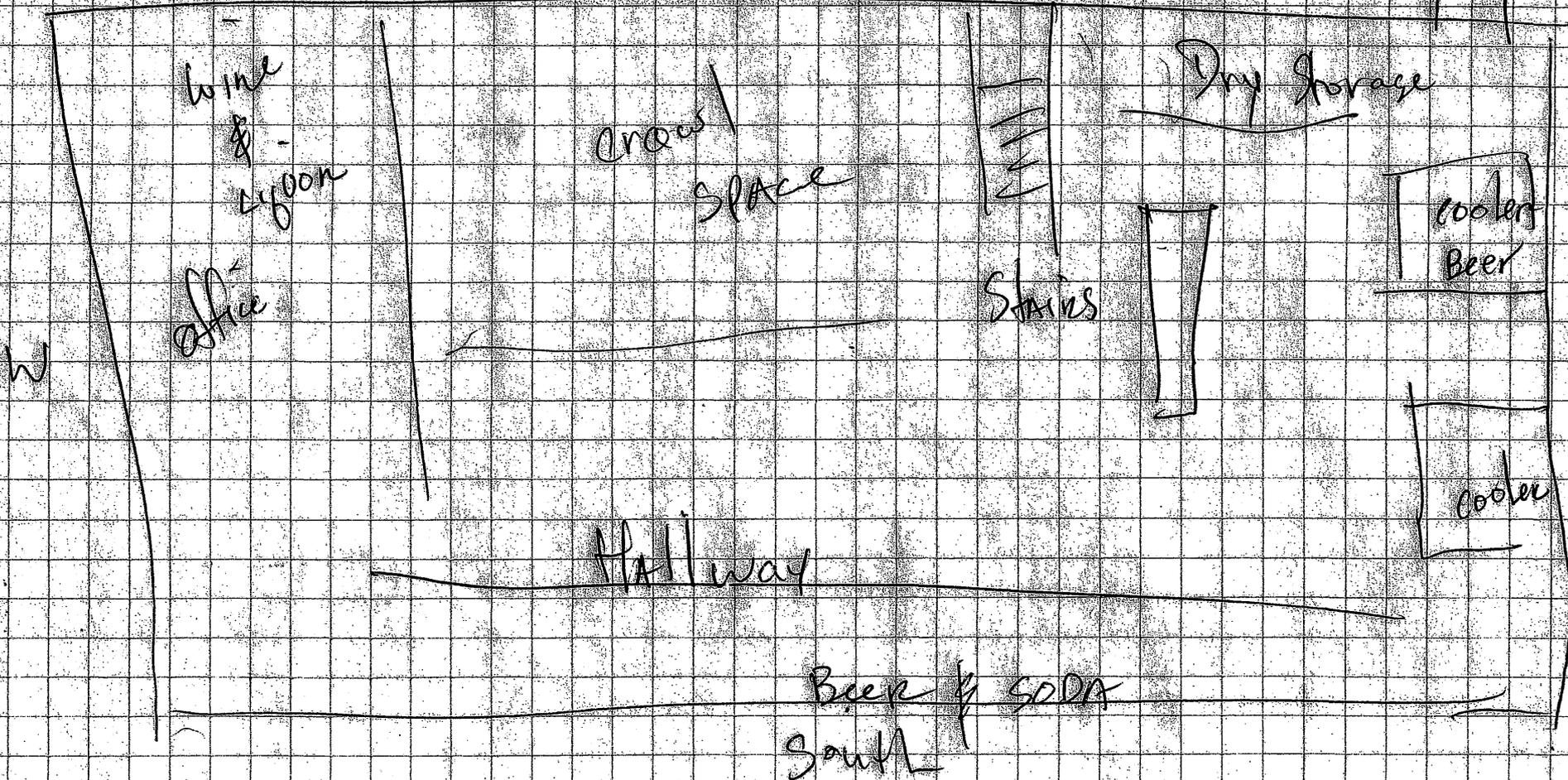
E

S

Basement

N

Basement door



wine & cigar

Office

crawl space

Stairs

Dry Storage

Cooler Beer

Cooler

Hallway

Beer & Soda

W

E

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company AMERICAN LEGION POST 24
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>LEONARD JEBERSKI</u>	<u>1804 COWART ST</u>	<u>LAKE GENEVA 53147</u>
Vice President/Member	<u>THOMAS KEHL</u>	<u>938 ANN ST</u>	<u>GENOA CITY 53128</u>
Secretary/Member	<u>ROBERT MILLER</u>	<u>W965 CAMELIA RD</u>	<u>PELL LAKE 53157</u>
Treasurer/Member	<u>CHARLES J. SCHLEHLEIN</u>	<u>337 EUGENE DR</u>	<u>LAKE GENEVA 53147</u>
Agent	<u>CHARLES J. SCHLEHLEIN</u>	" "	" "

C. 1. Trade Name AMERICAN LEGION POST 24 Business Phone Number 262-248-9767
 2. Address of Premises 735 HENRY ST Post Office & Zip Code LAKE GENEVA 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 1ST FLOOR & LOWER LEVEL STORAGE
5. Legal description (omit if street address is given above): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 6th day of May, 20 17
[Signature]
(Clerk/Notary Public)
 My commission expires 10/30/17

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
[Signature]
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5/16/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

LICENSE REQUESTED	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer X	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor X	\$ <u>500</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625.00</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of AMERICAN LEGION POST 24
(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 AMERICAN LEGION POST 24
(trade name)

located at 735 HENRY ST

appoints CHARLES J. SCHLEHLEIN
(name of appointed agent)

337 EUGENE DR. LAKE GENEVA
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 62 yrs

Place of residence last year 337 EUGENE DR. LAKE GENEVA

For: AMERICAN LEGION POST 24
(name of corporation/organization/limited liability company)

By: Leonard Jęruski Commander Post 24
(signature of Officer/Member/Manager)

And: [Signature] HISTARIAN
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, CHARLES J. SCHLEHLEIN, hereby accept this appointment as agent for the
(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.

[Signature] 5-5-15 Agent's age _____
(signature of agent) (date)

337 EUGENE DR. LAKE GENEVA Date of birth _____
(home address of agent)

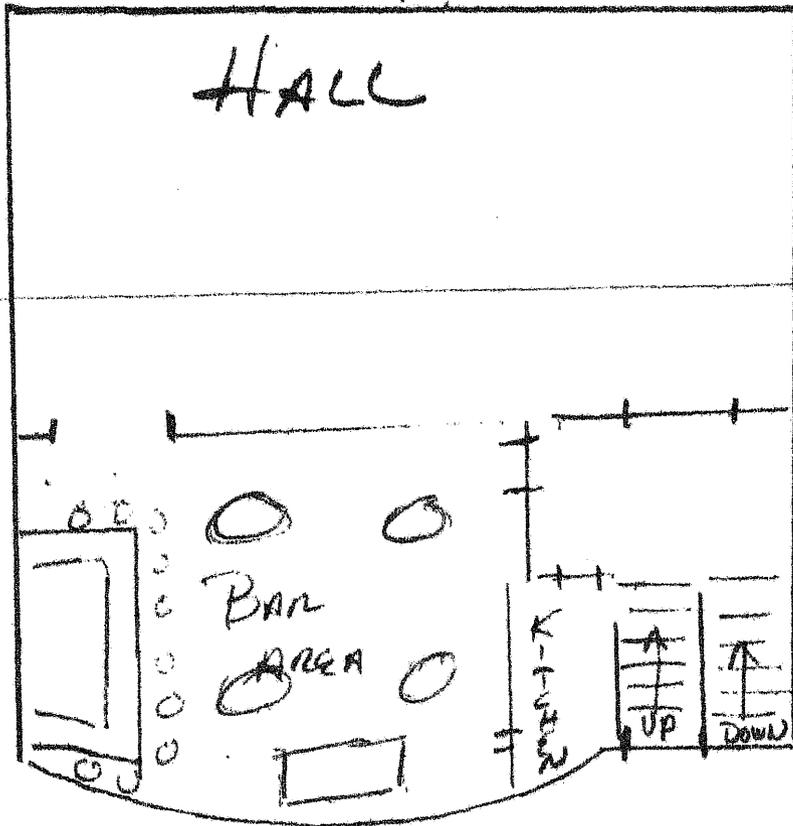
APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

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.

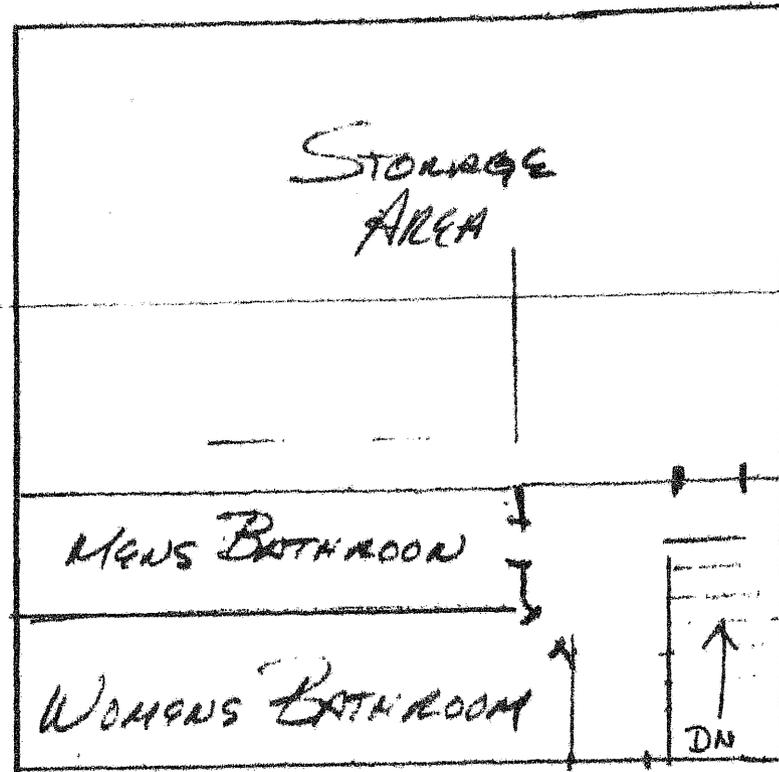
Approved on 5-25-15 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

AMERICAN LEGION POST #24
LAKE GEORGE

MAIN FLOOR



LOWER LEVEL



LIQUOR SERVED & STORED ON MAIN FLOOR
LIQUOR STORED ON LOWER LEVEL

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) Last, First and Middle Name Charles B. Lorenzi Home Address 1540 W. Main St. Post Office & Zip Code L.G. WI 53147

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company 422 S. Wells St. LTD

Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title _____ Name (Inc. Middle Name) Charles B. Lorenzi Home Address 1540 W. Main St. Post Office & Zip Code WI 53147
 President/Member _____
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent Charles B. Lorenzi
 Directors/Managers _____

C. 1. Trade Name Celebration on wells st Business Phone Number _____
 2. Address of Premises 422 S. Wells St. Post Office & Zip Code L.G. 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) see attached all through building located at 422 S. Wells St.

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** Yes No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on reverse side** Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

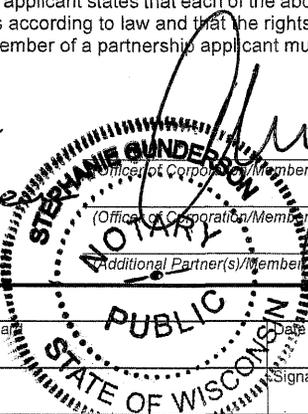
this 8 day of May, 2015
Stephanie Gunderson (Clerk/Notary Public)
 My commission expires 4/3/18

[Signature] (Official of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)
[Signature] (Official of Corporation/Member/Manager of Limited Liability Company/Partner)
 _____ (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/8/15</u>	Date reported to council/boards	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No.:	FEIN Number:
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$ <u>500</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ <u>625</u>



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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of 422 S. Wells St. LTD
(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 Celebration on Wells St.
(trade name)

located at 422 S. Wells St.

appoints Charles Lorency
(name of appointed agent)
1540 W. Main St., L.G., WI 53147
(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?

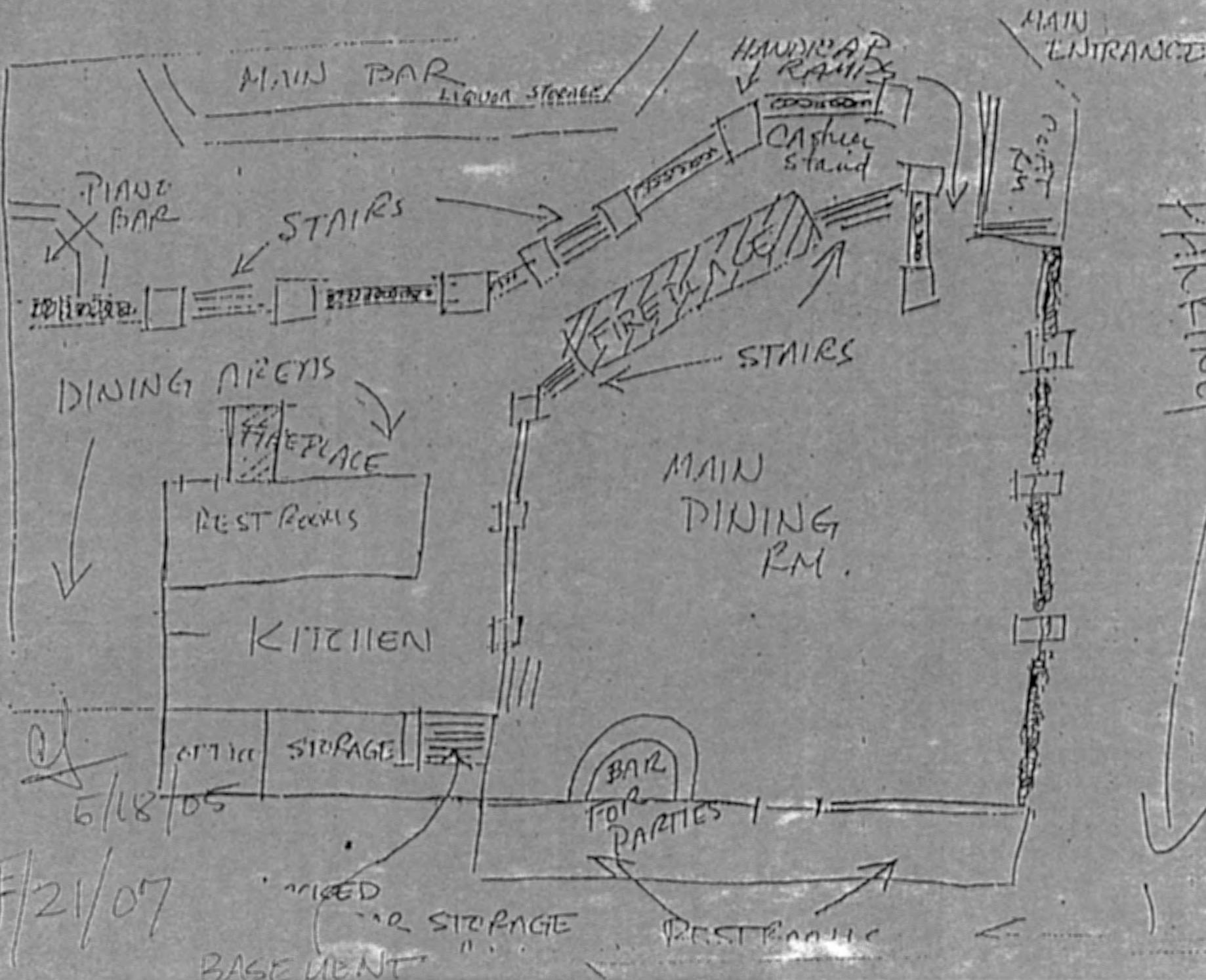
Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No
How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 24 years

Place of residence last year _____
For: Bettadista Garden Celebration Wells
(name of corporation/organization/limited liability company)
By: [Signature]
(signature of Officer/Member/Manager)
And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT
I, Charles Lorency, hereby accept this appointment as agent for the
(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.
[Signature] 5-8-15 Agent's age _____
(signature of agent) (date)
1540 W. Main St. Date of birth _____
(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 5-22-15 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



PARKING

4/21/07

6/18/05

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) MARK BASIL D. Home Address 1881 Dodge St Post Office & Zip Code Lake Geneva WI 53147

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Chubby Kitty LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:
 Title Name (Inc. Middle Name) Home Address Post Office & Zip Code
 President/Member MARK BASIL
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent MARK BASIL
 Directors/Managers _____

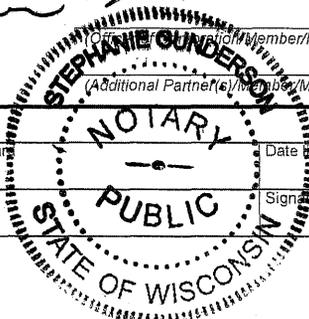
C. 1. Trade Name FAT CAT'S Business Phone Number 262 745 1213
 2. Address of Premises 104 BROAD ST. L.G. WI 53147 Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 104 Broad St. L.G. WI 53147
5. Legal description (omit if street address is given above): Storage Under Stairs + back closet, Front closet Behind Bar.
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 8 day of May, 2015
Stephanie Endereson (Clerk/Notary Public)
 My commission expires 4/13/18
Mark Basil (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
 _____ (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5/8/15</u>	Date reported to council/boar	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk



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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of Chubby Kitty LLC
(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 FAT CATS
(trade name)

located at 104 BROAD ST

appoints MARK BASIL
(name of appointed agent)

1881 Dodge St Lake Geneva WI 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 19 years

Place of residence last year 1881 Dodge St L.G. WI 53147

For: MARK Chubby Kitty LLC Fat Cat's DBA
(name of corporation/organization/limited liability company)

By: [Signature]
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, MARK BASIL, hereby accept this appointment as agent for the
(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.

[Signature] 5-5-15 Agent's age _____
(signature of agent) (date)

1881 Dodge St Lake Geneva WI 53147 Date of birth _____
(home address of agent)

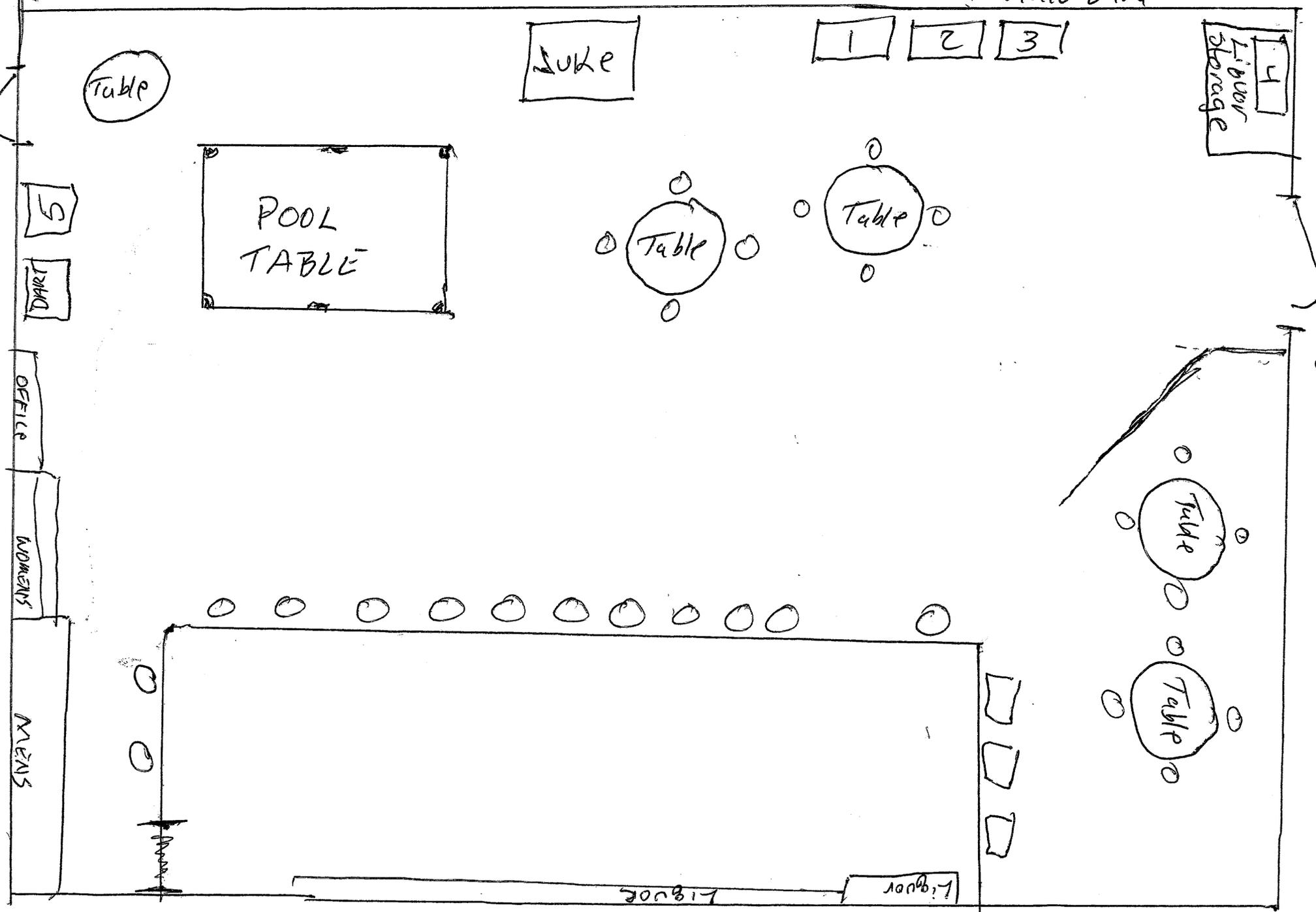
APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

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.

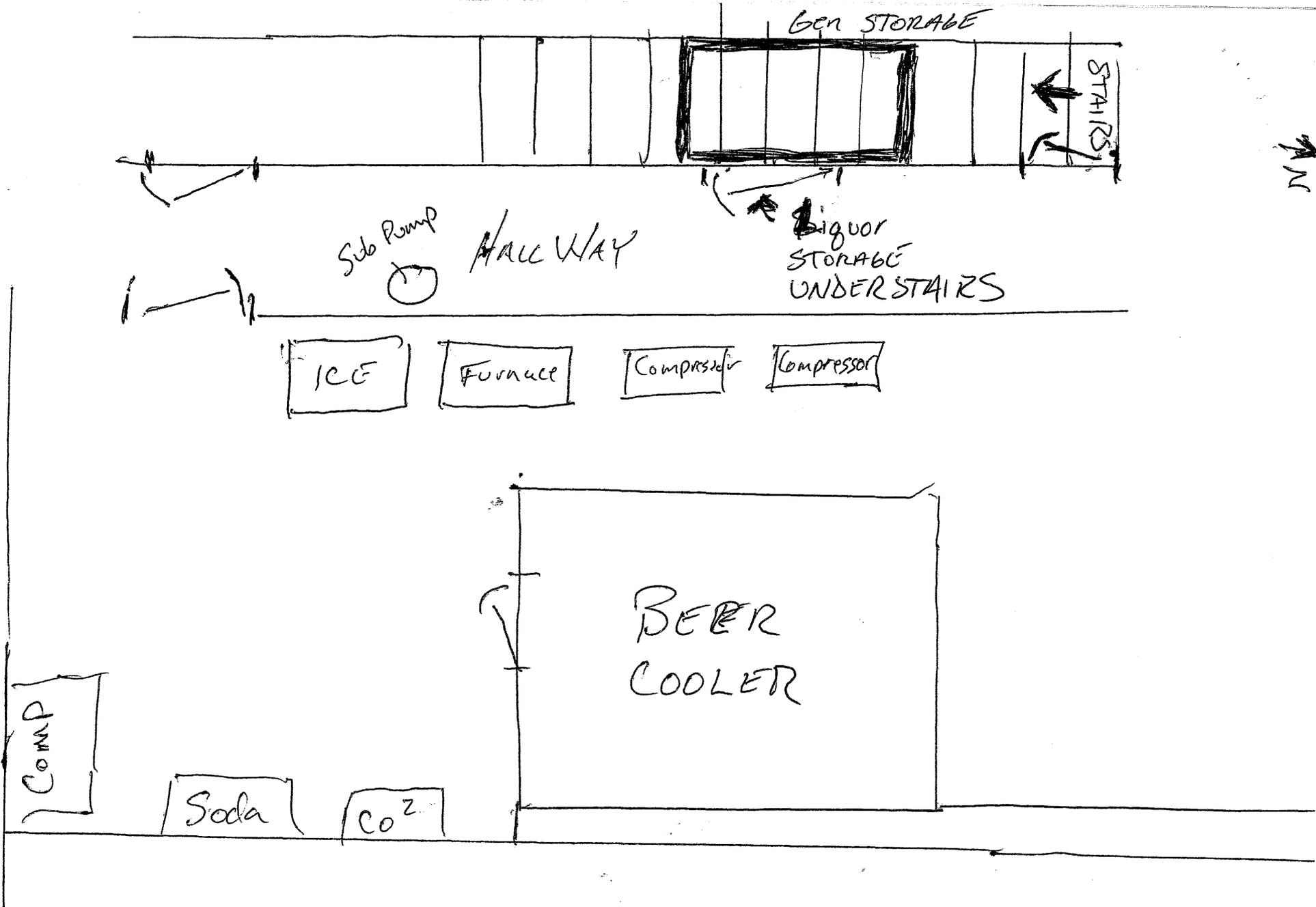
Approved on 5-22-15 by [Signature] Title [Signature]
(date) (signature of proper local official) (town chair, village president, police chief)

FAT CATS 2015

- 1- Video Pull Tabs
- 2- Video game
- 3- Video game
- 4- Video game
- 5- Video game



BROAD STREET



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code
Caravette, Daniel Christopher 39w101 Dean Lane St. Charles 60175 IL

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Samson Enterprises, LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:
 Title Name (Inc. Middle Name) Home Address Post Office & Zip Code
 President/Member Daniel Christopher Caravette 39w101 Dean Lane St. Charles IL 60175
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent Eugene Graher 11465 Clover Rd Pell Lake WI 53157
 Directors/Managers _____

C. 1. Trade Name Eugene Graher Carvetti's Business Phone Number 262-248-9752
 2. Address of Premises 1642 W. Main St. Post Office & Zip Code Lake Geneva, 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Restaurant, bar, patio
5. Legal description (omit if street address is given above): Basement storage
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** Yes No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on reverse side** Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 6th day of May, 20 17
James [Signature]
(Clerk/Notary Public)
 My commission expires 10/30/17

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5/6/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town
 Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of Samson Enterprises LLC
(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 Carvetti's

located at 642 W. Main St. Lake Geneva, WI 53147
(trade name)

appoints Eugene Grahler
(name of appointed agent)
11465 Clover Rd. Pell Lake WI 53157
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? _____

Place of residence last year 11465 Clover Rd. Pell Lake, WI 53157

For: Samson Enterprises LLC
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: Eugene Grahler
(signature of Officer/Member/Manager)

Eugene Grahler ACCEPTANCE BY AGENT
(print/type agent's name), hereby accept this appointment as agent for the

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.

Eugene Grahler 5-6-15 Agent's age _____
(signature of agent) (date)
11465 Clover Rd. Pell Lake, WI 53157 Date of birth _____
(home address of agent)

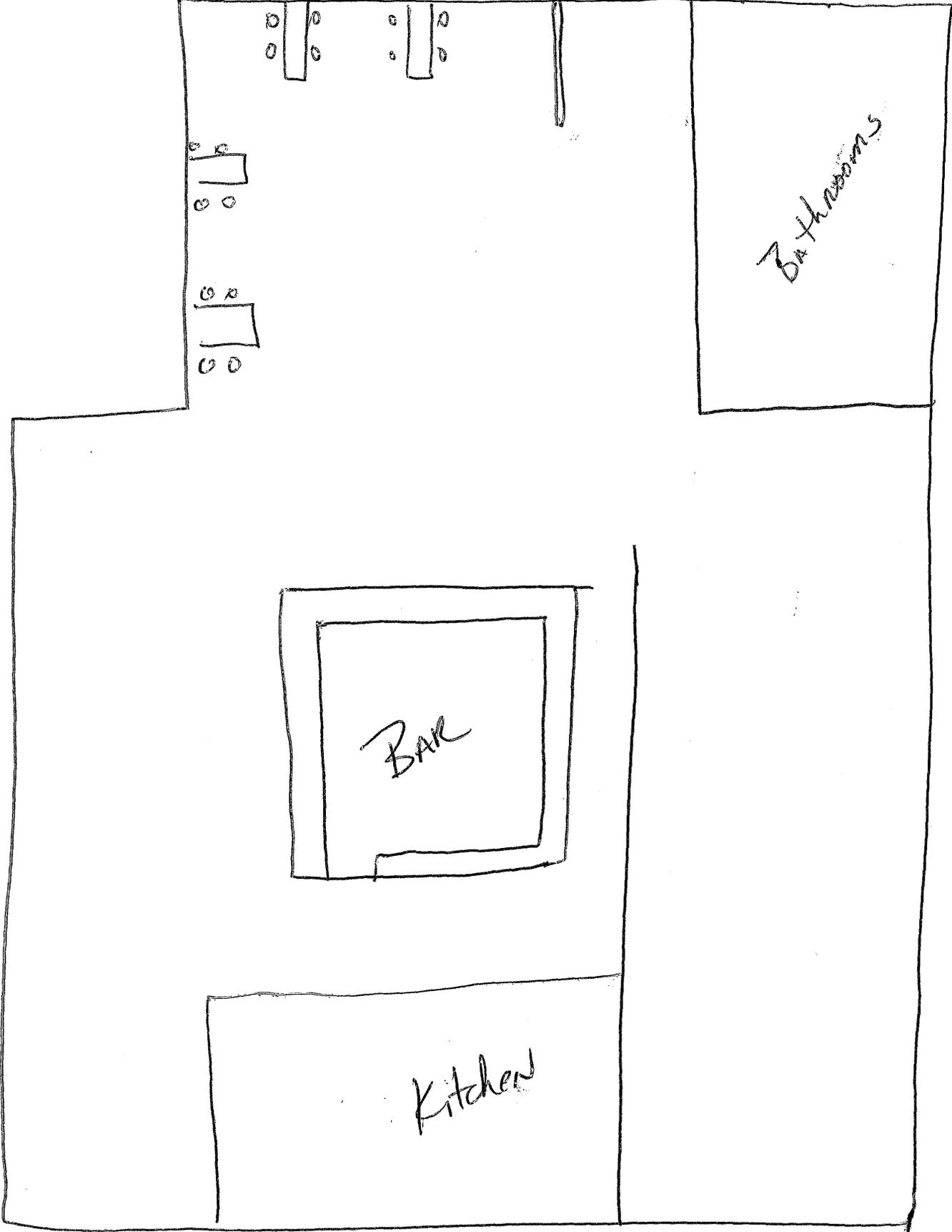
**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

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.

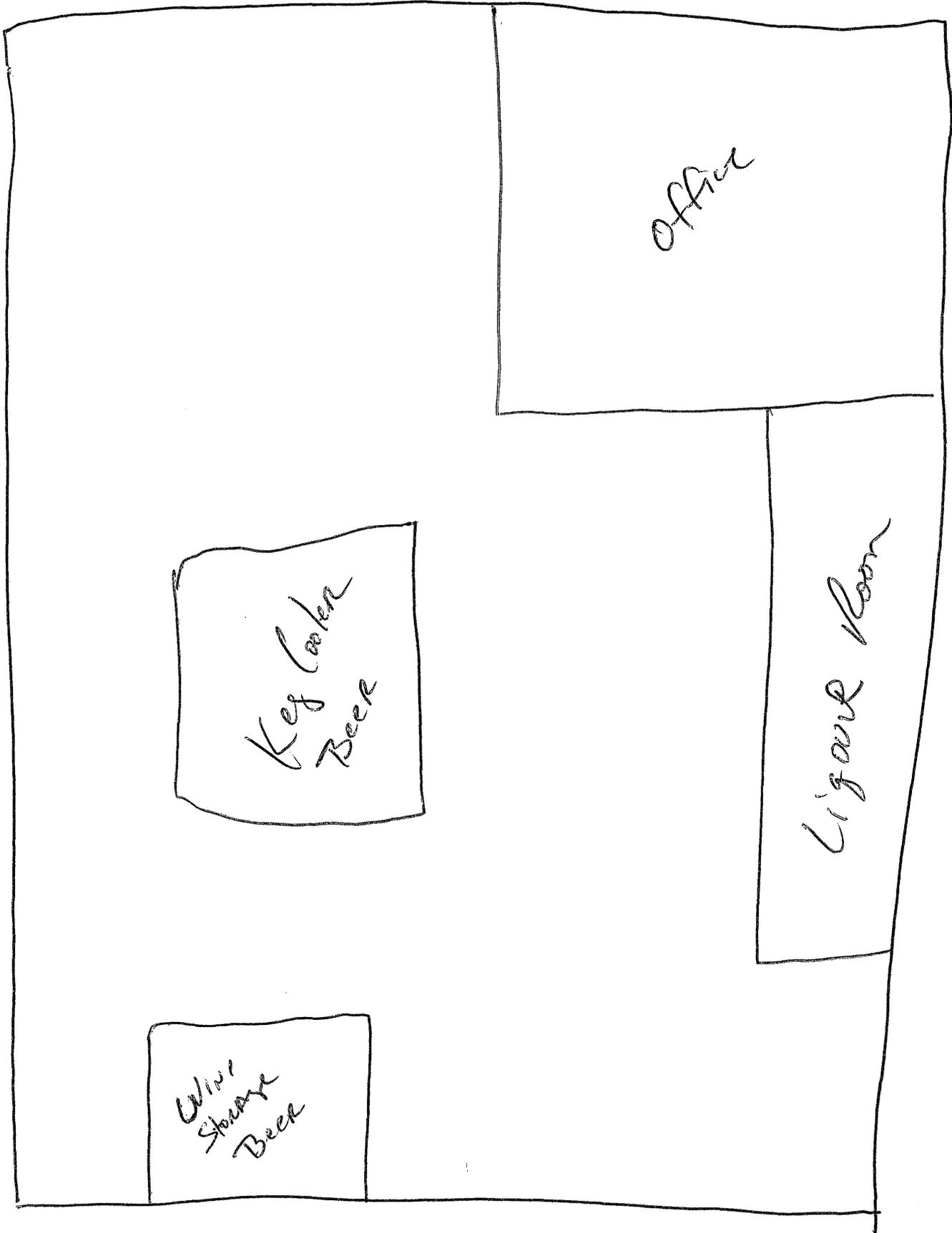
Approved on 5-25-15 by _____ Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

Inside Restaurant
CARVETTI'S

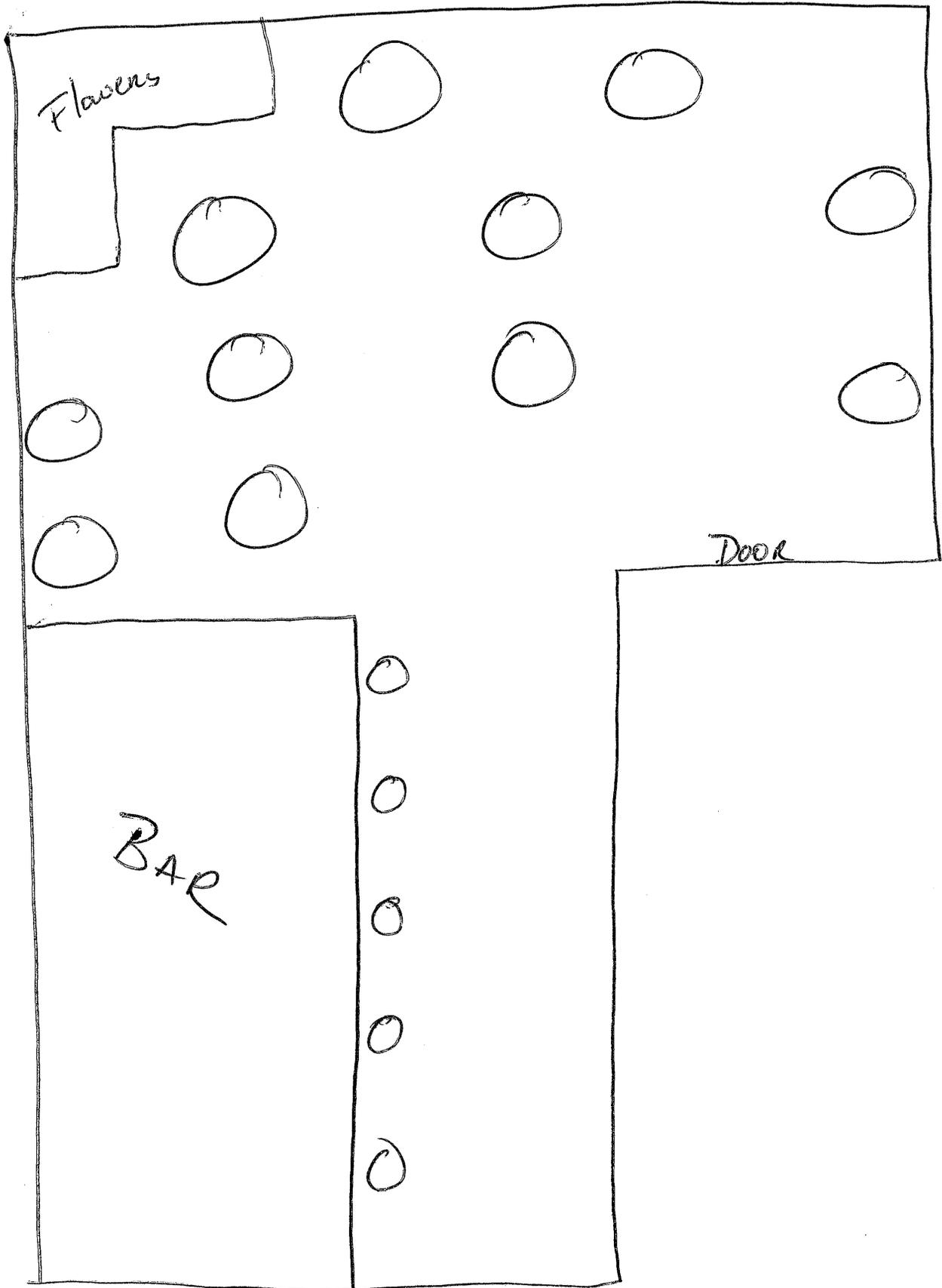
Entrance



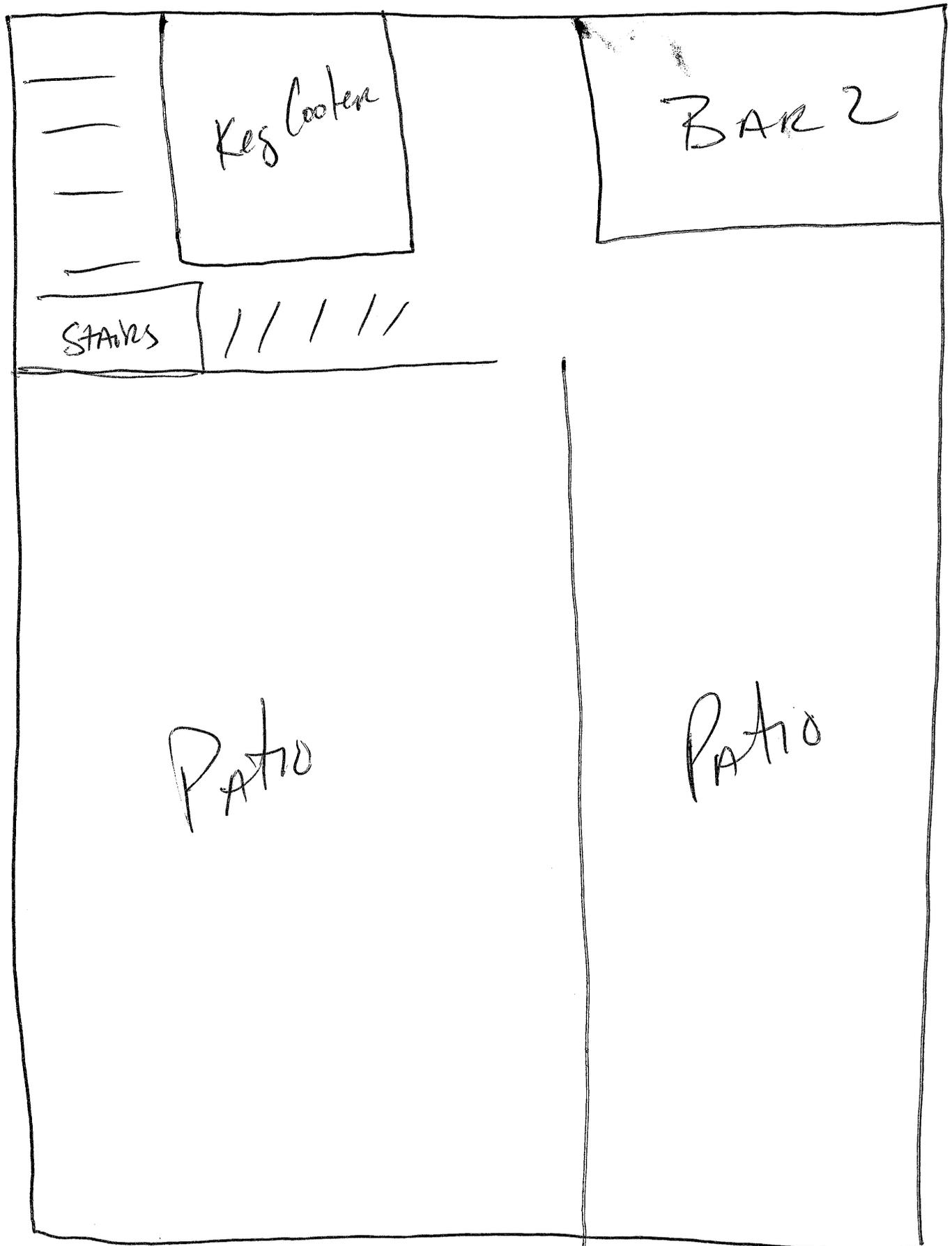
Basement Carvettis



Upper Patio Carveths



Lower Patio Carvettis



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code
Thomas Anthony Romano 3881 N Southport Chicago IL 60613

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company LG Hospitality Group LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Thomas Anthony Romano</u>		
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Amel Georgalis</u>	<u>509 Madison St Lake Geneva, WI</u>	<u>53147</u>
Directors/Managers			

C. 1. Trade Name Tuscan Tavern and Grill Business Phone Number 262-248-0998
 2. Address of Premises 430 Broad St. LG Post Office & Zip Code Lake Geneva 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Restaurant, Bar, seating area, outdoor areas
5. Legal description (omit if street address is given above): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (800) 266-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 5th day of May 2015

Muriel Thye
(Clerk/Notary Public)



My commission expires 08/15/2016

Thomas Romano
Agent of Corporation/Member/Manager of Limited Liability Company /Partner/Individual
Amel Georgalis
Agent of Corporation/Member/Manager of Limited Liability Company /Partner
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/15/15</u>	Date reported to council/board <u>6/18/15</u>	Date license granted <u>6/19/15</u>
License number issued	Date license issued <u>6/19/15</u>	Signature of Clerk / Deputy Clerk <u>Sabrina Weger</u>

Applicant's WI Seller's Permit No.: FEIN Number: _____	
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$ <u>500</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ <u>625</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of LG Hospitality
(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 TUSCAN TAVERN AND GRILL
(trade name)

located at 430 N BEARD ST Lake Geneva, WI 53147

appoints James Georgoulas
(name of appointed agent)
529 Madison St Lake Geneva WI, 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? _____

Place of residence last year _____

For: _____
(name of corporation/organization/limited liability company)
 By: LG Hospitality DBA Tuscan Tavern and Grill
(signature of Officer/Member/Manager)
 And: [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

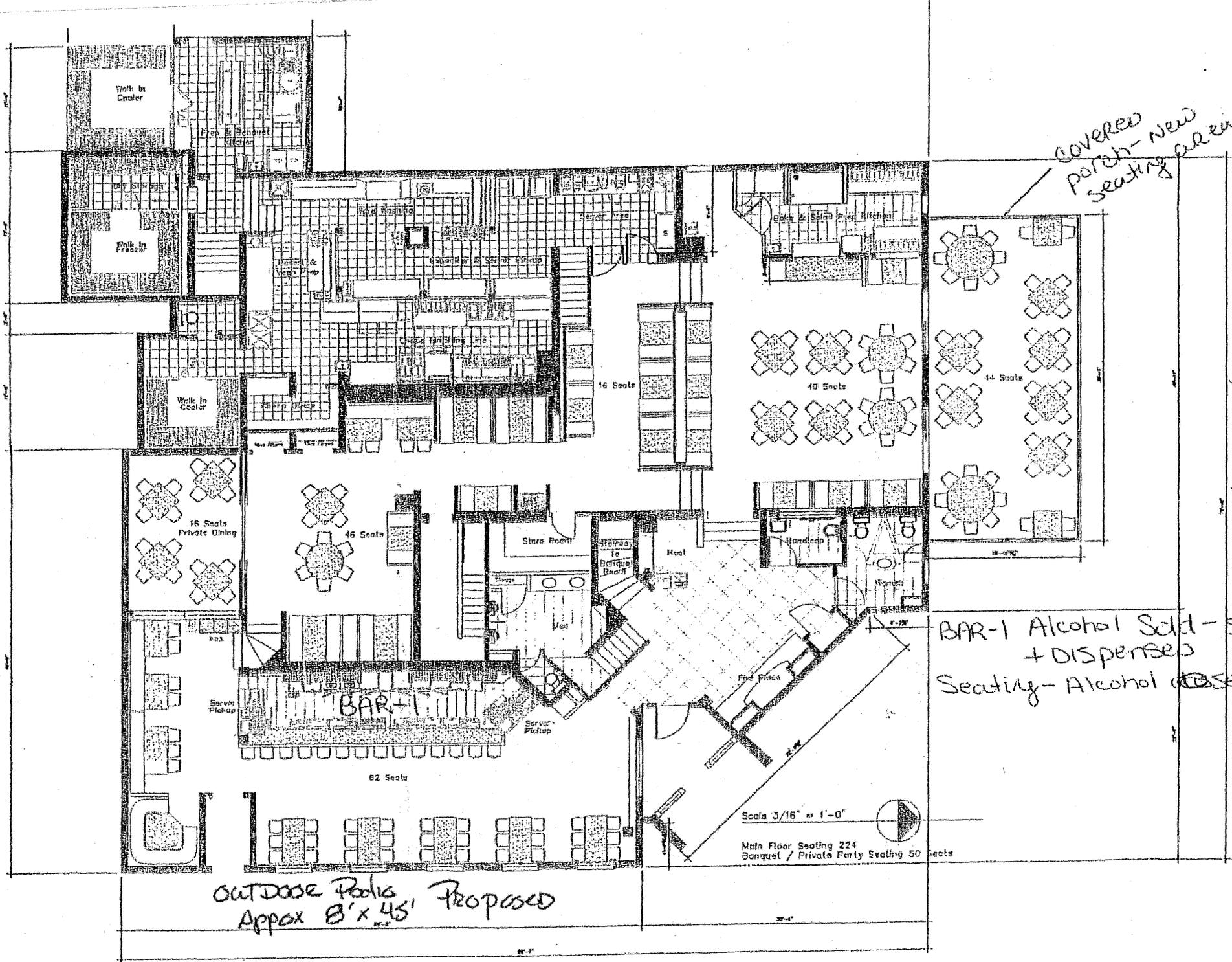
I, James Georgoulas, hereby accept this appointment as agent for the
(print/type agent's name)
 corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

[Signature] 5/15/2015 Agent's age _____
(signature of agent) (date)
529 Madison St Lake Geneva WI 53147
(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 5.25.15 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



Covered porch - new seating area

USCOM

16 Seats
Private Dining

46 Seats

16 Seats

40 Seats

44 Seats

BAR-1
82 Seats

BAR-1 Alcohol Sold - stored + dispensed
Seating - Alcohol reserved

Scale 3/16" = 1'-0"

Main Floor Seating 224
Bouquet / Private Party Seating 50 seats

OUTDOOR POOLs Proposed
Approx 8' x 45' Proposed

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 05 06 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Pop More Corks Inc

Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>David L. Biegemann</u>	<u>155 Forest Lane Lake Geneva, WI</u>	<u>53147</u>
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>David L. Biegemann</u>	<u>155 Forest Lane Lake Geneva, WI</u>	<u>53147</u>
Directors/Managers	_____	_____	_____

C.1. Trade Name Pop More Corks Inc Business Phone Number 262-348-9463

2. Address of Premises 615-617 W. Main St. Lake Geneva Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) See Attached

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** Yes No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on reverse side** Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

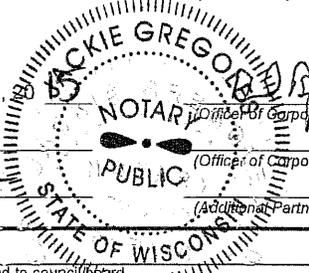
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 7th day of May
Jackie Gregoire
(Clerk/Notary Public)
 My commission expires June 2017
Jackie Gregoire
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)



TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/7/15</u>	Date reported to council <u>5/7/15</u>	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of Pop More Corks 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 Pop More Corks Inc
(trade name)

located at 615-617 W. Main St Lake Geneva, WI 53147

appoints David Biegemann
(name of appointed agent)
155 Forest St Lake Geneva, WI 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 18 YRS

Place of residence last year 155 Forest Street Lake Geneva, WI 53147

For: Pop More Corks Inc
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, David Biegemann, hereby accept this appointment as agent for the
(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.

DB 5/7/15 Agent's age _____
(signature of agent) (date)
155 Forest Street Lake Geneva Date of birth _____
(home address of agent)

**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

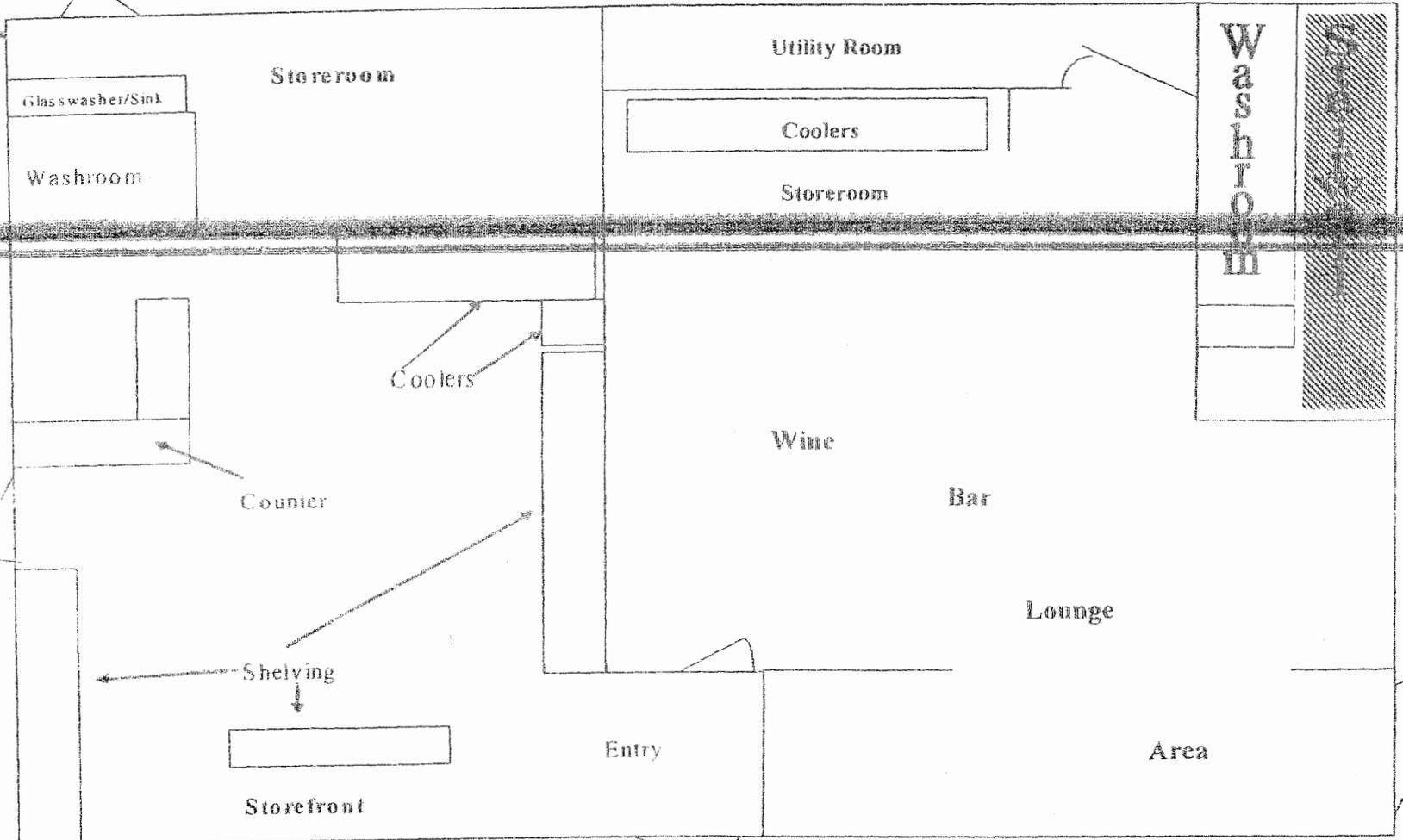
I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on 5-25-15 by _____ Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

628
W. Main

615-617 W. Main St

Fence



Pop More Corks

615-617 W. Main St Lake Geneva, WI 53147

628 W. Main St. Shorewest Real Estate.

Garden

55 ft

Garden

Enclosed Outdoor Patio

Pop More Corks
617 W. Main St
Retail Wine Shop

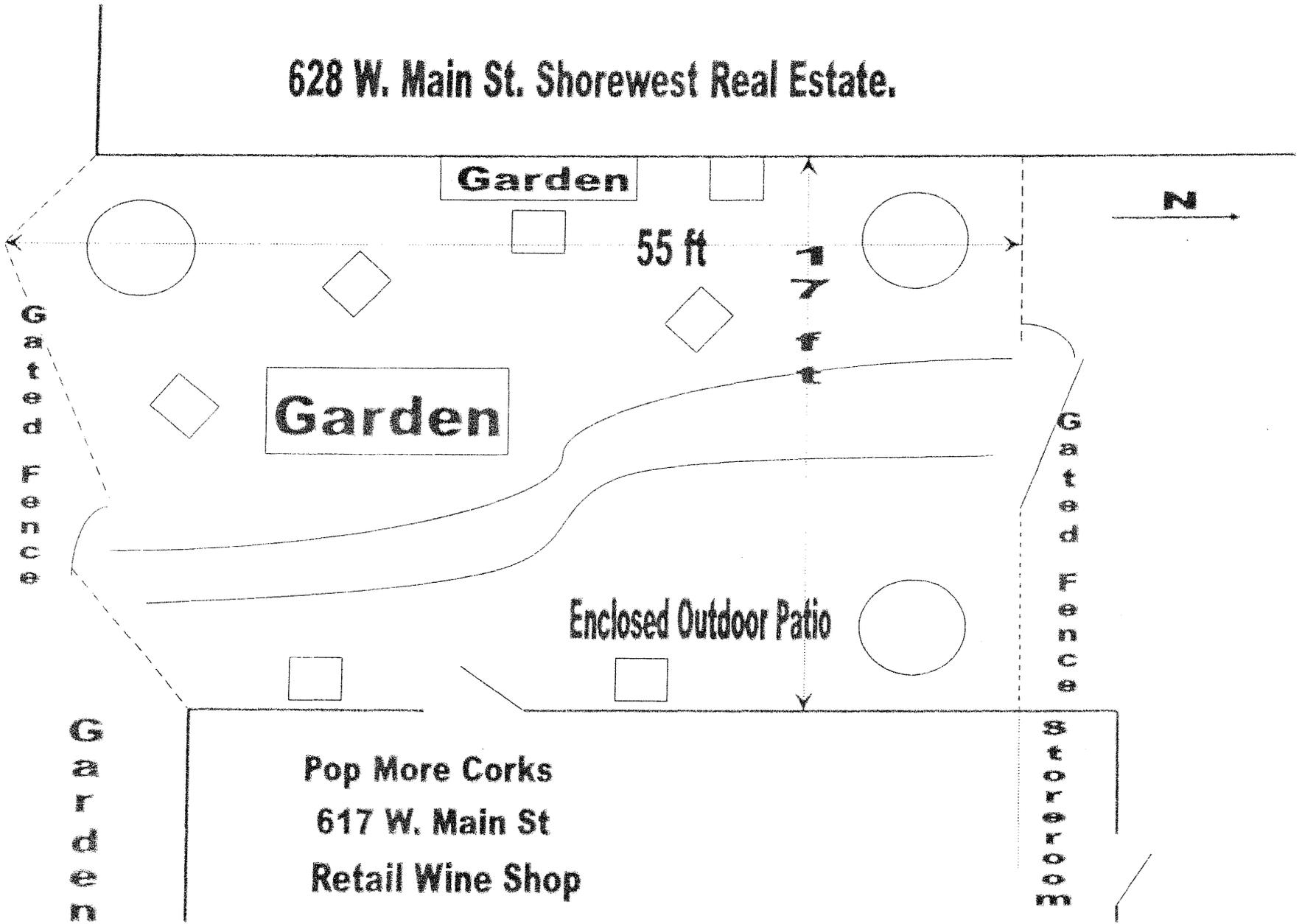
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RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
Full Name(s) (Last, First and Middle Name) **Home Address** **Post Office & Zip Code**

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Capitol Geneva LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Kevin Lederer</u>	<u>7203 Stonewood Ct Middleton WI 53562</u>	<u>53562</u>
Vice President/Member	<u>Felix Richgels</u>	<u>4565 Hackenberry Ct Middleton WI 53562</u>	<u>53562</u>
Secretary/Member	<u>Katrina Lederer</u>	<u>7203 Stonewood Ct Middleton WI 53562</u>	<u>53562</u>
Treasurer/Member	<u>Kristin Richgels</u>	<u>4565 Hackenberry Ct Middleton WI 53562</u>	<u>53562</u>
Agent	<u>Elizabeth Dion</u>	<u>624 Orchard St Burlington WI 53105</u>	<u>53105</u>
Directors/Managers	<u>Susan Getzen</u>	<u>51756 Stevens Ct Wisconsin Dells WI 53965</u>	<u>53965</u>

C. 1. Trade Name Sprecher's Restaurant & Pub Business Phone Number 262 248 7047
 2. Address of Premises 111 Center Street Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Bar, Dining room, patios, banquet room, cooler
5. Legal description (omit if street address is given above): back lot for speech toberfest only hotel lobby storage room storage
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** Yes No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on reverse side** Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** yes, banquet room and hotel lobby service Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (808) 286-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 15th day of MAY, 20 15

A. Richgels
(Clerk/Notary Public)

My commission expires 5/1/15

Felix B. Richgels
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/20/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No. / FEIN Number:	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$ <u>500</u>
Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625.00</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of Capitol Geneva LLC
(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 Sprecher's Pub
(trade name)

located at 111 Center Street

appoints Elizabeth Dion
(name of appointed agent)
624 Orchard St Burlington WI 53105
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? indefinitely

Place of residence last year 524 Orchard St Burlington, WI 53105

For: Sprecher's Restaurant & Pub
(name of corporation/organization/limited liability company)
 By: [Signature]
(signature of Officer/Member/Manager)
 And: [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Elizabeth Dion
(print/type agent's name), hereby accept this appointment as agent for the

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.

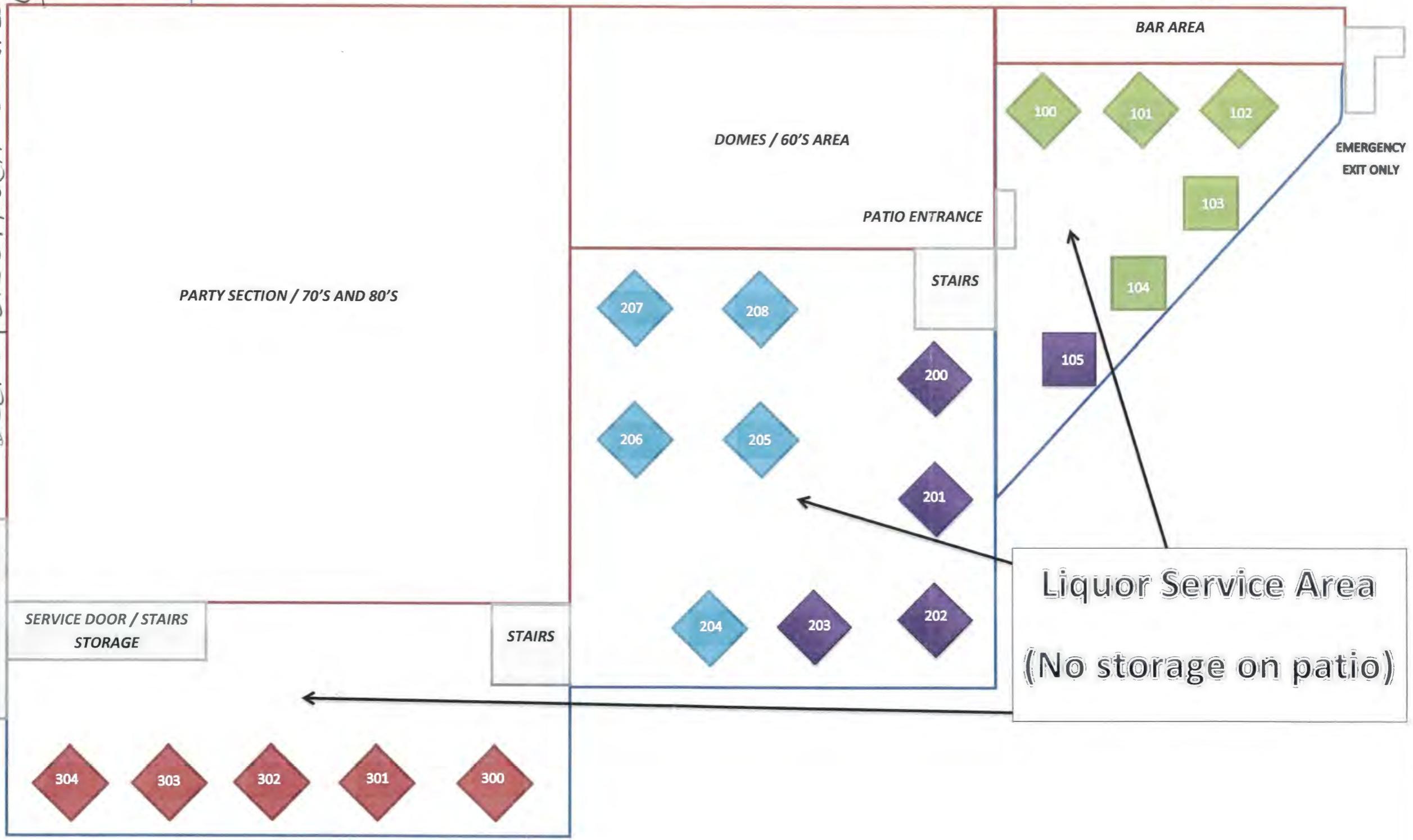
[Signature] 5/20/15
(signature of agent) (date) Agent's age _____
524 Orchard St Burlington WI 53105
(home address of agent) Date of birth _____

**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 1 June 2015 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

BACK PARKING LOT
BEER FOR SPEECHTOBER FEST ONLY | ~~INDOOR/OUTDOOR COVE POOLS (WHEN COVE OUTDOOR BAR IS CLOSED)~~ only



COVE ENTRANCE

ENTRANCE

KITCHEN / DISHROOM / DOWNTAIRS STEPS
Locked Liquor Storeroom
In lower level

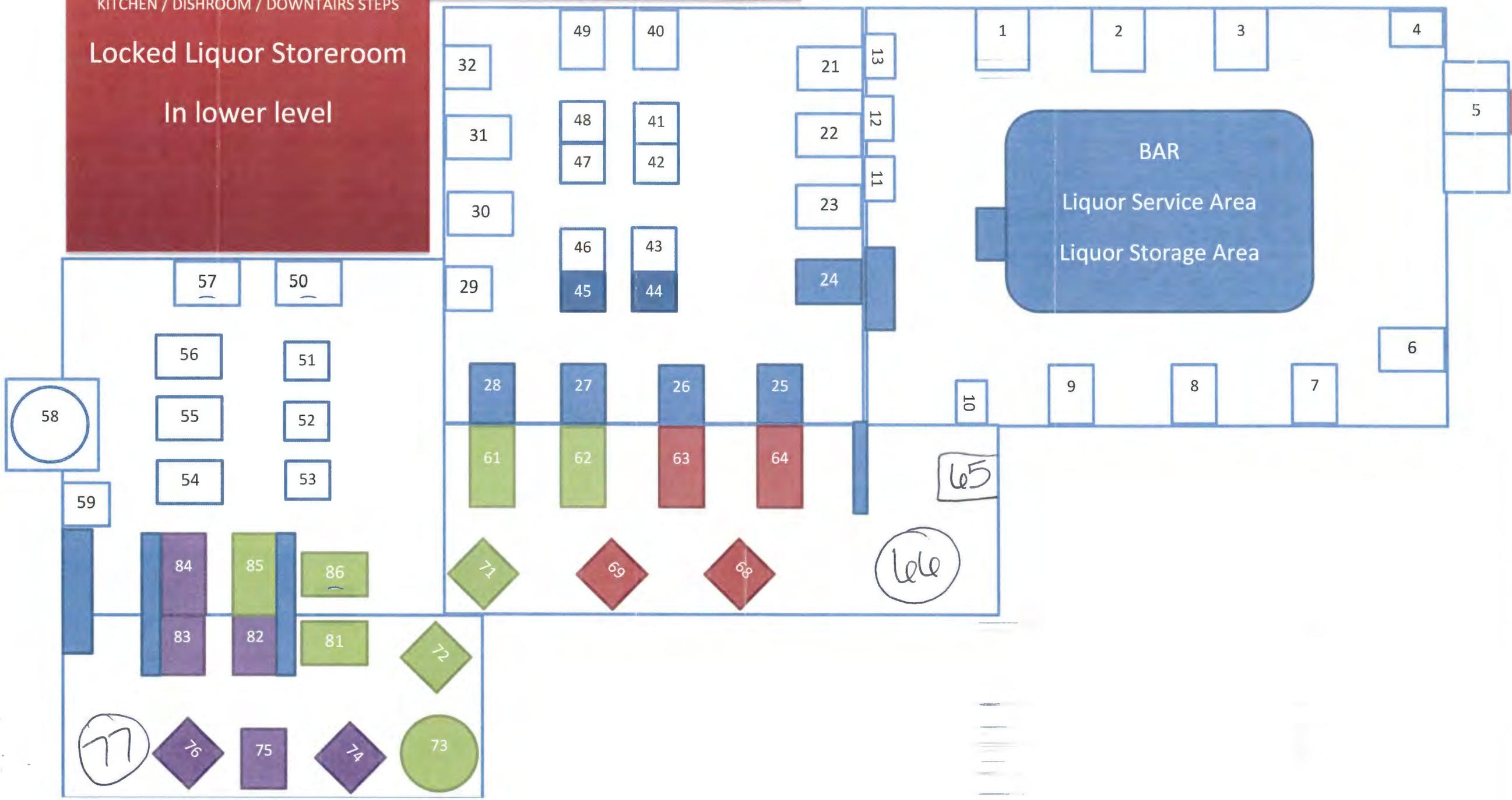
KITCHEN

HOST STAND

Lobby Area
Liquor Service Area

MAP ROOM
Liquor Service Area

BAR
Liquor Service Area
Liquor Storage Area



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company MERIDIAN CONDOMINIUM ASSOC.

Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title Name (Inc. Middle Name) Home Address Post Office & Zip Code

President/Member _____

Vice President/Member _____

Secretary/Member _____

Treasurer/Member _____

Agent CHARLES LORENZI 1546 W MAIN ST LAKE GENEVA, WI 53147

Directors/Managers FRANK WOLFF 5315 LAKE SHORE DR LAKE GENEVA, WI 53147

C. 1. Trade Name BELLA VISTA SUITES Business Phone Number _____

2. Address of Premises 335 WABLEBY DR Post Office & Zip Code LAKE GENEVA 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) LOUNGE, OUTDOOR SERVICE, ROOM SERVICE, BASEMENT STORAGE

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted** of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No

b. Are **charges** for any offenses presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (808) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 8 day of May, 2015

Stephanie Gundersen
(Clerk/Notary Public)

My commission expires 4/13/15

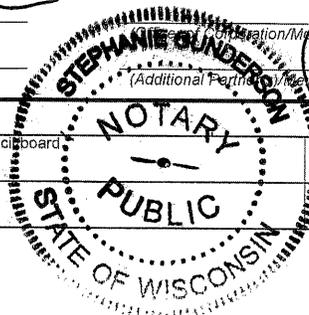
[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)

[Signature]
(Additional Partner/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/8/15</u>	Date reported to council/board <u>6/18/15</u>	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk



Applicant's WI Seller's Permit No.: _____ FEIN Number: _____	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$ _____
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$ _____
<input type="checkbox"/> Class A liquor	\$ _____
<input checked="" type="checkbox"/> Class B liquor	\$ 500
<input checked="" type="checkbox"/> Reserve Class B liquor	\$ <u>500.00</u>
<input type="checkbox"/> Class B (wine only) winery	\$ _____
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>675.00</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town
 Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of MERIDIAN CONDOMINIUM ASSOC.
(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 BELLA VISTA SUITES ON THE SHORE OF LAKE GENEVA

located at 335 WRIGLEY DR (trade name)

appoints CHARLES LORENZI
(name of appointed agent)

1540 W MAIN ST LAKE GENEVA WI 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).
MERIDIAN CONDOMINIUM ASSOCIATION

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? _____

Place of residence last year 1540 W MAIN ST LAKE GENEVA, WI 53147

For: MERIDIAN CONDO ASSOC DBA BELLA VISTA SUITES
(name of corporation/organization/limited liability company)

By: [Signature]
(signature of Officer/Member/Manager)

And: [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, CHARLES LORENZI, hereby accept this appointment as agent for the
(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.

[Signature] _____ Agent's age _____
(signature of agent) (date)

1540 W MAIN LAKE GENEVA WI Date of birth _____
(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 1 June 2015 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

BELLA VISTA SUITES HOTEL

WRIGHTLEY DR

OUTSIDE
PATIO

LOWER
LOBBY

RESTROOMS

STORAGE

LOWER
LOBBY

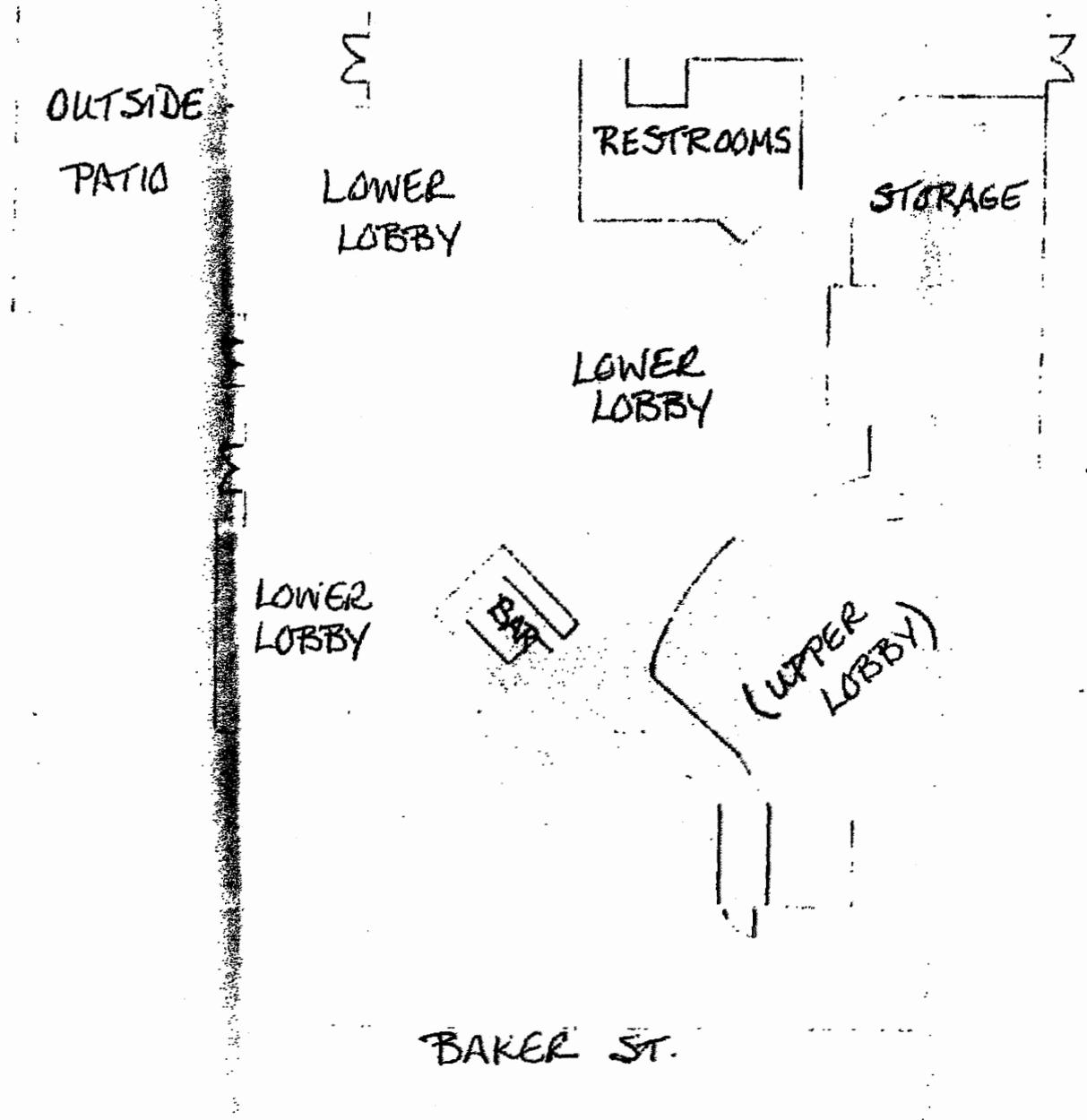
LOWER
LOBBY

BAR

(UPPER
LOBBY)

- SERVING AREAS
- BAR AREA
 - LOWER LOBBY AREA
 - OUTSIDE PATIO

BAKER ST.



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. 3 (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company SU WINGS CORP
 Address of Corporation/Limited Liability Company (if different from licensed premises) SAME

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Siu Wing Leung</u>	<u>N 3230 WILLIAMS ST. LAKE GENEVA, WI</u>	<u>53147</u>
Vice President/Member	<u>RAN SI LEI</u>	<u>W 3537 PARK DR. LAKE GENEVA, WI</u>	<u>53147</u>
Secretary/Member	<u>LARRY R. SANDY</u>	<u>N6386 WOODRIDGE DR. ELKHORN, WI</u>	<u>53121</u>
Treasurer/Member			
Agent	<u>Siu Wing Leung</u>		
Directors/Managers	<u>SAME AS PRESIDENT, VICE PRESIDENT, VP, SEC. TREASURER ABOVE</u>		

C. 1. Trade Name SU WINGS CHINESE RESTAURANT Business Phone Number 262-248-1178
 2. Address of Premises 743 NORTH ST. Post Office & Zip Code LAKE GENEVA, WI 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) SEE ATTACHED SKETCH AT 743 NORTH ST.

5. Legal description (omit if street address is given above): see above, IN BACK WORKING AREA and Waiting Room

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No See

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

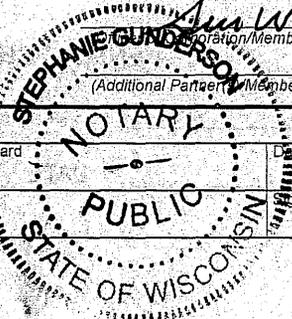
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 14 day of May, 2015
Stephanie Gunderson (Clerk/Notary Public)
 My commission expires 4/13/18

Ran Si Lei (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
Siu W Leung (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
Stephanie Gunderson (Additional Partner/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5/14/15</u>	Date reported to council/board <u>6/18/15</u>	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk



Applicant's WI Seller's Permit No. / FFIN Number:	
LICENSE REQUESTED <u>Combo CMTS43</u>	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class B liquor	\$
<input checked="" type="checkbox"/> Reserve Class B liquor	\$ <u>500.00</u>
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625.00</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of SU WINGS CORP.
(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 SU WINGS CHINESE Restaurant
(trade name)

located at 743 NORTH ST. LAKE Geneva, WI 53147

appoints Siu Wing Leung, President
(name of appointed agent)

N3230 WILLIAMS ST. LAKE Geneva, WI 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).
SU WINGS CORP., LAKE Geneva, WI 53147

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 20+ years

Place of residence last year N3230 WILLIAMS ST. LAKE Geneva, WI 53147

For: SU WINGS CORP.
(name of corporation/organization/limited liability company)

By: Smy R Sandy, VP, Sec + Treasurer
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Siu Wing Leung, hereby accept this appointment as agent for the
(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.

(signature of agent) _____ (date) Agent's age _____
N3230 WILLIAMS ST. LAKE Geneva, WI 53147 Date of birth 1 1
(home address of agent)

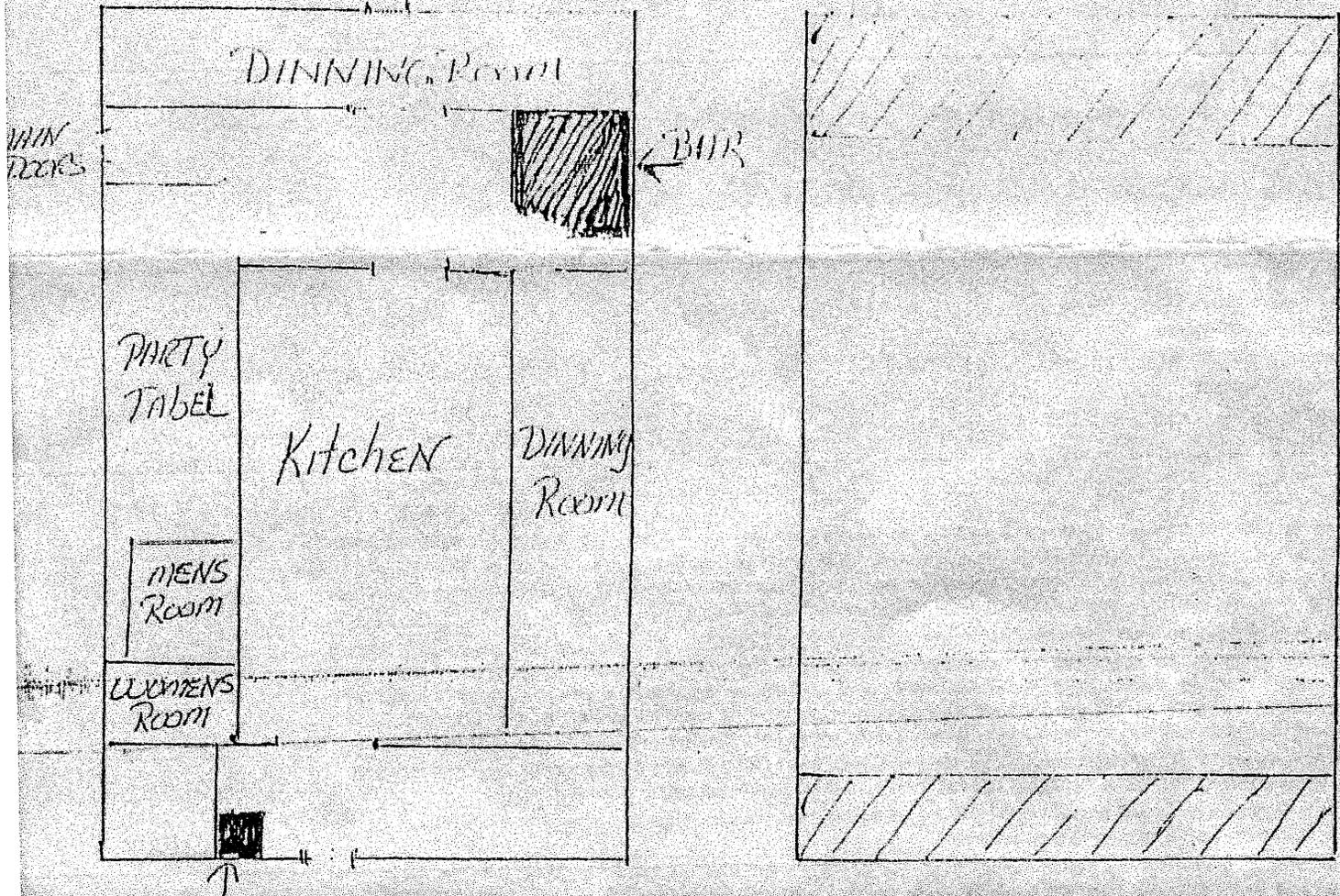
APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

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 5/28/2015 by Michael B. Rouse Title ASST. CHIEF OF POLICE
(date) (signature of proper local official) (town chair, village president, police chief)

First Floor

Basement



STORAGE FOR
LIQUORE

Su Wing's Corp.
743 North St.
Lake Geneva

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company BEACHSIDE HOSPITALITY, INC.
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

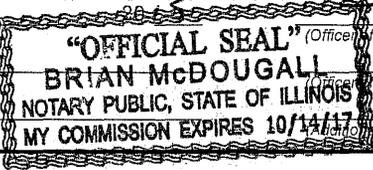
Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>THOMAS W. TRILLA</u>	<u>4612 BURMAN DR., CRYSTAL LAKE, IL 60014</u>	
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>NANCY L. TAILLA</u>	<u>4124 WAUBUN, FONTANA, WI 53125</u>	
Directors/Managers			

C. 1. Trade Name BARRIQUE WINE & BREW BAR Business Phone Number 262-241-1948
 2. Address of Premises 835 WRIGLEY DR., LAKE GENEVA Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 1100 SQ. FT., DINING ROOM, 2 RESTROOMS, HITCHHIK & PATIO
5. Legal description (omit if street address is given above): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** Yes No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on reverse side** Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 7th day of May
 _____ (Clerk/Notary Public)
 My commission expires 10-14-17
 _____ (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
 _____ (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
 _____ (Member/Partner(s)/Member/Manager of Limited Liability Company if Any)



TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5/18/15</u>	Date reported to council/board <u>6/18/15</u>	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

To the governing body of: Village of Lake Geneva County of Walworth

City

The undersigned duly authorized officer(s)/members/managers of _____
(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

BARRIQUE WINE & BREW BAR
(trade name)

located at 835 WRIGLEY DR., LAKE GENEVA, WI 53147

appoints NANCY L. TRILLA
(name of appointed agent)

424 WAUBUN, FONTANA, WI 53125
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 20 YRS.

Place of residence last year 424 WAUBUN, FONTANA, WI 53125

For: BENCHSIDE HOSPITALITY, INC
(name of corporation/organization/limited liability company)

By: [Signature]
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, NANCY L. TRILLA,
(print/type agent's name) hereby accept this appointment as agent for the

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.

Nancy Trilla 5-7-15 Agent's age _____
(signature of agent) (date)

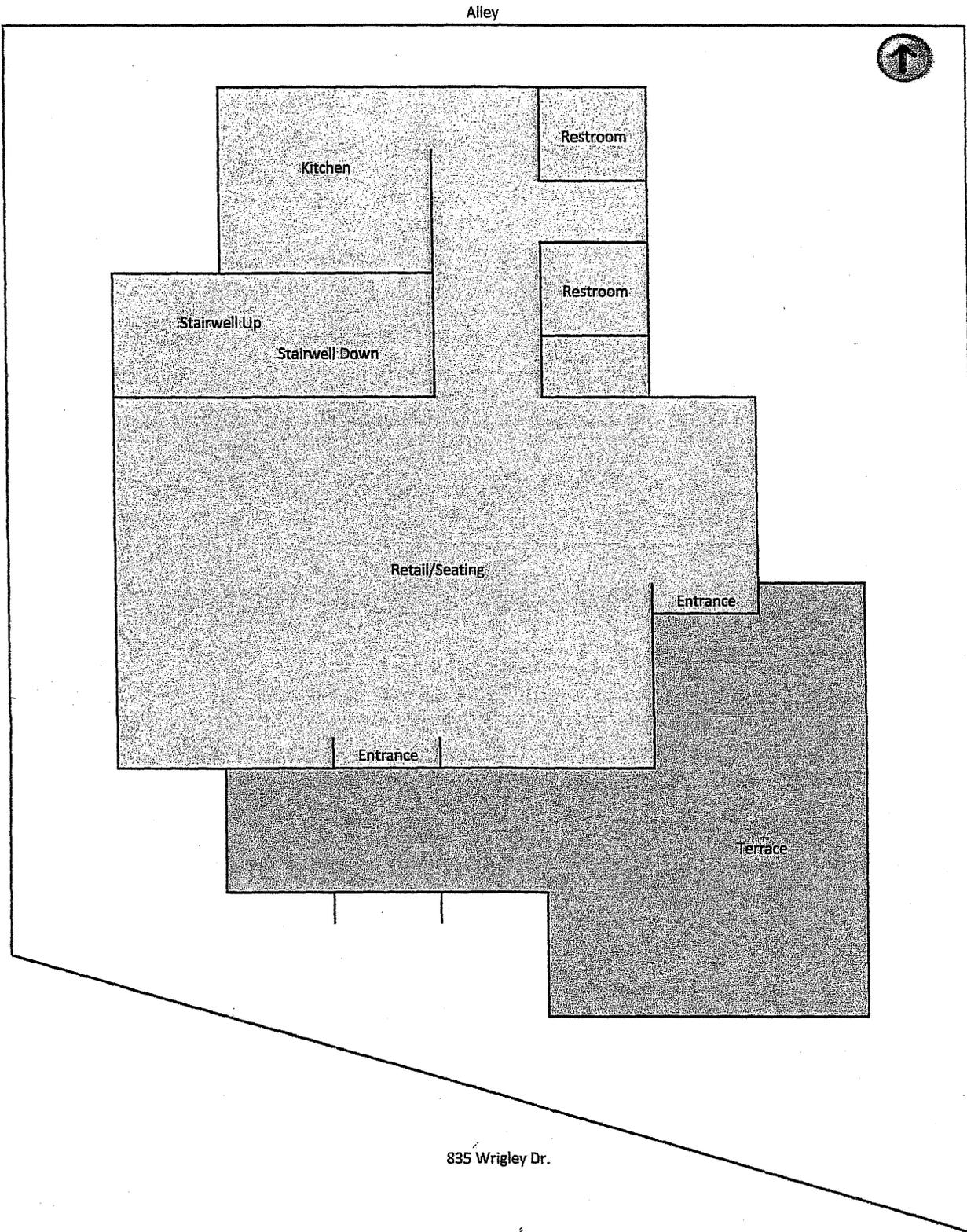
424 Waubun Dr. Fontana, WI 53125 Date of birth _____
(home address of agent)

**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 5-25-15 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

Site Map



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company PH HOSPITALITY GROUP LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) 2120 PENNAUKEE RD, STE 200
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company: WALKESHA 53188

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>MARK DILLON</u>	<u>34737 ELMST OLONDOROWEL</u>	<u>53040</u>
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>BURH NOCEK</u>		
Directors/Managers	<u>MARK DILLON</u>		

C.1. Trade Name Pizza Hut Business Phone Number 262-248-9221
 2. Address of Premises 801 WILLIAMS ST Post Office & Zip Code LAKE GENEVA 53147

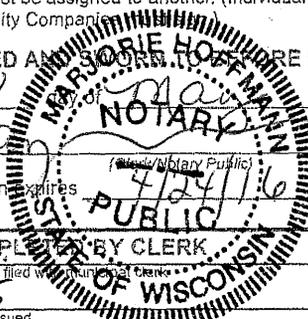
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) ONE STORY RESTAURANT, BEER & WINE SOLD IN DINING ROOM. STORED AT SERVER STATION & COOLER IN KITCHEN
- Legal description (omit if street address is given above): DINING ROOM. STORED AT SERVER STATION & COOLER IN KITCHEN
- a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No
- Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No
- Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
- Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
- Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
- Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Company)

SUBSCRIBED AND SIGNED TO BE FOR ME

this 1st day of May, 2015

My commission expires 7/24/16



PH HOSPITALITY GROUP LLC
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)
MARK DILLON
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with Municipal Clerk	Date reported to council/board	Date license granted
<u>5/8/15</u>		
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town
 Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of PH HOSPITALITY GROUP LLC
(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 PIZZA HUT
(trade name)

located at 801 WILLIAMS ST LAKE GENEVA

appoints BUTCH NOCEL
(name of appointed agent)

W4670 SOUTH SHORE DR. LAKE GENEVA WI 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? _____

Place of residence last year _____

For: PH HOSPITALITY GROUP LLC
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: MARK DILLON
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Butch Nocele, hereby accept this appointment as agent for the
(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.

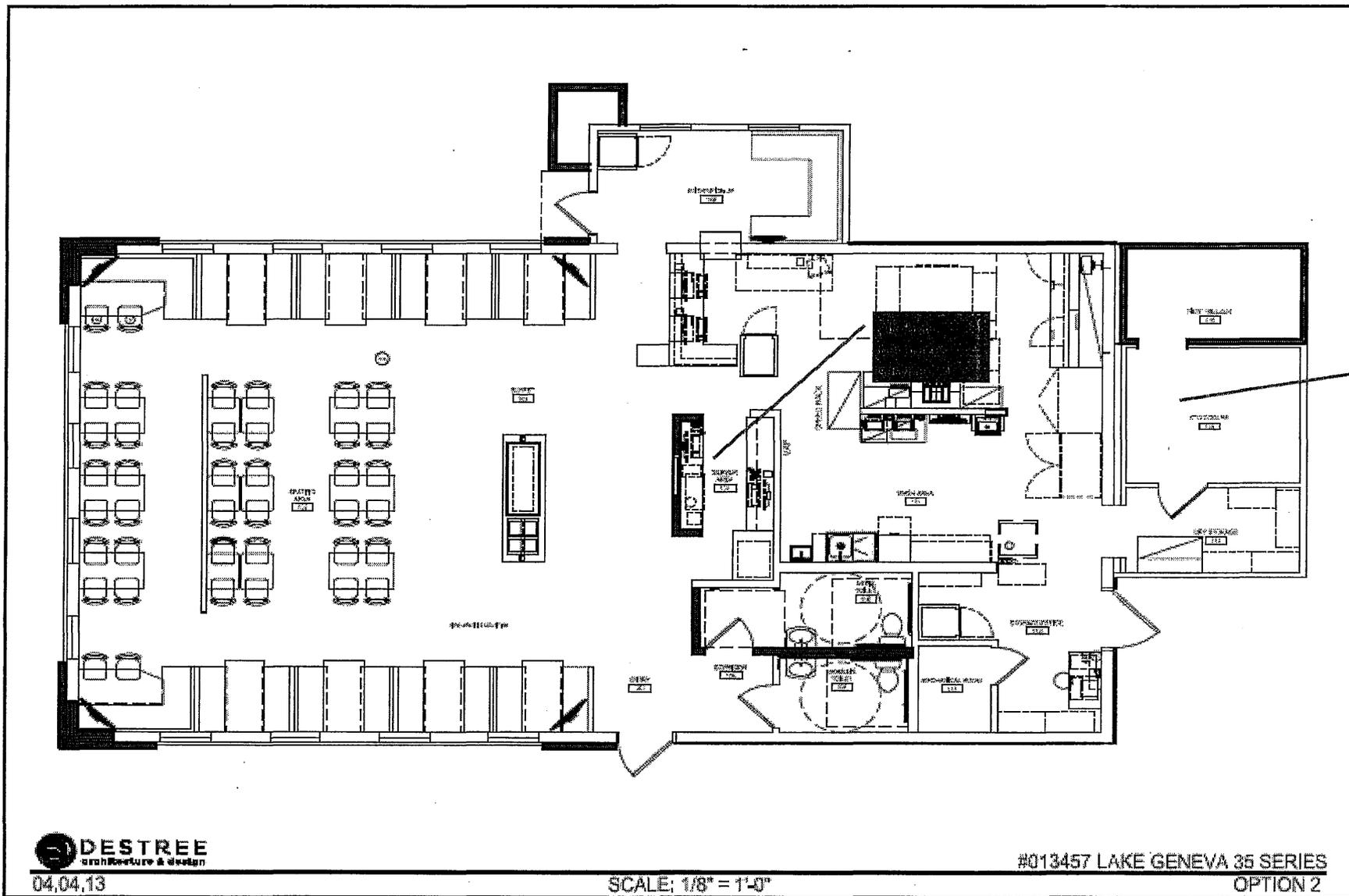
[Signature] 5-13-15 Agent's age _____
(signature of agent) (date)

W4670 SOUTH SHORE DR. LAKE GENEVA WI 53147 Date of birth _____
(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 5-22-15 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



Bar
 Counter

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ HAPPY Cafe
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 526 Well St. Lake Geneva WI 53147
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Yong zhong Liang</u>	<u>1118 Well St. Apt 2 Lake Geneva WI 53147</u>	
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>MIN Ting zhong</u>	<u>1118 Well St Apt 2 Lake Geneva WI 53147</u>	
Directors/Managers			

C. 1. Trade Name ▶ HAPPY Cafe Business Phone Number _____
 2. Address of Premises ▶ 526 Well St Lake Geneva WI 53147 Post Office & Zip Code ▶ 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Sold at restaurant. Served in dining area. Stored in back
5. Legal description (omit if street address is given above): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** Yes No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on reverse side** Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 8 day of May, 2015
Debra Weso
(Clerk/Notary Public)
 My commission expires _____

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5-8-15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk / _____

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town
 Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of Min Ting Zhong
(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
HAPPY CAFE (Restaurant)
(trade name)

located at 526-528 Wells St Lake Geneva WI 53147

appoints HAPPY CAFE
(name of appointed agent)

1118 S well ST APT #2 LAKE GENEVA WI 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? _____

Place of residence last year 1118 S well ST APT #2 LAKE GENEVA WI 53147

For: HAPPY CAFE (Restaurant)
(name of corporation/organization/limited liability company)

By: Min Ting Zhong
(signature of Officer/Member/Manager)

And: [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Min Ting Zhong, hereby accept this appointment as agent for the
(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.

[Signature] 5/08/15 Agent's age _____
(signature of agent) (date)

1118 well ST APT #2 LAKE GENEVA WI 53147 Date of birth _____
(home address of agent)

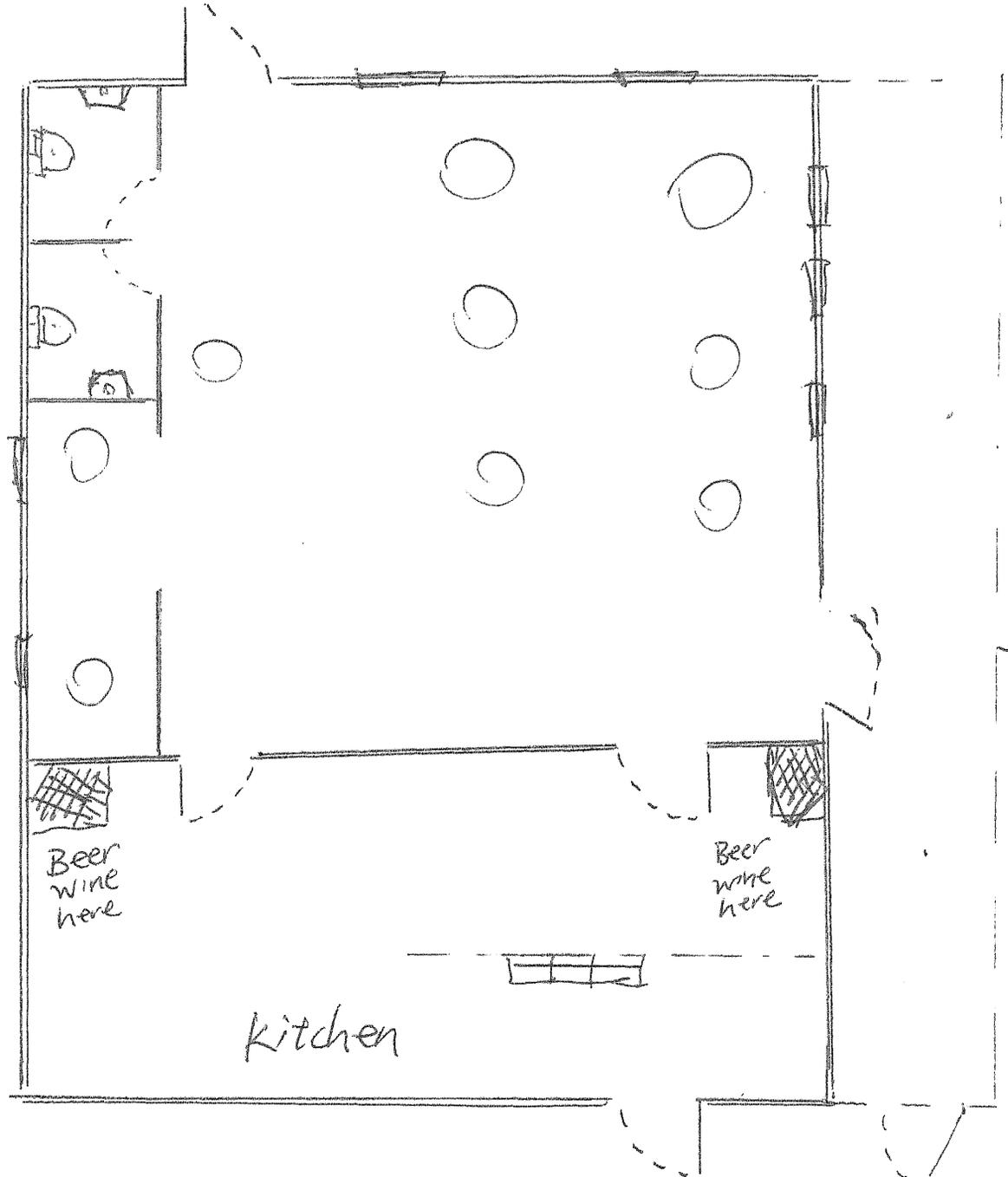
**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

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 2 June 15 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

HAPPY cafe

526/528 well st. Lake Geneva. WI 53147
(262) 248-8181



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) McCarthy, Patrick Joseph Home Address 10 Kingswood Circle Post Office & Zip Code Verona, WI 53593

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Cove Condominium Association, Inc.

Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>James Paul Patriciaian</u>	<u>1580 Creeks Crossing Dr.</u>	<u>Algonquin IL 60102</u>
Vice President/Member	<u>Caroline Onbargi Menconi</u>	<u>1498 Jefferson Ln.</u>	<u>Bloomington IL 60008</u>
Secretary/Member	<u>Patrick Joseph McCarthy</u>	<u>10 Kingswood Circle</u>	<u>Verona WI 53593</u>
Treasurer/Member	<u>Mark William Duski</u>	<u>1504 S. Elizabeth St.</u>	<u>Lombard IL 60148</u>
Agent	<u>Patrick Joseph McCarthy</u>	<u>10 Kingswood Circle</u>	<u>Verona WI 53593</u>
Directors/Managers			

C. 1. Trade Name The Cove of Lake Geneva Business Phone Number 262-249-9460

2. Address of Premises 111 Center Street Post Office & Zip Code Lake Geneva WI 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) A-Gift Shop B-Full service resort with sales in

5. Legal description (omit if street address is given above): Play room, pool, meeting rooms, & Storage

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No

b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin income or Franchise Tax return of the licensee? If not, explain. Yes No

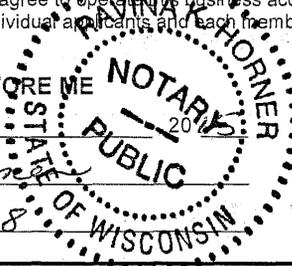
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (808) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 9 day of May 2015
Rainald A. ...
(Clerk/Notary Public)
 My commission expires 2.5.18



Patrick Joseph McCarthy
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
Patrick Joseph McCarthy
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5/12/15</u>	Date reported to county clerk	Date license granted
License number issued <u>1</u>	Date license issued	Signature of Clerk / Deputy Clerk

LICENSE REQUESTED	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ <u>100.00</u>
<input checked="" type="checkbox"/> Class B beer	\$ <u>100.00</u>
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ <u>500.00</u>
<input checked="" type="checkbox"/> Class B liquor	\$ <u>500.00</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>1225.00</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of Cove Condominium Association, 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 The Cove of Lake Geneva
(trade name)

located at 111 Center Street, Lake Geneva, WI 53147

appoints Patrick Joseph McCarthy
(name of appointed agent)

10 Kingswood Circle, Verona, WI 53593
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? _____

Place of residence last year 10 Kingswood Circle, Verona, WI 53593

For: Cove Condominium Association, Inc.
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Patrick Joseph McCarthy, hereby accept this appointment as agent for the
(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.

[Signature] 5/7/15 Agent's age _____
(signature of agent) (date)

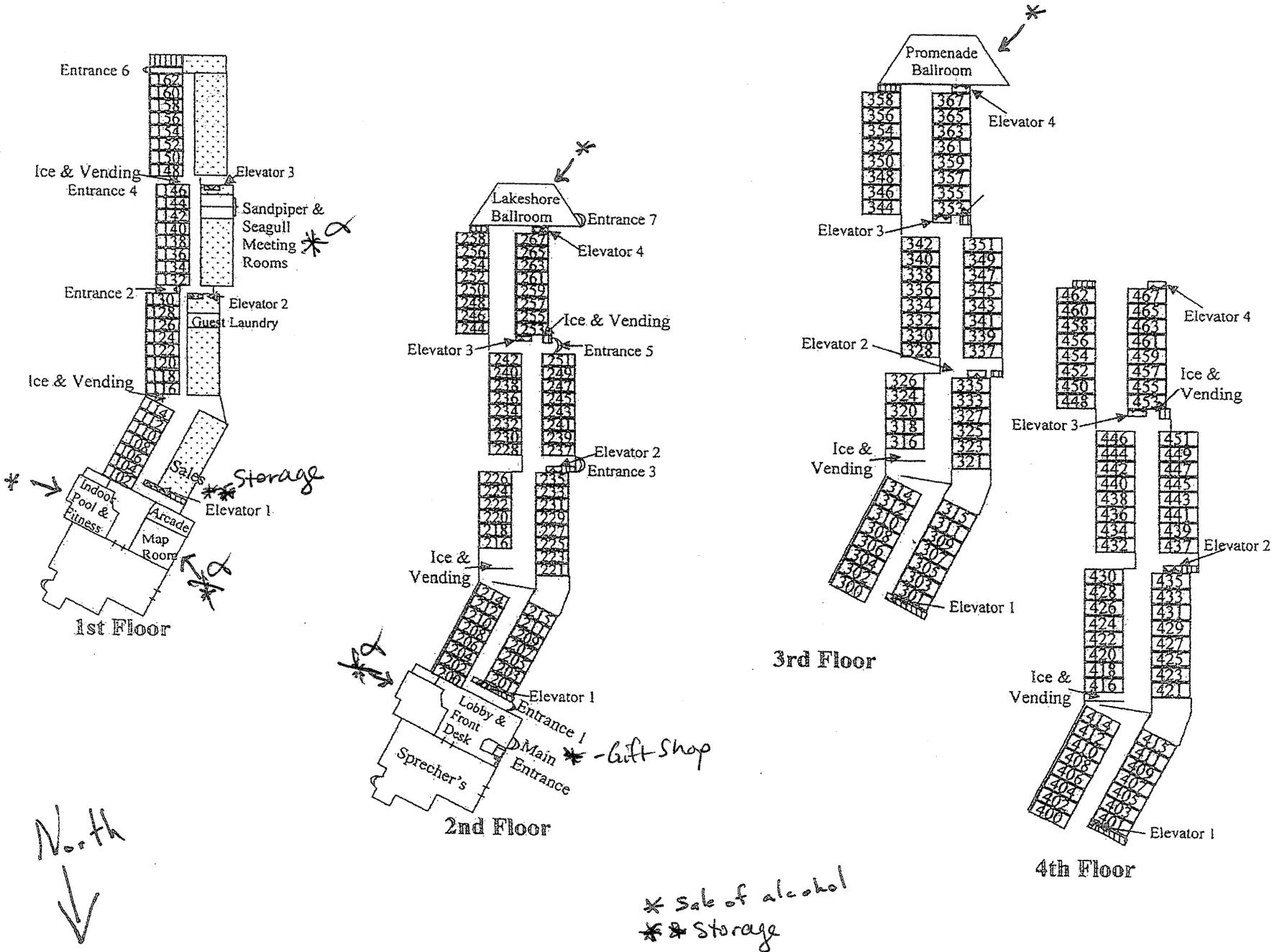
10 Kingswood Circle, Verona, WI 53593 Date of birth _____
(home address of agent)

**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 5-18-15 by [Signature] Title Chief of Police
(date) (signature of proper local official) (town chair, village president, police chief)

~ Property Map ~



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Queso Corp
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title Name (Inc. Middle Name) Home Address Post Office & Zip Code

President/Member Zbigniew J Borowiec 603 Freeman St PO Box 399 Geneva City WI 53128
 Vice President/Member Cheryl A Borowiec 603 Freeman St PO Box 399 Geneva City WI 53128
 Secretary/Member _____
 Treasurer/Member _____
 Agent Zbigniew J Borowiec
 Directors/Managers _____

C. 1. Trade Name The Cheese Box Business Phone Number 262-248-3440
 2. Address of Premises 801 S wells st Post Office & Zip Code Lake Geneva 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Retail space 1 storage room

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 18 day of May, 2015

Stephanie Gunders
(Clerk/Notary Public)

My commission expires 4/13/18

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

[Signature]
(Additional Person(s)/Member/Manager of Limited Liability Company if any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/18/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk



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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of _____
(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
The Cheese Box
(trade name)

located at: 801 S Wells St Lake Geneva WI 53147

appoints Zbigniew J Borowiec
(name of appointed agent)

603 Freeman PO Box 399 Genoa City WI 53128
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 35 years

Place of residence last year Same as above

For: A.J.P.
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: Cheryl A Borowiec
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Zbigniew J Borowiec, hereby accept this appointment as agent for the
(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.

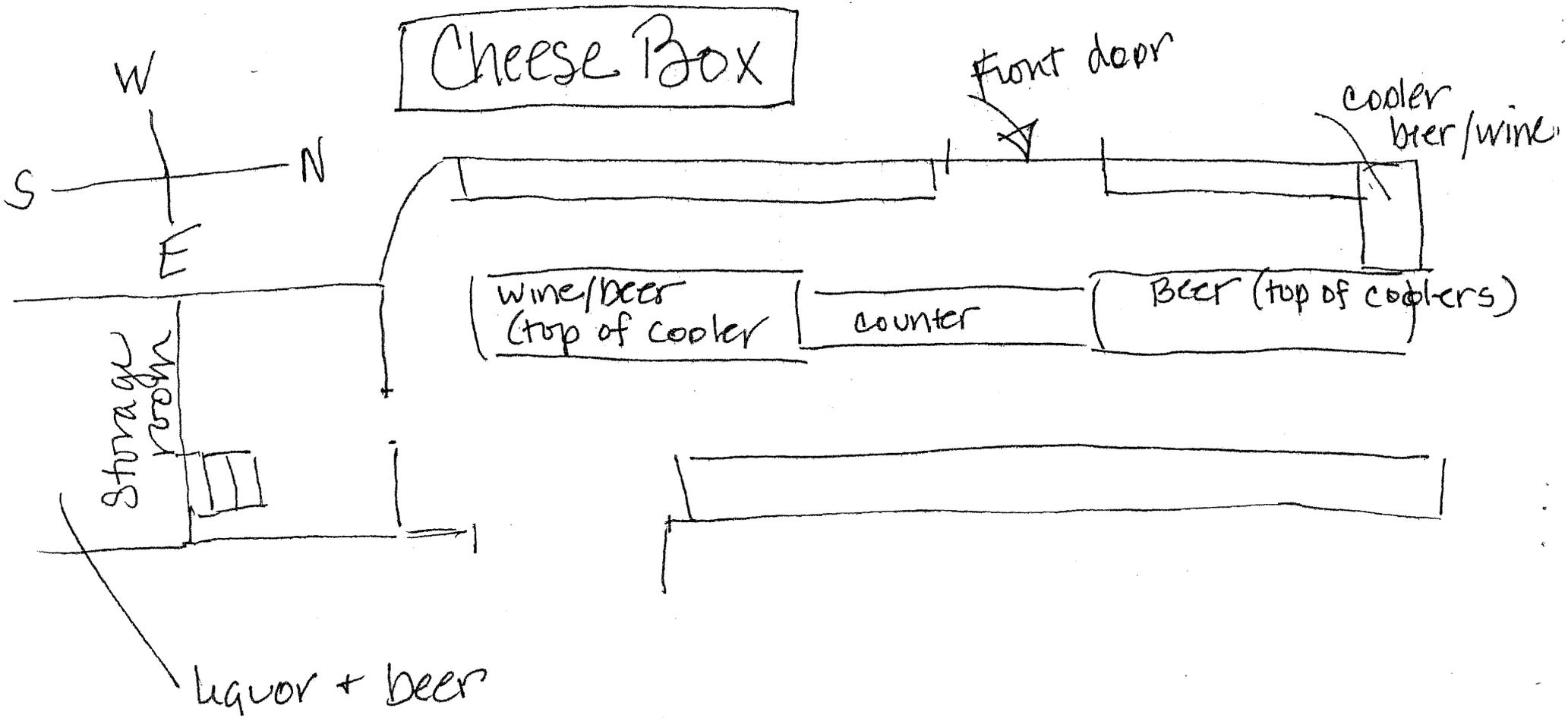
Zbigniew J Borowiec Agent's age _____
(signature of agent) (date)
603 Freeman St PO Box 399 Genoa City WI 53128 Date of birth _____
(home address of agent)

**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 5-25-15 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

OUT WELLS ST. LAKE GENOVA WI 53141



... .. 2011

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Target Corporation
 Address of Corporation/Limited Liability Company (if different from licensed premises) 33 S. 6th St., CC-1028 Minneapolis, MN 55402
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>See Attached</u>		
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Nicholas Schmidt</u>	<u>1400 Hunters Ridge Dr. 15, Genoa City, WI 53128</u>	
Directors/Managers			

C. 1. Trade Name Target Store T2348 Business Phone Number 262-248-5610
 2. Address of Premises 660 N Edwards Blvd Post Office & Zip Code Lake Geneva, WI 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Target Retail Store, Sales floor, backroom storage.
5. Legal description (omit if street address is given above): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 6 day of May, 20 15

[Signature]
(Clerk/Notary Public)

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

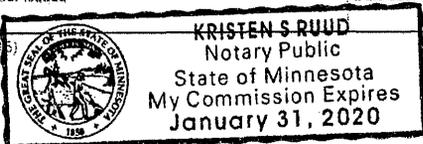
My commission expires January 31, 2020

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/17/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk



TARGET CORPORATION OFFICERS

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>% OF OWNERSHIP</u>
Rachael B. Vegas	Vice President	33 S. 6th Street CC-1028 Minneapolis, MN 55402	Negligible (Less than 1%)
Janine L. Brown-Wiese	Vice President	33 S. 6th Street CC-1028 Minneapolis, MN 55402	Negligible (Less than 1%)
Aaron E. Alt	Senior Vice President Business Development & Treasurer	33 S. 6th Street CC-1028 Minneapolis, MN 55402	Negligible (Less than 1%)

Target Corporation is a publicly held corporation

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town
 Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of Target Corporation
(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
Target Store T2348
(trade name)

located at 660 N Edwards Blvd Lake Geneva, WI 53147

appoints Nicholas Schmidt
(name of appointed agent)

1400 Hunters Ridge Dr. 15, Genoa City, WI 53128
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 8 years

Place of residence last year 1400 Hunters Ridge Dr. 15, Genoa City, WI 53128

For: Target Corporation Racquel Vega
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Nicholas Schmidt, hereby accept this appointment as agent for the
(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.

Nicholas Schmidt 5/7/15 Agent's age _____
(signature of agent) (date)
1400 Hunters Ridge Dr. 15, Genoa City, WI 53128 Date of birth _____
(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 5.25.15 by _____ Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code
DHILLON JATINDER SINGH 1173 HIDDEN CREEK LN BURLINGTON WI 53105

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company QUICK N SAVE

Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>JATINDER SINGH DHILLON</u>	<u>1173 HIDDEN CREEK LN</u>	<u>Burlington WI 53105</u>
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>JATINDER S DHILLON</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name QUICK N SAVE Business Phone Number 262-248-1988

2. Address of Premises 1231 GRANT ST Post Office & Zip Code LAKE GENEVA WI 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) FRONT OF STORE SOUTH OF CASH REGISTER BANK ROOM OFFICE

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted** of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No

b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 07 day of May, 2015
John Miller
(Clerk/Notary Public)
 My commission expires 4-1-2017

J S Dhillon
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5/8/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s) members managers of QUICK N SAVE
(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 QUICK N SAVE
(trade name)

located at 1231 GRANT ST LAKE GENEVA WI 53147

appoints JATINDER S DHILLON
(name of appointed agent)
1173 HIDDEN CREEK LN BURLINGTON WI 53105
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).
HUNNY TREE INC BURLINGTON WI / QUICK MART NEW BERLIN WI

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 13

Place of residence last year Burlington WI

For: QUICK N SAVE
(name of corporation/organization/limited liability company)

By: J Dhillon
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, JATINDER S DHILLON, hereby accept this appointment as agent for the
(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.

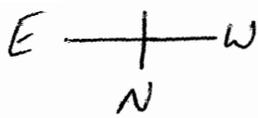
J S Dhillon 05/04/2015 Agent's age _____
(signature of agent) (date)

1173 HIDDEN CREEK LN Burlington WI 53105 Date of birth _____
(home address of agent)

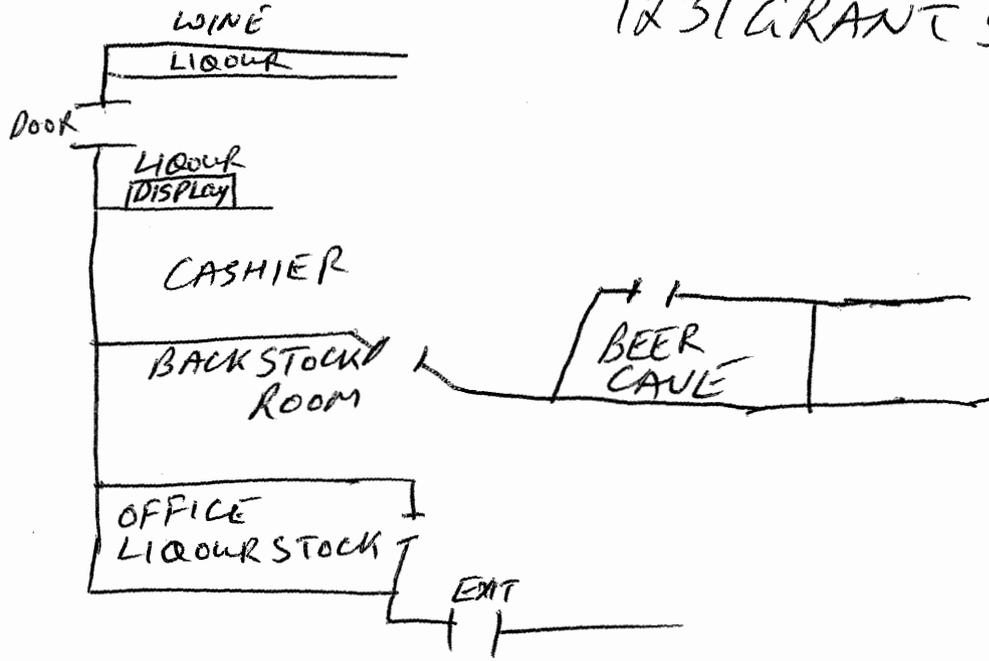
**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

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 5-25-15 by _____ Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



QUICK N SAVE
1231 GRANT ST



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code
KACZMAREK THOMAS P. 703 FOX TRAIL, ISLAND LAKE, IL 60042 (P.O. BOX 331)

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ _____

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member			
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Thomas Kaczmarek Sr</u>	<u>33105 76th St, Burlington, WI 53105</u>	
Directors/Managers			

C. 1. Trade Name ▶ GENEVA COUNTRY STORE Business Phone Number 262-248-2248

2. Address of Premises ▶ 605 Williams St Post Office & Zip Code ▶ Lake Geneva, WI 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described) Retail Sales Floor (1500 Sq Ft) w/lockable doors

5. Legal description (omit if street address is given above): Walk in cooler - shelving behind counter

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No

b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

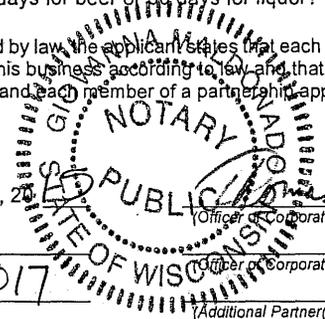
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 8th day of May, 2015
Joanne M (Clerk/Notary Public)
Thomas Kaczmarek Sr (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
April 9, 2017 (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)



TO BE COMPLETED BY CLERK.

Date received and filed with municipal Clerk <u>5/18/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of Geneva Country Store
(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 Geneva Country Store
(trade name)

located at 605 Williams St. Lake Geneva, WI 53147

appoints E Thomas Kaczmarek
(name of appointed agent)
33105 76th St Burlington, WI 53105
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).
Frosty Moose Wms Bar, WI 53191

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 40 yrs

Place of residence last year Wisconsin

For: Geneva Country Store
(name of corporation/organization/limited liability company)

By: [Signature]
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, E. THOMAS KACZMAREK, hereby accept this appointment as agent for the
(print/type agent's name)

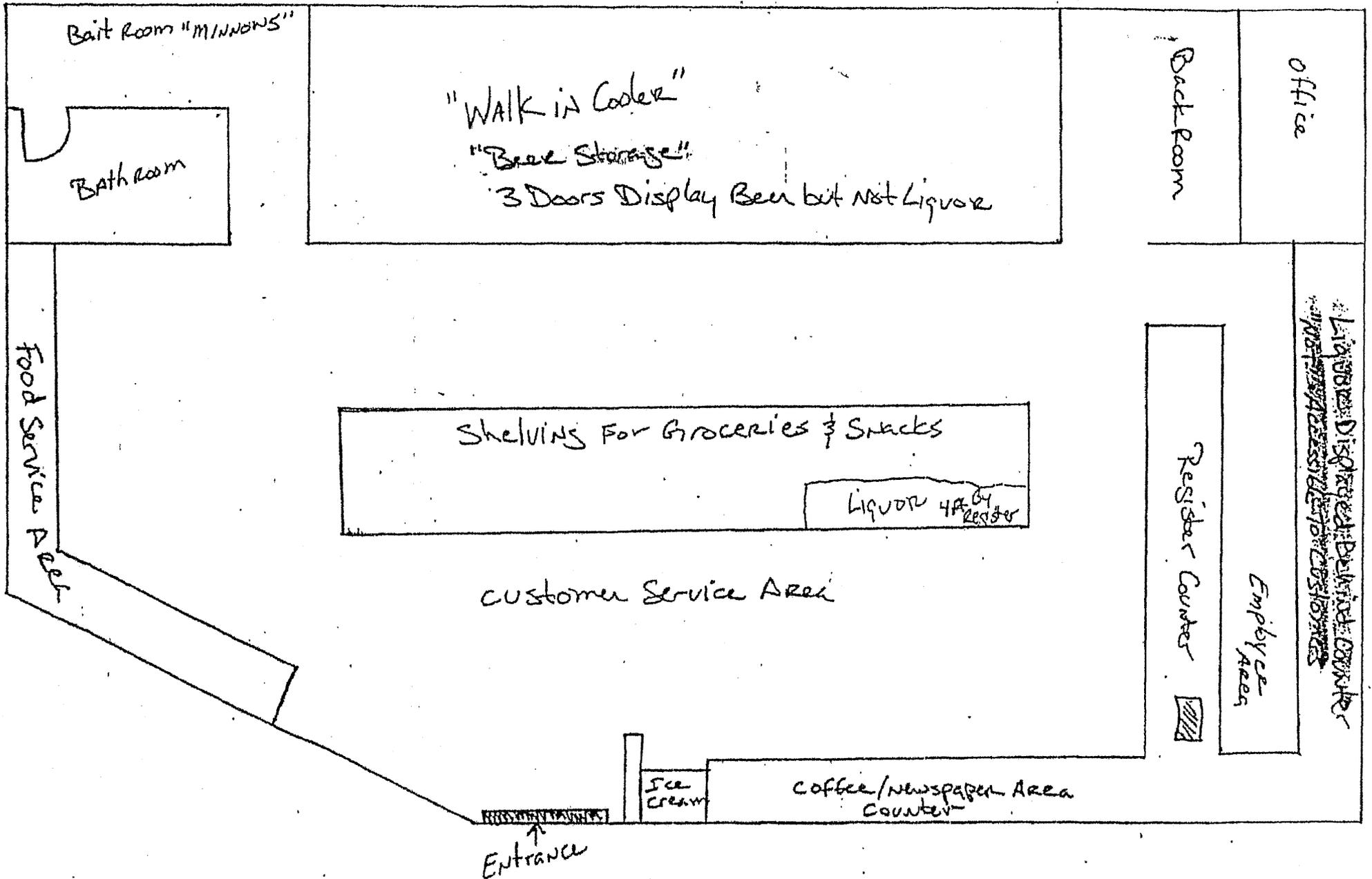
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

E Thomas Kaczmarek 5-8-15 Agent's age _____
(signature of agent) (date)
33105-76th St Burlington, Wis, 53105 Date of birth _____
(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 5-25-15 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



City of Geneva Country Store - Beer Stored in Cooler - Liquor Behind Counter

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } **City of Lake Geneva**

County of **Walworth** Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Kwik Trip, Inc.

Address of Corporation/Limited Liability Company (if different from licensed premises) PO Box 2107, La Crosse, WI 54602

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title Name (Inc. Middle Name) Home Address Post Office & Zip Code

President/Member Donald Paul Zietlow 2802 Bergamot Pl. Onalaska, WI 54650

Vice President/Member _____

Secretary/Member Steven Donald Zietlow N2448 Three Town Rd. La Crosse, WI 54601

Treasurer/Member Jillian Louise Ricker, 400 S Edward Blvd, Apt 266, Lake Geneva, WI 53147

Agent _____

Directors/Managers Donald P. Zietlow and Steven D. Zietlow

C.1. Trade Name KWIK TRIP 219 Business Phone Number 262/249-0523

2. Address of Premises 710 Williams St Post Office & Zip Code Lake Geneva 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
One-story frame construction with storage in lockable walk-in cooler & cabinetry.

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No

b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

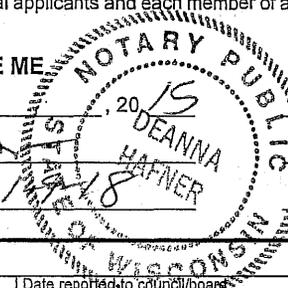
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 4th day of May
Deanna Hafner
(Clerk/Notary Public)



Donald P. Zietlow
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

Steven D. Zietlow
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)

My commission expires _____
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/8/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No. / FEIN Number:	
LICENSE REQUESTED	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ <u>100</u>
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ <u>500</u>
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town City of Lake Geneva County of Walworth
 Village of _____
 City

The undersigned duly authorized officer(s)/members/managers 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 219

located at 710 Williams St., Lake Geneva, WI 53147
(trade name)

appoints Jillian L. Ricker
(name of appointed agent)

400 S. Edward Blvd., Apt. #266, Lake Geneva WI 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No All my life

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? _____

Place of residence last year 3225 - 55th Ct. #85, Kenosha, WI 53144

For: Kwik Trip, Inc.
(name of corporation/organization/limited liability company)

By: [Signature]
(signature of Officer/Member/Manager)

And: [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Jillian L. Ricker, hereby accept this appointment as agent for the
(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.

[Signature] 5/5/15 Agent's age _____
(signature of agent) (date)

400 S. Edward Blvd., Apt. #266, Lake Geneva WI 53147 Date of birth _____
(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 5-22-15 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) TOOR NAVINDER Home Address 2864 N Maryland Ave Post Office & Zip Code Milwaukee WI 53211

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company H&P enterprises LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member			
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Dr. Kamal Singh</u>		
Directors/Managers			

C. 1. Trade Name Geneva liquors Business Phone Number 262-241-5000

2. Address of Premises 797 S Wells Street LAKE Geneva WI Post Office & Zip Code 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Inside the store on shelves, coolers

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted** of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No

b. Are **charges** for any offenses presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

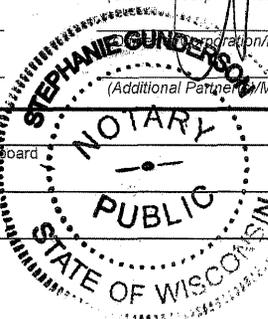
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 15 day of May, 2015
Stephanie Gunderson
(Clerk/Notary Public)
 My commission expires 4/13/18

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
[Signature]
(Additional Partner/Member/Manager of Limited Liability Company if Any)



TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5/15/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

To the governing body of: Village of Lake Geneva County of Walworth

City

The undersigned duly authorized officer(s)/members/managers of H + P Enterprises LLC
(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 Geneva Liquors
(trade name)

located at 797 S. Wells Street Lake Geneva WI 53147

appoints Kanwal B. Singh
(name of appointed agent)

1840 Prestwich Drive
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 15 years

Place of residence last year N 3369 Juniper Road Lake Geneva WI
1840 Prestwich drive

For: H + P enterprises LLC
(name of corporation/organization/limited liability company)

By: [Signature]
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Kanwal B. Singh, hereby accept this appointment as agent for the
(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.

(signature of agent) _____
(date)

Agent's age _____

(home address of agent)

Date of birth _____

**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 6-2-15 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

GENEVA

Liquors

BEER COOLER

Soda

overstock
beer

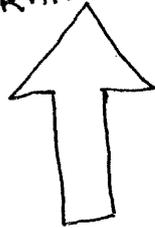
Craft
beer

Wine

Beer
Display

Display wine overstock wine Display wine

ENTRANCE



craft beer

Liquor

display
liquor

Over
Stock
Liquor

HARD

Liquor

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: July 1st 2015 ending: June 30 2015
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.:		FEIN Number:	
LICENSE REQUESTED ▶			
TYPE		FEE	
<input type="checkbox"/>	Class A beer	\$	
<input checked="" type="checkbox"/>	Class B beer	\$	100.00
<input type="checkbox"/>	Class C wine	\$	
<input type="checkbox"/>	Class A liquor	\$	
<input type="checkbox"/>	Class B liquor	\$	
<input type="checkbox"/>	Reserve Class B liquor	\$	
<input type="checkbox"/>	Class B (wine only) winery	\$	
Publication fee		\$	25.00
TOTAL FEE		\$	125.00

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code
 ▶ Strenger Samantha A. 721 Geneva Street Lake Geneva, WI 53147

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ Re-Vive LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Ms. Samantha Ann Strenger</u>	<u>721 Geneva Street Lake Geneva, WI 53147</u>	<u>WI 53147</u>
Vice President/Member	<u>Patricia Strenger</u>	<u>" "</u>	<u>" "</u>
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent ▶	<u>Samantha Strenger</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name ▶ Re-Vive Gallery Business Phone Number 262-729-4037
 2. Address of Premises ▶ 721 Geneva Street Post Office & Zip Code ▶ Lake Geneva, WI 53147

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Lounge, Foyer, gathering room, sitting room, outdoor area.

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** Yes No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on reverse side** Yes No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** Yes No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. no, just received license April 2015 Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 4th day of May, 20 15
Kabrina Wraso
(Clerk/Notary Public)

Samantha Strenger
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
Patricia Strenger
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

My commission expires _____

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/4/15</u>	Date reported to council/board <u>6/8/15</u>	Date license granted #
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village City of Lake Geneva County of Walworth

The undersigned duly authorized officer(s)/members/managers of Re-Vive LLC
(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 Re-vive Gallery and Studio
(trade name)

located at 721 Geneva Street Lake Geneva, WI 53147

appoints Samantha Strenger
(name of appointed agent)

721 Geneva Street Lake Geneva, WI 53147
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 13 years

Place of residence last year 721 Geneva Street Lake Geneva, WI 53147

For: Re-Vive LLC
(name of corporation/organization/limited liability company)

By: *Samantha Strenger*
(signature of Officer/Member/Manager)

And: *Gator J. [Signature]*
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Samantha Strenger
(print/type agent's name), hereby accept this appointment as agent for the

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.

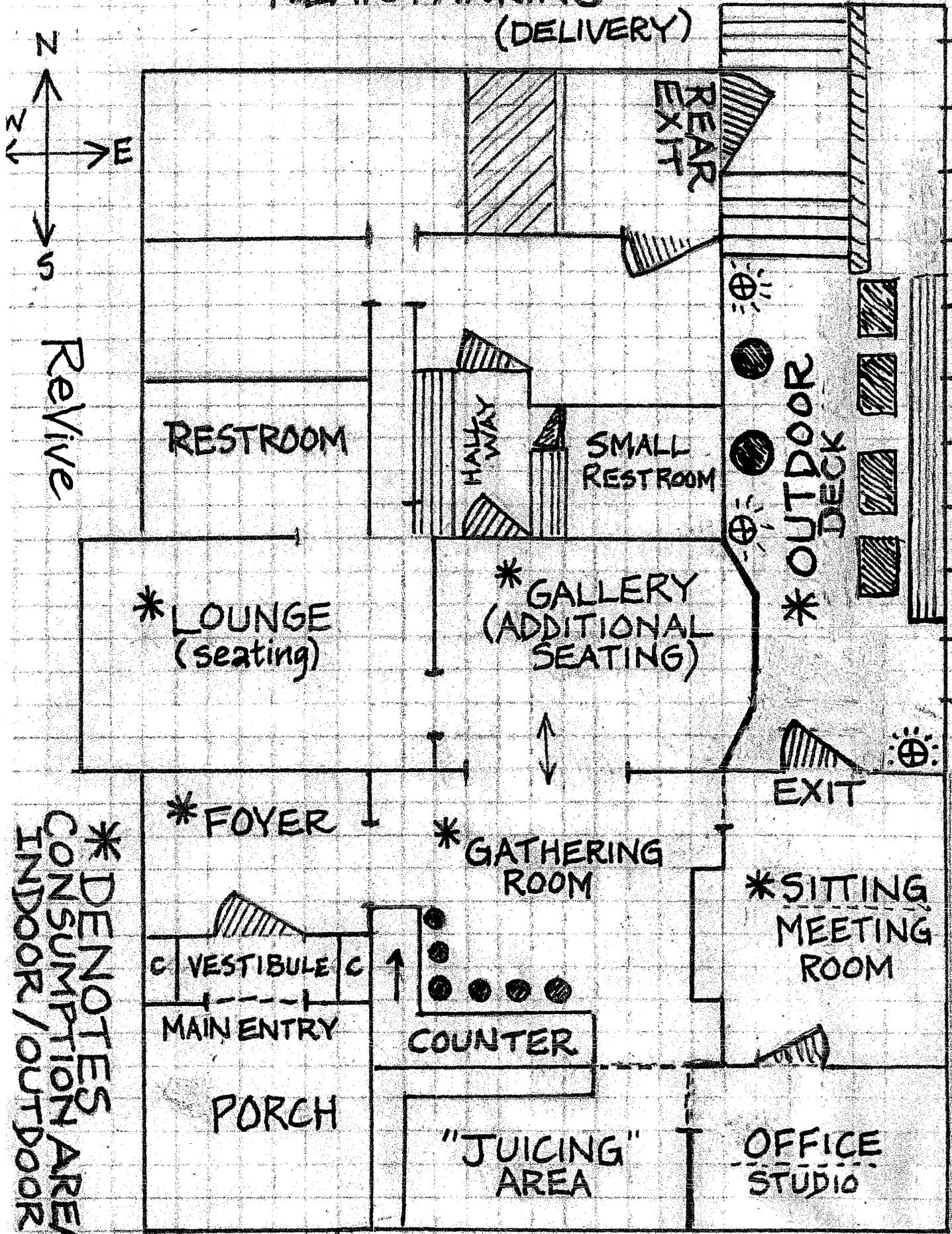
Samantha Strenger (signature of agent) ~~4/11/15~~ 5/4/15 (date) Agent's age _____

721 Geneva St. Upper Lake Geneva, WI 53147 (home address of agent) Date of birth _____

**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 5/11/2015 by *Michael S. Kamm* (signature of proper local official) Title Asst. Chief of Police
(town chair, village president, police chief)



← 5ft. FENCING
 MAY 2015

* DENOTES
 CONSUMPTION AREAS
 INDOOR/OUTDOOR

~ REVIVE GALLERY ~
 721 GENEVA STREET
 (2 DOORS WEST OF TEMPURA HOUSE)

- FRONT -

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2015 ending: 06 30 2016
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Geneva Lakes Hotel Group, LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc, Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Member - Robert Rehm</u>	<u>412 Minnetonka Way, Waterloo, WI</u>	<u>53190</u>
Vice President/Member	<u>Member - John Worswick</u>	<u>101 W. LaSalle Circle, Sioux Falls, SD</u>	<u>57106</u>
Secretary/Member	<u>Member - Dale Ferguson</u>	<u>102912 Highland Lane, Wausau, WI</u>	<u>54981</u>
Treasurer/Member			
Agent	<u>Sara Remlinger</u>		

 Directors/Managers _____

C. 1. Trade Name Comfort Suites Business Phone Number 262-248-2300
 2. Address of Premises 300 E. Main St Post Office & Zip Code _____

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Sold in lobby, pantry. Stored in 1st floor storeroom.
5. Legal description (omit if street address is given above): NA to be consumed on-site including indoor pool.
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side Yes No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. Agent - Sara Remlinger Yes No
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME
 this 5 day of May 2015
[Signature]
 My commission expires 11-24-2015
[Signature] **MARCUS CLAYE**
 NOTARY PUBLIC SOUTH DAKOTA
 (Official of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5/5/15</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>125.00</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer(s)/members/managers of Geneva Lakes Hotel Group LLC
(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 Comfort Suites, Lake Geneva
(trade name)

located at 300 E. Main Street, Lake Geneva, WI 53594

appoints Sara Remlinger
(name of appointed agent)
1105 N. Church Street, Elkhorn, WI
(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?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 38

Place of residence last year _____

For: Geneva Lakes Hotel Group, LLC
(name of corporation/organization/limited liability company)

By: John K. [Signature] - Member
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Sara Remlinger
(print type agent's name), hereby accept this appointment as agent for the

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.

[Signature] 5-8-15 Agent's age _____
(signature of agent) (date)
1105 N. Church St, Elkhorn, WI 53121 Date of birth _____
(home address of agent)

**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
 (Clerk cannot sign on behalf of Municipal Official)**

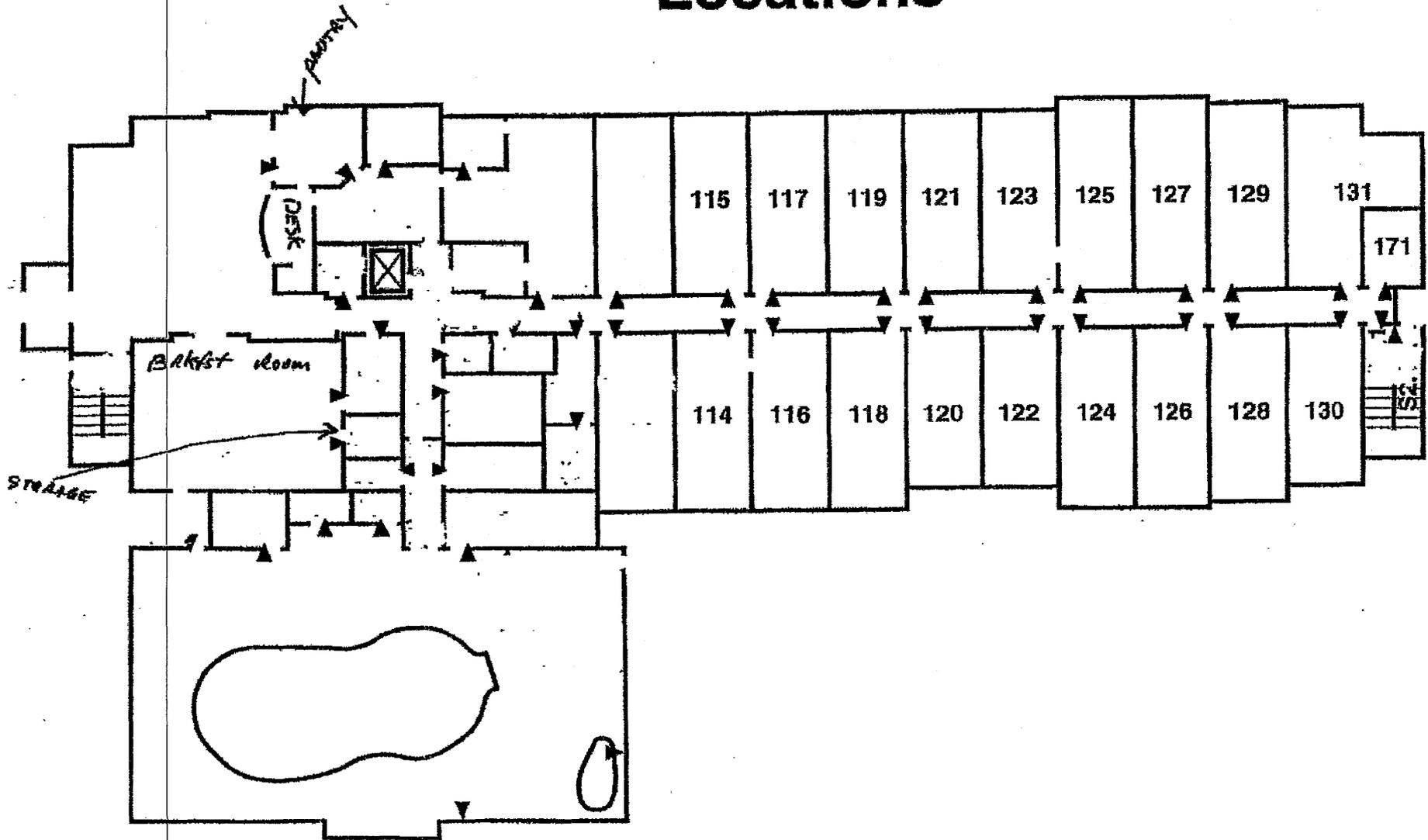
I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on _____ by _____ Title _____
(date) (signature of proper local official) (town chair, village president, police chief)

Comfort Suites - Lake Geneva, WI

First Floor

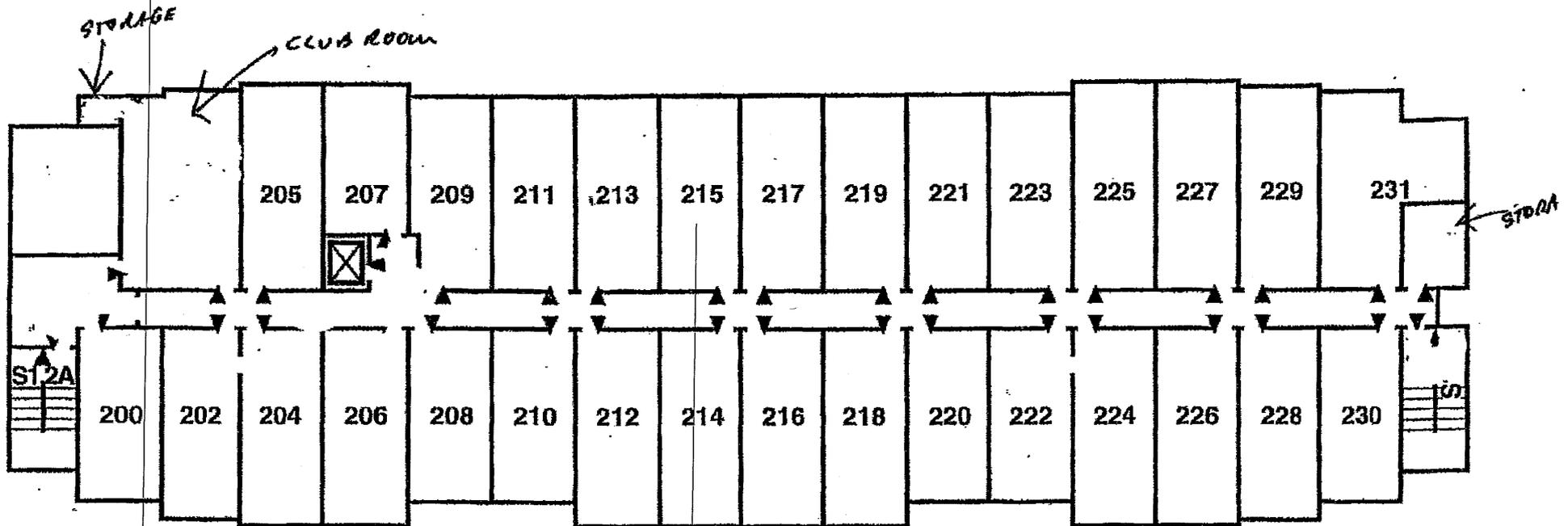
Locations



Comfort Suites - Lake Geneva, WI

Second Floor

Locations



City of Lake Geneva

Date: 6/05/2015

Time: 4:00 PM

Page: 1

Licenses Issued between 6/09/2015 and 6/09/2015

Operator's Renewals

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>	<u>Total</u>	
6/09/2015	2015 -98	Michael T. Martin Employer: Walgreen's #5600	213 Spring Dr. 351 N. Edwards Blvd.	Delavan, WI 53115 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -99	Casey Allen Coulter Employer: Walgreen's #5600	1038 Mallard Ln 351 N. Edwards Blvd.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -100	Demetrius G. Argiropoulos Employer: Lake Aire Restaurant	248 Lookout Dr 804 Main St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -101	Alexandra Helena Barkwill Employer: Queso LLC d/b/a The Cheese Box	643 Fellows Rd. 801 Wells St.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -102	Kenneth W. Lindberg Employer: American Legion Post #24	W5677 Sunset Ridge 735 Henry Street	Walworth, WI 5318 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -103	David J. Mulligan Employer: Hogs & Kisses, Inc.	1445 LaSalle St 149 Broad St.	Lake Geneva, WI 5 PO Box 536 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -104	Joni M. Sutter Employer: DCR Restaurant Group d/b/a Nex	1033 Grant Street 411 Interchange N.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -105	Brent A. Coleman Employer: Baker House	5801 Meadow Hill Ln Stone Soup LLC	McHenry, IL 60051 327 Wrigley Drive Lake Geneva, WI 53147	50.00
6/09/2015	2015 -106	Paula K. Holmes Employer: Baker House	304 S Wells St Stone Soup LLC	Lake Geneva, WI 5 327 Wrigley Drive Lake Geneva, WI 53147	50.00
6/09/2015	2015 -107	Kevin R. Dickey Employer: Prairie State Enterprises of D	416 S. Cogswell Drive #35 350 Edwards Blvd.	Silver Lake, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -108	Myles D. Mitchell Employer: Prairie State Enterprises of D	6525 373rd Ave. 350 Edwards Blvd.	Burlington, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -109	Andrew Paul Voight Employer: Prairie State Enterprises of D	W4099 Linton Rd #2 350 Edwards Blvd.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -111	Billie N. Lehr Employer: Thumb's Up, Inc.	W199 County Rd. D 260 Broad St.	Burlington, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -112	Shelly Ann Yopp Employer: Walmart Supercenter #910	7031 Clover Ct. 201 S. Edwards Blvd.	Burlington, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -113	Mary P. Stenger Employer: Walmart Supercenter #910	257 Meadow Drive 201 S. Edwards Blvd.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -114	Judith A. Horgen Employer: Walmart Supercenter #910	N3198 Poplar Rd. 201 S. Edwards Blvd.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -115	James W. Fritz Employer: Hogs & Kisses, Inc.	1332 Marion St. 149 Broad St.	Lake Geneva, WI 5 PO Box 536 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -116	Elizabeth M. Dion Employer: Sprecher's Restaurant & Pub	524 Orchard St. 111 Center Street	Burlington, WI 53 Lake Geneva, WI 53147	50.00

City of Lake Geneva

Date: 6/05/2015

Time: 4:00 PM

Page: 2

Licenses Issued between 6/09/2015 and 6/09/2015

Operator's Renewals

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>		<u>Total</u>
6/09/2015	2015 -117	Christopher C. Cummings Employer: Sprecher's Restaurant & Pub	5449 Town Hall Rd. 111 Center Street	Delavan, WI 53115 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -118	Morgan T. Foley Employer: Two Thumbs Up LLC DBA / Thumbs	118 Evelyn Lane 260 Broad Street	Unit H Lake Geneva, WI 53147	Lake Geneva, WI 5 50.00
6/09/2015	2015 -119	Michelle J. Steadman Employer: Oakfire LLC d/b/a Oakfire Pizz	N1715 Elm St. 831 Wrigley Dr	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -120	Mary Lou Gilmore Employer: Walgreen's #5600	509 Morningside Street 351 N. Edwards Blvd.	Elkhorn, WI 53121 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -121	Gweneth G. Garber Employer: The Restaurant Tempura House L	998 Timothy Dr. 306 Center St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -122	Nancy M. Cherney Employer: Walgreen's #5600	711 Ann St. 351 N. Edwards Blvd.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -123	Jessica J. Jenner Employer: DCR Restaurant Group d/b/a Nex	W3566 Park Dr. 411 Interchange N.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -124	Sue D. Spencer Employer: Walgreen's #5600	1270 Wisconsin St., #106 351 N. Edwards Blvd.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -125	Eric C. Rude Employer: DCR Restaurant Group d/b/a Nex	1445 LaSalle St. 411 Interchange N.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -126	Connie L. Howen Employer: DCR Restaurant Group d/b/a Nex	N4449 County Road H 411 Interchange N.	Elkhorn, WI 53121 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -127	Sarai R. Lopez Employer: DCR Restaurant Group d/b/a Nex	W3574 Springfield Rd 411 Interchange N.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -128	Joel D. Cassidy Employer: DCR Restaurant Group d/b/a Nex	1033 Grant Street 411 Interchange N.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -129	Amanda J. Morales Employer: DCR Restaurant Group d/b/a Nex	1705 Hwy 120 411 Interchange N.	PO Box 13 Lake Geneva, WI 53147	Springfield, WI 5 50.00
6/09/2015	2015 -130	Corey R. Crabtree Employer: DCR Restaurant Group d/b/a Nex	N2711 Theatre Rd. 411 Interchange N.	Williams Bay, WI Lake Geneva, WI 53147	50.00
6/09/2015	2015 -131	Calli A. Brellenthin Employer: DCR Restaurant Group d/b/a Nex	4948 Hickory Court 411 Interchange N.	Elkhorn, WI 53121 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -132	Daniel J. Kuhl Employer: Hogs & Kisses, Inc.	33606 Fern Drive 149 Broad St.	Burlington, WI 53 PO Box 536	Lake Geneva, WI 53147 50.00
6/09/2015	2015 -133	Shani L. Mckay Employer: Two Thumbs Up LLC DBA / Thumbs	630 Mohr Ave 260 Broad Street	Waterford, WI 531 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -134	Denise Marie Whitehead Employer: The Red Geranium Restaurant	1620 Willow Rd 393 N. Edwards Blvd.	Twin Lakes, WI 53 Lake Geneva, WI 53147	50.00

City of Lake Geneva

Date: 6/05/2015

Time: 4:00 PM

Page: 3

Licenses Issued between 6/09/2015 and 6/09/2015

Operator's Renewals

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>		<u>Total</u>
6/09/2015	2015 -135	Crystal Lynn Grace Employer: The Red Geranium Restaurant	W1338 Highland Blvd 393 N. Edwards Blvd.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -136	Pamela A. Thompson Employer: The Red Geranium Restaurant	8627 392nd Ave 393 N. Edwards Blvd.	Powers Lake, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -137	Troy A. Bartz Employer: The Red Geranium Restaurant	1703 E Norwich 393 N. Edwards Blvd.	St. Francis, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -138	Travis S. Mitchell Employer: Prairie State Enterprises of D	6525 373rd Ave. 350 Edwards Blvd.	Burlington, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -139	Lynda L. Colby Employer: Prairie State Enterprises of D	W1250 Condor Road, Box 23 350 Edwards Blvd.	Pell Lake, WI 531 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -140	James Georgalas Employer: Tuscan Tavern & Grill	529 Madison Street 430 N. Broad St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -141	Jessica L. Cercas Employer: Walgreen's #5600	N2020 County Road H 351 N. Edwards Blvd.	Lot 34 Lake Geneva, WI 53147	Lake Geneva, WI 5 50.00
6/09/2015	2015 -142	Bree Anne Schlater Employer: Walgreen's #5600	8716 Morel Drive 351 N. Edwards Blvd.	Burlington, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -143	Jennifer E. Garner Employer: Walgreen's #5600	6923 317th Ave. 351 N. Edwards Blvd.	Salem, WI 53168 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -144	Rikke L. Jepsen Employer: Walgreen's #5600	33427 Bohner Dr 351 N. Edwards Blvd.	Burlington, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -145	Barbara T. Soble Employer: Walgreen's #5600	W1249 Zenia Rd 351 N. Edwards Blvd.	P.O. Box 924 Lake Geneva, WI 53147	Pell Lake, WI 531 50.00
6/09/2015	2015 -146	Daniel Benjamin Schroeder Employer: Gino's East DBA GE Geneva, LL	713 S. Lakeshore Drive, U 300 Wrigley Drive	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -147	Michael Woodrow Tarr Employer: Su Wing's Chinese Restaurant	1148 Spyglass Court 743 North St.	Twin Lakes, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -148	Ran Si Lei Employer: Su Wing's Chinese Restaurant	W3537 Park Drive 743 North St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -149	Kristen N. Mihelich Employer: Walgreen's #5600	S42 W25050 Oak View Dr. 351 N. Edwards Blvd.	Waukesha, WI 5318 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -150	Cariese M. Gronau Employer: Walgreen's #5600	N2456 Phyllis Wheatly Dri 351 N. Edwards Blvd.	Burlington, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -151	Elizabeth L. Recob Employer: Walgreen's #5600	236 Main St. 351 N. Edwards Blvd.	P.O. Box 225 Lake Geneva, WI 53147	Walworth, WI 5318 50.00
6/09/2015	2015 -152	Linda L. Hogan Employer: Chubby Kitty LLC dba Fat Cats	W3670 Daisy Dr. 104 Broad Street	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00

City of Lake Geneva

Date: 6/05/2015

Time: 4:00 PM

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Licenses Issued between 6/09/2015 and 6/09/2015

Operator's Renewals

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>		<u>Total</u>
6/09/2015	2015 -153	Barbara C. Godan Employer: Walmart Supercenter #910	715 Tenderfoot Trail 201 S. Edwards Blvd.	Eagle, WI 53119 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -154	Kathleen Elizabeth Walker Employer: The Original Chicago Pizza Co.	279 Quail Dr 150 Center St.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -155	Benjamin Wesley Wooten Employer: The Original Chicago Pizza Co.	279 Quail Drive 150 Center St.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -156	April L. McCoy Employer: Jackson Wine LLC d/b/a Studio	N2451 Lincoln Dr. 401 Sheridan Springs Road	Burlington, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -157	Jennifer M. Odegaard Employer: Sprecher's Restaurant & Pub	823 Kendall Ln. 111 Center Street	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -158	Lexey Lee Pfenninger Employer: Champs Sports Bar & Grill	9121 396th Ave 747 Main St.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -159	Brenda M. Hausner Employer: DCR Restaurant Group d/b/a Nex	204 Vernon Street 411 Interchange N.	Williams Bay, WI Lake Geneva, WI 53147	50.00
6/09/2015	2015 -160	Chaz T. Wagner Employer: Baker House	N1235 Tombeau Rd Stone Soup LLC	Genoa City, WI 53 327 Wrigley Drive	Lake Geneva, WI 53147
6/09/2015	2015 -161	Samantha R. Vandercar Employer: Champs Sports Bar & Grill	N2020 Cty Road H 747 Main St.	Lot # 431 Lake Geneva, WI 53147	Lake Geneva, WI 5 50.00
6/09/2015	2015 -162	Beth L. Jurgensen Employer: Champs Sports Bar & Grill	942 Laurie Court 747 Main St.	Walworth, WI 5318 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -163	Melissa Ann Slagle Employer: DCR Restaurant Group d/b/a Nex	W1364 Oakwood Rd 411 Interchange N.	PO BOX 410 Lake Geneva, WI 53147	Genoa City, WI 53 50.00
6/09/2015	2015 -164	April J. Symoens Employer: Two Thumbs Up LLC DBA / Thumbs	6941 315th Ave 260 Broad Street	Salem, WI 53168 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -165	Christina M. Lewis Employer: Walgreen's #5600	2140 Ravenswood Road 351 N. Edwards Blvd.	Burlington, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -166	Rayben A. Juchems Employer: Champs Sports Bar & Grill	W1060 Rosewood Rd. 747 Main St.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -167	David W. Henchel, Jr. Employer: Prairie State Enterprises of D	400 S. Edwards Blvd., Apt 350 Edwards Blvd.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -168	Carrie Ann Liden Employer: Lake Aire Restaurant	1128 Wisconsin Street, #5 804 Main St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -169	Dawn Noel Ogren Employer: Popeye's Galley & Grog, LTD DB	240 Jackson Street 811 Wrigley Dr.	Darien, WI 53114 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -170	Laurel F. Harris-Young Employer: Chubby Kitty LLC dba Fat Cats	1023 Tolman Street 104 Broad Street	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00

City of Lake Geneva

Date: 6/05/2015

Time: 4:00 PM

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Licenses Issued between 6/09/2015 and 6/09/2015

Operator's Renewals

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>		<u>Total</u>
6/09/2015	2015 -171	Jean M. Morales Employer: Popeye's Galley & Grog, LTD DB	130 Pearson Dr. 811 Wrigley Dr.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -172	Dimitrius Anagnos Employer: Popeye's Galley & Grog, LTD DB	110 West Street, #5 811 Wrigley Dr.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -173	Michael Anagnos Employer: Popeye's Galley & Grog, LTD DB	415 Miller Court 811 Wrigley Dr.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -174	Karlene S. Bull Employer: The Red Geranium Restaurant	PO Box 265 393 N. Edwards Blvd.	Lyons, WI 53148 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -175	Marianne Goodfellow Employer: Popeye's Galley & Grog, LTD DB	6322 Second Avenue 811 Wrigley Dr.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -176	Daniel Pieratos Employer: Popeye's Galley & Grog, LTD DB	114 Hank Jay Drive, Unit 811 Wrigley Dr.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -177	Amy E. Hughes-Eling Employer: Popeye's Galley & Grog, LTD DB	1031 Bonnie Brae Lane 811 Wrigley Dr.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/09/2015	2015 -179	Nina Z. Bowler Employer: The Red Geranium Restaurant	6111 Water Street 393 N. Edwards Blvd.	Burlington, WI 53 Lake Geneva, WI 53147	50.00

City of Lake Geneva

Date: 6/05/2015

Time: 4:07 PM

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Licenses Issued between 6/08/2015 and 6/08/2015

Operator's Original

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>		<u>Total</u>
6/08/2015	2015 -90	Cheryl Lynn Ann Jarka Employer: Gleneagles LLC DBA Sopra	79 Eagle Point Road 724 W. Main Street	Fox Lake, IL 6002 Lake Geneva, WI 53147	50.00
6/08/2015	2015 -91	Elaine Marie Saunders Employer: Walgreen's #5600	W1473 Peach Rd 351 N. Edwards Blvd.	Geona City, WI 53 Lake Geneva, WI 53147	50.00
6/08/2015	2015 -92	Heather Marie Pohlman Employer: Champs Sports Bar & Grill	738 1/2 W Main Street #20 747 Main St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/08/2015	2015 -93	Linda M. Pietsch Employer: The Red Geranium Restaurant	N3394 Oak Rd. 393 N. Edwards Blvd.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/08/2015	2015 -94	Carter M. Price Employer: K&B Restaurant Group LLC DBA /	5836 Raccoon Dr 150 Center Street	Burlington, WI 53 Lake Geneva, WI 53147	50.00
6/08/2015	2015 -95	Levi Thomas Burgmeier Employer: K&B Restaurant Group LLC DBA /	1031 Mallard Lane 150 Center Street	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
6/08/2015	2015 -96	Ryne M. Sedlacek Employer: Oakfire LLC d/b/a Oakfire Pizz	1003 Teal Trail 831 Wrigley Dr	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
6/08/2015	2015 -97	Mercadies Ann Conley Employer: Lake Aire Restaurant	3131 Lockwood Blvd 804 Main St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
6/08/2015	2015 -110	Maureen J. Costello Employer: The Cove of Lake Geneva	2713 Kendall Crossing 111 Center St.	Johnsburg, IL 600 Lake Geneva, WI 53147	50.00
6/08/2015	2015 -178	Calley E. Sharkus Employer: Bruno's Liquors	727 North St Brutap, LLC	Lake Geneva, WI 5 524 Broad St., Lake Geneva	50.00

City of Lake Geneva

Date: 6/05/2015

Time: 4:07 PM

Page: 2

Licenses Issued between 6/08/2015 and 6/08/2015

Operator's Regular

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>	<u>Total</u>
Grand Totals:		Count:	20	\$500.00

PK-0
SF-0
PPK-0

CITY OF LAKE GENEVA TAXI COMPANY LICENSE APPLICATION



Please Check:

Original Application

Renewal of Current License

PLEASE FILL IN ALL BLANKS COMPLETELY, AS INCOMPLETE APPLICATIONS WILL BE REJECTED. ANNUAL LICENSE EXPIRES JUNE 30TH EACH YEAR. FEES OF \$50.00 FOR FIRST CAR AND \$25.00 PER EACH ADDITIONAL CAR ARE DUE UPON APPLICATION.

NOTE: Application must be accompanied by the following documents:

- Copy of policy of liability insurance covering all vehicles, insuring the licensee against loss from liability to the amount of \$300,000 for the injury or death of one or more persons and in the amount of \$100,000 for damage to property of others for any one accident due to negligent operation of vehicle.
- Copy of certificate of inspection signed by a reputable automobile mechanic or public garage owner certifying that the vehicle sought to be licensed is mechanically sound and in a thoroughly safe condition for the transportation of passengers and in clean, fit and good appearance.
- Taxi/Trolley Driver License Application(s) for any drivers who are not currently licensed with the City of Lake Geneva.

ANY APPLICATION SUBMITTED WITHOUT THE REQUIRED DOCUMENTATION SHALL BE CONSIDERED INCOMPLETE AND REJECTED.

BUSINESS INFORMATION

Business Name: ALL STAR CAB

Bus. Address (Physical): W1044 Evergreen Pell Lake WI

Mailing Address (if different): PO Box 396

City, State, Zip: Pell Lake WI 53157

Bus. Phone: _____ fax: _____

E-Mail: _____

Name of Liability Carrier: Venture Specialty Insurance LLC

Policy Number: _____

BUSINESS OWNER/AGENT INFORMATION

Owner/Agent Name: Richard Skipper Sr.
Owner/Agent Address: P.O. Box 396
City, State, Zip: Pell Lake, WI 53157
Phone: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS COMPLETELY

1. Have you been previously licensed to operate a taxicab company? YES NO
If Yes, please state where: Lake Geneva, WI
2. Have you ever had a license revoked? YES NO
If Yes, please explain: _____

TAXI VEHICLE INFORMATION

Total Number of Vehicles to be operated: 5

Vehicle #1		
<u>Chevy</u>	<u>White van (Astro)</u>	<u>1999</u>
Make	Model	Year
<u>6</u>	<u>239-WTT</u>	
Capacity	License Plate No.	
<u>1GNDM19W9XB149175</u>	<u>14269N7007-6</u>	
VIN	Certificate of Title No.	

APPLICANT SIGNATURE

Richard C. Skipper Sr. DATE: 4-24-15

For Office Use Only

Date Filed: <u>5/18/15</u>	Police Chief Recommendation: <u>[Signature]</u>
Receipt No: <u>C150508-1</u>	Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/>
Total Amount: <u>175⁰⁰</u>	City Attorney Approval of Liability Insurance: <u>[Signature]</u>
Forwarded to Police Chief: <u>5/13/15</u>	License Date: _____
Forwarded to City Attorney: <u>5/16/15</u>	License Number: _____
FLR Approval: _____	
Council Approval: _____	

Vehicle #2		
Ford	White Van	1993.
Make	Model	Year
15 passenger	488-TZS	
Capacity	License Plate No.	
1FBJS31H3PHB56652	12129DJ42007-8	
VIN	Certificate of Title No.	

Vehicle #3		
Ford	Blue Van	1994
Make	Model	Year
15 passenger	370 TVT	
Capacity	License Plate No.	
1FBJS31H1RHA44533	12209N3002-9	
VIN	Certificate of Title No.	

Vehicle #4		
Chevy	White Van (Astro)	2000
Make	Model	Year
6 passenger	455-UWF	
Capacity	License Plate No.	
1GNDM19W3YB215270	13214N1004-0	
VIN	Certificate of Title No.	

Vehicle #5		
Chevy	Malibu / 4dr. Sedan	2005
Make	Model	Year
4 people	971-CDY	
Capacity	* License Plate No.	
1G1ZS52FX5F320441	052920436022-7	
VIN	Certificate of Title No.	

Capacity	License Plate No.
VIN	Certificate of Title No.

APPLICANT SIGNATURE

Richard C. Kipper Sr. DATE: 5-8-15

For Office Use Only

Date Filed: <u>5-8-15</u>	Police Chief
Receipt No: <u>CS0508-1</u>	Recommendation: <u>[Signature]</u>
Total Amount: <u>\$175⁰⁰</u>	<input checked="" type="radio"/> Approved <input type="radio"/> Denied
Forwarded to Police Chief: <u>5:17:15 PM</u>	City Attorney Approval of Liability Insurance: _____
Forwarded to City Attorney: _____	
FLR Approval: _____	License Date: _____
Council Approval: _____	License Number: _____

City of Lake Geneva

Date: 6/05/2015

Time: 5:13 PM

Page: 1

Licenses Issued between 6/08/2015 and 6/08/2015

Taxi Cab Driver - Original

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>		<u>Total</u>
6/08/2015	2015 -17	Matthew Trane	311 Wells St #16	Lake Geneva, WI 5	25.00
		Employer: N & T Enterprises, Inc. D/B/A	112 S 4TH STREET	Delavan, WI 53115	

Taxi Cab Driver

City of Lake Geneva

Date: 6/05/2015

Time: 5:13 PM

Page: 2

Licenses Issued between 6/08/2015 and 6/08/2015

Taxi Cab Driver

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>	<u>Total</u>
Grand Totals:		Count:	2	\$25.00

City of Lake Geneva

Date: 6/05/2015

Time: 4:54 PM

Page: 1

Licenses Issued between 6/09/2015 and 6/09/2015

Taxi Cab Driver - Renewals

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>			<u>Total</u>
6/09/2015	2015 -18	Ronald R. Skipper, Sr. Employer: Senior Cab Plus, LLC	W1443 Highland Blvd. W3099 Krueger Rd.	P.O. Box 748 Lake Geneva, WI 53147	Pell Lake, WI 531	25.00
6/09/2015	2015 -19	Debra L. Skipper Employer: Lake Geneva Lanes	W1443 Highland Blvd. Sandal Inc.	P.O. Box 748 192 E. Main St., P.O. Box	Pell Lake, WI 531 Lake Geneva, WI 53147	25.00

Taxi Cab Driver

City of Lake Geneva

Date: 6/05/2015

Time: 4:54 PM

Page: 2

Licenses Issued between 6/09/2015 and 6/09/2015

Taxi Cab Driver

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>	<u>Total</u>
Grand Totals:		Count:	4	\$50.00

PK-0
SL-0



CITY OF LAKE GENEVA

MASSAGE ESTABLISHMENT APPLICATION

Please Check:

Original License Application

Renewal of Current License

ANNUAL LICENSE FEE

\$50.00

EXPIRES JUNE 30TH EACH YEAR

Payable to the City of Lake Geneva
Due upon application

Application must be accompanied by the following documents:

- 1) A recent photograph of the applicant and Massage Technicians clearly showing his/her head and shoulders
- 2) Copy of Massage Technician's diploma or certificate & driver's license
- 3) Listing of all Massage Technicians employed in the establishment, including name, current address and date of birth
- 4) If the applicant business is a corporation, a report including names and current addresses of all officers, directors, and stockholders owning more than ten (10) percent of stock in the corporation

Applications submitted without required documentation will be considered incomplete and rejected

BUSINESS INFORMATION

Trade Name: BELLA VISTA SUITES / HEARTLAND SPA

Corporate Name (if applicable): _____

Business Address (Physical): 335 WRIGLEY DR

Mailing Address (if different): _____

City, State, Zip: LAKE GENEVA, WI 53147

Phone: 262 2482100 Email: RESERVATIONS@

BELLAVISTASUITES.COM

Please explain the nature of services to be provided: _____

MASSAGE + FACIALS

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Legal Name: BELLA VISTA SUITES / HEARTLAND SPA

Maiden Name: _____

Address: 335 WRIGLEY

City, State, Zip: LAKE GENEVA, WI 53147

Driver's License No.: _____ Date of Birth: _____

Please provide names/addresses of all employers of the applicant during the last 3 years, including type of work performed and dates of employment:

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

YES

NO

If yes, please explain: _____

BUSINESS OWNER (APPLICANT) CRIMINAL BACKGROUND INFORMATION

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state? YES NO

If yes, please provide nature of offense, date, location, and disposition: _____



MASSAGE TECHNICIAN(S) INFORMATION

Please include information for all massage technicians

Full Legal Name: DONITA TESS

Maiden Name: _____

Address: W221 ST PETERS RD

City, State, Zip: EAST TROY 53120

Driver's License No.: _____ Date of Birth: _____

Please provide names/addresses of all employers of the applicant during the last 3 years, including type of work performed and dates of employment:

Serenity Salon Spa - Brookfield WI
Clear Waters Spa - Lake Geneva

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

YES

NO

If yes, please explain: _____

MASSAGE TECHNICIAN(S) CRIMINAL BACKGROUND INFORMATION

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state? YES NO

If yes, please provide nature of offense, date, location, and disposition: _____



The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of my knowledge and belief.

APPLICANT SIGNATURE

Archie Torres

DATE: 5/8/15

State of Wisconsin

DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES
COMMITTED TO EQUAL OPPORTUNITY IN EMPLOYMENT AND LICENSING

AESTHETICIAN

No. 3263-86

Expires: 3/31/2017

DONITA K TESS
DONITA TESS
W2211 ST PETERS RD
EAST TROY WI 53120
UNITED STATES

Heartsaver®
First Aid CPR AED



American
Heart
Association

Donita Tess

This card certifies that the above individual has successfully completed the objectives and skills evaluations in accordance with the curriculum of the AHA Heartsaver First Aid CPR AED Program. Optional completed modules are those **NOT** marked out.

Child CPR AED
10/20/2014

Infant CPR

Written test
10/2016

Issue Date

Recommended Renewal Date

State of Wisconsin

DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES
COMMITTED TO EQUAL OPPORTUNITY IN EMPLOYMENT AND LICENSING

MASSAGE THERAPIST OR BODYWORK THERAPIST

No. 11089-146

Expires: 2/28/2017

DONITA K TESS

Lakeside

SCHOOL OF
MASSAGE THERAPY

1726 N. 1st Street, Milwaukee, Wisconsin 53212

LAKESIDE SCHOOL
OF MASSAGE THERAPY

Certifies that

Donita Tess

Has satisfactorily completed 100 additional hours in Massage
Therapy

On this 17th day of June, 2011

SCHOOL ACCREDITED BY THE COMMISSION ON
MASSAGE THERAPY ACCREDITATION

Carole Ostendorf Ph.D.

Carole Ostendorf, Ph.D., Chief Executive Officer

Not valid unless gold embossed seal is present



BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Legal Name: BELLA VISTA SUITES / HEARTLAND SPA

Maiden Name: _____

Address: 335 WRIGLEY

City, State, Zip: LAKE GENEVA, WI 53147

Driver's License No.: _____ Date of Birth: _____

Please provide names/addresses of all employers of the applicant during the last 3 years, including type of work performed and dates of employment:

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

YES

NO

If yes, please explain: _____

BUSINESS OWNER (APPLICANT) CRIMINAL BACKGROUND INFORMATION

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state? YES NO

If yes, please provide nature of offense, date, location, and disposition: _____

MESSAGE TECHNICIAN(S) INFORMATION

Please include information for all massage technicians

Full Legal Name: Traci Lee Marnul

Maiden Name: _____

Address: 305 Cook St Apt A

City, State, Zip: Lake Geneva WI 53147

Driver's License No. _____ Date of Birth: _____

Please provide names/addresses of all employers of the applicant during the last 3 years, including type of work performed and dates of employment: .

Bella Vista Suites - 335 Wrigley Dr, LG - massage therapist ^{12/2013}
Clear Waters Salon ^{spa} 734 Main St, LG - massage therapist ^{to Present}
_{04/2014 to 03/2015}

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

YES NO

If yes, please explain: _____

MESSAGE TECHNICIAN(S) CRIMINAL BACKGROUND INFORMATION

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state? YES NO

If yes, please provide nature of offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of my knowledge and belief.

APPLICANT SIGNATURE

Isaac Manuel DATE: 5/7/2015



Associated Bodywork & Massage Professionals

800-458-2267

www.abmp.com • info@abmp.com

25188 Geneva Trail Road, Suite 200, Golden, Colorado 80401

Name: Traci Marnul
Level: Professional
ID #: 778295
Active: 8/26/2014
Expire: 8/25/2015

THIS CARD VERIFIES MEMBERSHIP WITH ABMP.

State of Wisconsin

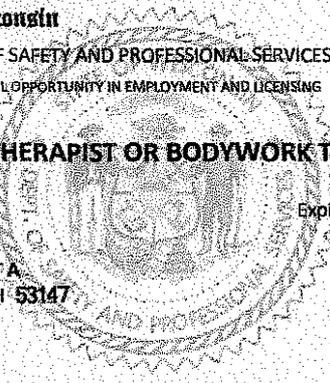
DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES
COMMITTED TO EQUAL OPPORTUNITY IN EMPLOYMENT AND LICENSING

MASSAGE THERAPIST OR BODYWORK THERAPIST

No. 12583-146

Expires: 2/28/2017

TRACI L MARNUL
305 COOK ST APT A
LAKE GENEVA WI 53147
UNITED STATES



The person whose name appears on this document has complied with the provisions of the Wisconsin Statutes and holds the credential specified on the front of this card. To verify the current status of this credential, use "Lookup a License" at dps.wi.gov.

The named person has complied with Wisconsin Statutes and holds the credential specified. *Signature:*

Ch 440.11, Wis Statutes, requires you to notify the Department of a name or address change within 30 days. Please submit corrected information via the web at dps.wi.gov or by mail to DSPS at PO Box 8935, Madison WI 53708-8935.

Cortiva Institute - Chicago

School of Massage Therapy

Upon the recommendation of the faculty, the school hereby confers upon

Traci L. Marnul

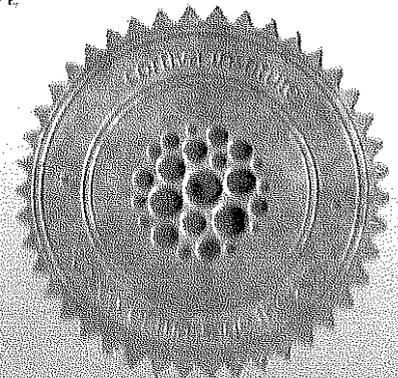
the

Professional Massage Therapy Diploma

Having successfully completed a 750 hour training in Massage Therapy
on June 20th, 2011 at 17 North State Street, 5th Floor, Chicago, Illinois by

Paula Paimano
Director of Education

[Signature]
President



12

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Legal Name: BELLA VISTA SUITES / HEARTLAND SPA

Maiden Name: _____

Address: 335 WRIGLEY

City, State, Zip: LAKE GENEVA, WI 53147

Driver's License No.: _____ Date of Birth: _____

Please provide names/addresses of all employers of the applicant during the last 3 years, including type of work performed and dates of employment:

- Masterpiece Flower Co - LAKE Geneva WI Arranger
- SAMANTHA MINDHAM
- Steve Roy SOPRA LAKE Geneva WI

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

YES

NO

If yes, please explain: _____

BUSINESS OWNER (APPLICANT) CRIMINAL BACKGROUND INFORMATION

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state? YES NO

If yes, please provide nature of offense, date, location, and disposition: _____

MESSAGE TECHNICIAN(S) INFORMATION

Please include information for all massage technicians

Full Legal Name: Sylvanna R. Leigkniger

Maiden Name: _____

Address: N 1670 Maple ST Upper

City, State, Zip: LAKE Geneva WI 53147

Driver's License No.: _____ Date of Birth: _____

Please provide names/addresses of all employers of the applicant during the last 3 years, including type of work performed and dates of employment:

MASTERPIECE FLOWER CO - LAKE GENEVA ARRANGER

SOPRA LAKE GENEVA, WI SERVER

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

YES

NO

If yes, please explain: _____

MESSAGE TECHNICIAN(S) CRIMINAL BACKGROUND INFORMATION

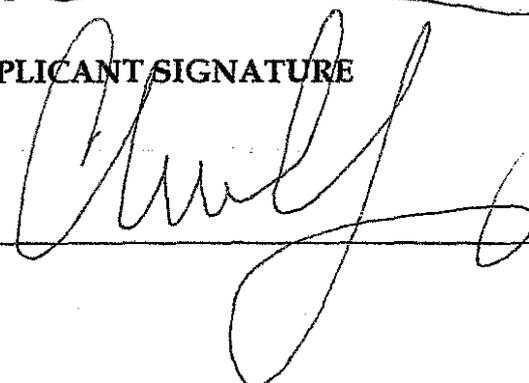
Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state? YES NO

NO

If yes, please provide nature of offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of my knowledge and belief.

APPLICANT SIGNATURE



DATE:

5-8-15

EXPIRES: 02/28/2015

NO. 13080 - 146

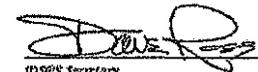
The State of Wisconsin
Department of Safety and Professional Services
MASSAGE THERAPY AND BODYWORK THERAPY AFFILIATED CREDENTIALING BOARD

Hereby certifies that
SYLVANNA R LEIGHNINGER
was granted a license to practice as a
MASSAGE THERAPIST OR BODYWORK THERAPIST
in the State of Wisconsin in accordance with Wisconsin Law
on the 4th day of September in the year 2014.

The authority granted herein must be renewed each biennium by the granting authority.

In witness thereof, the State of Wisconsin
Massage Therapy and Bodywork Therapy Affiliated Credentialing Board
has caused this certificate to be issued under
the seal of the Department of Safety and Professional Services




Denise Ross
Secretary


Elizabeth Kirzanesky
Chairperson


[illegible]
Secretary

This certificate was printed on the 11th day of September in the year 2014

Wisconsin Department of Safety and Professional Services

Web Applications

Wisconsin Credential Lookup

Credential Summary - Details

Credential Summary for 13080-146

Name:	Leighninger, Sylvanna R
Credential Type:	MASSAGE THERAPIST OR BODYWORK THERAPIST (146)
Credential Number:	13080-146
Location:	LAKE GENEVA, WI
License Type:	regular
Status	License is current (Active)
Eligible To Practice:	credential license is current
First Fee Received:	YES

[Details](#)

[Requirements](#)

[Payments](#)

[Orders](#)

[Relationships](#)

[Details](#)

License current through:	02/28/2017
Granted date:	09/04/2014
Multi-state:	N
Orders:	NONE
Specialties:	NONE
Other Names:	NONE

Consistent with JCAHO and NCQA standards for primary source verification.

Data on this page is refreshed hourly.

[Send Questions or Comments to dsps@wisconsin.gov](mailto:dsps@wisconsin.gov)

18

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Legal Name: BELLA VISTA SUITES / HEARTLAND SPA

Maiden Name: _____

Address: 335 WRIGLEY

City, State, Zip: LAKE GENEVA, WI 53147

Driver's License No.: _____ Date of Birth: _____

Please provide names/addresses of all employers of the applicant during the last 3 years, including type of work performed and dates of employment:

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

YES

NO

If yes, please explain: _____

BUSINESS OWNER (APPLICANT) CRIMINAL BACKGROUND INFORMATION

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state? YES NO

If yes, please provide nature of offense, date, location, and disposition: _____

MESSAGE TECHNICIAN(S) INFORMATION

Please include information for all massage technicians

Full Legal Name: Stacey Seacord-Peters

Maiden Name: _____

Address: 8716 246th CT

City, State, Zip: Salem WI 53149

Driver's License No.: _____ Date of Birth: _____

Please provide names/addresses of all employers of the applicant during the last 3 years, including type of work performed and dates of employment:

Business partner
massage therapist
clinic supervisor

- Awaken higher brain living, Lake Geneva, WI Current
- Dr. Zhou's Acupuncture, Wellness Clinic, MILWAUKEE
- West Healing Arts Institute, Wausau, WI

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

YES NO

If yes, please explain: _____

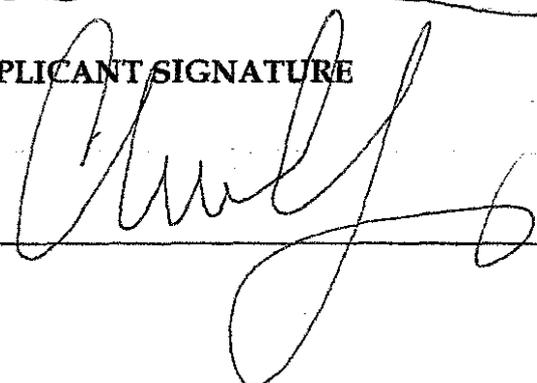
MESSAGE TECHNICIAN(S) CRIMINAL BACKGROUND INFORMATION

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state? YES NO

If yes, please provide nature of offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of my knowledge and belief.

APPLICANT SIGNATURE



DATE: 5-8-15



Stacey L. Seacord-Peters

has demonstrated the fundamental knowledge
required for competency in this profession and
been awarded the designation

**Nationally Certified in Therapeutic
Massage and Bodywork**

[Signature]
Chair

2011
Certified Since

[Signature]
Chair-Elect

606068-11
National Certification Number

8/18/2015
Expiration Date

24

State of Wisconsin

DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES
COMMITTED TO EQUAL OPPORTUNITY IN EMPLOYMENT AND LICENSING

MASSAGE THERAPIST OR BODYWORK THERAPIST

No. 11245-146

Expires: 2/28/2017

STACEY L SEACORD-PETERS
8716 246TH CT
SALEM WI 53168
UNITED STATES



East-West Healing Arts Institute, Inc.

Hereby Grants a Diploma to

Stacey L Seacord-Peters

Asian Bodywork and Therapeutic Massage TM
Certifying the Successful Completion of 800 Hours in Eastern
& Western Massage Theories & Techniques Program and
Successfully Passing the Required Examinations.

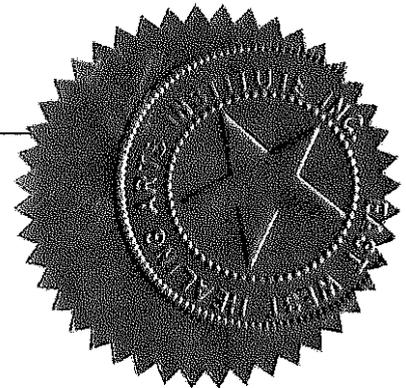


XiPing Zhou, M.D.O.M., L.Ac.
President



5-1-2011

Date of Completion



East-West Healing Arts Institute, Inc., 6425 Normandy Lane, Madison, Wis. 53719
Approved by the Wisconsin Educational Approval Board
Institutional Member of the Association of Bodywork and Massage Professionals (ABMP)

Please provide names/addresses of all employers of the applicant during the last 3 years, including type of work performed and dates of employment:

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

YES

NO

If yes, please explain: _____

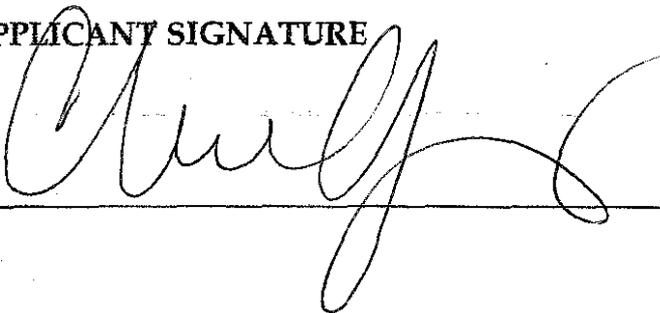
MESSAGE TECHNICIAN(S) CRIMINAL BACKGROUND INFORMATION

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state? YES NO

If yes, please provide nature of offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of my knowledge and belief.

APPLICANT SIGNATURE



DATE: 5-8-15

For Office Use Only

Date Filed: 5/8/15

Receipt No: C150508-39

Total Amount: 50.00

Forwarded to Police Department: 5/14/15

Background Completed: _____

Police Chief Recommendation: [Signature]

~~Approved~~

Denied

Fingerprinted by LGPD: _____

Fingerprinting required for new establishments and Massage Technicians

Forwarded to Building Department: _____

Building Inspector Approval: _____

Inspector approval required for new establishments

FLR Approval: _____

Council Approval: _____

License Issued: _____

License Number: _____

Copied to: Building & Zoning

Police Chief

Fire Chief

ORDINANCE 15-05

AN ORDINANCE AMENDING CHAPTER 2, ADMINISTRATION, ARTICLE VI, FINANCE, DIVISION 1, GENERALLY, SECTION 2-345, CAPITAL IMPROVEMENT REFERENDUM FOR CITY CAPITAL EXPENDITURES ABOVE \$1,050,000 OR MORE OF THE MUNICIPAL CODE OF THE CITY OF LAKE GENEVA, WISCONSIN

The Common Council of the City of Lake Geneva, Wisconsin, does hereby ordain as follows:

1. That Section 2-345 of Chapter 2 of the Municipal Code of the City of Lake Geneva, Wisconsin is hereby amended to read as follows:

Sec. 2-345. Capital Improvement referendum for City capital expenditures of \$1,500,000 or more.

Prior to the start of any physical construction of any municipally financed (in whole or in part) project requiring a City capital expenditure which aggregates \$1,500,000 or more, the City Council shall submit to the electorate a binding referendum for approval of the project. Failure of the binding referendum shall preclude the City from proceeding with the project. The wording of any referendum shall provide the specific purpose, location and cost of the project. Nothing in this provision shall be construed to preclude the City from exercising its role in the planning or design of such publicly financed projects. The City shall be precluded from intentionally dividing up a project so that the total amount is less than \$1,500,000. A project is defined as work that can be bid and contracted separately and requires no other work to be operable or complete. Capital expenditures for new utilities, and maintenance, repair or replacement of existing utilities or other infrastructure, or pursuant to existing contractual obligations or legal mandates shall be exempt from this section. Effective as of the date of this ordinance amendment, the spending limit amount will be increased by 2.5% on an annual basis.

2. That this ordinance shall take effect upon passage and publication, as provided by law.

Adopted, passed, and approved by the Common Council of the City of Lake Geneva, Walworth County, Wisconsin, this _____ day of June, 2015.

JAMES R. CONNORS, Mayor

Attest:

Sabrina Waswo, City Clerk

First Reading: 5/26/2015
Second Reading: 6/8/2015
Adopted:
Published:

ORDINANCE 15-06

AN ORDINANCE AMENDING CHAPTER 46, NUISANCES, ADDING ARTICLE III, ABANDONED PROPERTY, AND SEC. 46-10, DISPOSAL OF ABANDONED PROPERTY OF THE LAKE GENEVA MUNICIPAL CODE

The Common Council of the City of Lake Geneva, Wisconsin, does hereby ordain as follows:

- 1. That the Municipal Code of the City of Lake Geneva, Wisconsin is hereby amended by adding ARTICLE III, Abandoned Property, and a section to be numbered 46-10, which Article and section shall reads as follows:

**ARTICLE III
Abandoned Property**

SEC. 46-10. Disposal of Abandoned Personal Property.

(a) Abandoned personal property which has been in the possession of the City Police Department for a period of more than 30 days may be disposed of by the City Police Department by public auction, private sale, or other means of disposal deemed to be in the best interest of the City as determined by the City of Lake Geneva Police and Fire Commission.

(b) Any disposition of abandoned personal property not completed by public sale shall require the City of Lake Geneva to maintain an inventory of said property, recording the date and method of disposal, the consideration received for the property, and the name and address of the person taking possession of the property. This inventory shall be kept as a public record for a period of seven (7) years from the date of disposal of said property.

- 2. That this ordinance shall take effect upon passage and publication, as provided by law.

Adopted, passed, and approved by the Common Council of the City of Lake Geneva, Walworth County, Wisconsin, this _____ day of _____, 2015.

JAMES R. CONNORS, Mayor

Attest:

SABRINA WASWO, City Clerk

First Reading: 05/26/15
Second Reading: 06/08/2015
Adoption: _____
Published: _____

City of Lake Geneva
CD and CDARS Investments
6/4/2015

<u>Bank</u>	<u>Amount Invested</u>	<u>Time Period</u>	<u>% rate</u>	<u>Maturity Dates</u>	<u>Fund</u>	<u>#</u>
<u>BMO Harris Bank</u>						
Regular CD	\$ 463,302.57	9 months	0.15	08/30/15	TIF 4	7755715319
Regular CD	\$ 143,818.73	13 months	0.35	06/21/16	TIF 4	46150170
Sub-Total	\$ 607,121.30					
<u>Peoples Bank</u>						
Regular CD	\$ 65,000.00	15 months	0.00	09/02/16	TIF 4	12860
Sub-Total	\$ 65,000.00					
<u>Associated Bank</u>						
Regular CD	\$ 314,480.01	6 months	0.29	06/10/15	TIF 4	2910552864
Regular CD	\$ 300,000.00	12 months	0.33	05/23/16	TIF 4	2910680772
Sub-Total	\$ 614,480.01					
<u>Town Bank</u>						
Regular CD	\$ 310,866.67	6 months	0.15	08/09/15	TIF 4	10018
Regular CD	\$ 302,398.20	12 months	0.25	05/27/16	TIF 4	89437
Sub-Total	\$ 613,264.87					
TOTAL invested	\$ 1,899,866.18					
Interest to Re-invest	TB	\$ 3,393.68				
		\$ 1,903,259.86				

Resolution 15-R31

The Common Council of the City of Lake Geneva hereby establishes the following Wages, Salaries and Benefits for the following Non-Represented and Part-time (Non-Seasonal) Employees for the 2015 Budget Year:

Position	2014 Annual or Hourly Rate	11 Holidays Pay	Clothing Allowance	Supervisor Pay	2014 Total Annual Wage/Salary /Benefit PAID	% Inc	2015 Total Annual Wage/Salary/ Benefit with increase
Full Time Contracted Staff:							
City Administrator	94,981.00				94,981.00	per contract	103,000.00
City Clerk	45,000.00				45,000.00	per contract	50,000.00
Comptroller	68,500.00				68,500.00		
Building & Zoning Administrator	63,000.00				63,000.00		
Assistant Director of Public Works	70,000.00				70,000.00		
Parking Manager	45,000.00				45,000.00		
Police Chief	87,932.00	3,720.20	850.00		92,502.20		
Assistant Police Chief	81,679.93	3,455.69	850.00		85,985.62		
Police Lieutenant	72,689.55	3,075.33	850.00		76,614.88		
Police Sergeant Hall	63,698.46	2,879.57	850.00	900.00	68,328.03		
Police Sergeant Way	63,491.63	2,870.22	850.00	900.00	68,111.85		
Police Sergeant Derrick	63,429.58	2,867.41	850.00	900.00	68,046.99		
PD Communications Supervisor	47,366.55	2,141.26	375.00	900.00	50,782.81		
PD Administrative Assistant	45,000.00	1,903.85	375.00		47,278.85		
Full time Non-Contracted Staff:							
Street Dept. Working Foreman	22.81		600.00			1.5%	23.1522
Street Dept. Arborist	22.31		600.00			1.5%	22.6447
Cemetery Sexton	21.46		600.00			1.5%	21.7819
Other Street Workers & City Hall Maint	21.31		600.00			1.5%	21.6297
Financial Analyst/Treasurer	20.00					1.5%	20.3000
Municipal Court Clerk	17.12					1.5%	17.3768
Assistant City Clerk	17.00					1.5%	17.2550
Parking Clerk & Front Counter Clerk	16.00					1.5%	16.2400
Building/Zoning Admin Assistant	15.50					1.5%	15.7325
Dispatcher - Start	14.9467	+ 93.5 hrs	375.00			1.5%	15.1709
Dispatcher - Year 1	16.7854	+ 93.5 hrs	375.00			1.5%	17.0372
Dispatcher - Year 2	17.8098	+ 93.5 hrs	375.00			1.5%	18.0769
Dispatcher - Year 3	18.8353	+ 93.5 hrs	375.00			1.5%	19.1178
Dispatcher - Year 4	20.0043	+ 93.5 hrs	375.00			1.5%	20.3044
PD Data Entry - Start	14.8626	+ 93.5 hrs	375.00			1.5%	15.0855
PD Data Entry - Year 1	16.6910	+ 93.5 hrs	375.00			1.5%	16.9414
PD Data Entry - Year 2	17.7096	+ 93.5 hrs	375.00			1.5%	17.9752
PD Data Entry - Year 3	18.7294	+ 93.5 hrs	375.00			1.5%	19.0103
PD Data Entry - Year 4	19.8918	+ 93.5 hrs	375.00			1.5%	20.1902

Adopted this 8th day of June, 2015.

JAMES R. CONNORS, Mayor

ATTEST:

SABRINA WASWO, City Clerk

**CITY OF LAKE GENEVA
WAGE RAISE HISTORY**

<u>Year</u>	<u>Utility</u>	<u>Library</u>	<u>Council</u>	<u>Police Union</u>
2015	2%			
2014	2%	3%	2%	2%
2013	2%	2.3%	2%	2%
2012	3%	-	Stipend only	1%
2011	2%	-	-	-
2010	-	1%	1%	1%
2009	3.5%	2%	3%	3%
	14.5%	8.3%	8.0%	9.0%

SPECIAL CITY COUNCIL MEETING – BUDGET PUBLIC HEARING

MONDAY, NOVEMBER 17, 2014 – 5:00 PM

COUNCIL CHAMBERS, CITY HALL

Mayor Connors called the meeting to order at 5:02 p.m.

The Pledge of Allegiance was led by City Clerk Waswo.

Roll Call. Present: Mayor Connors, Aldermen Chappell, Wall, Kordus, Hill, Kehoe, Hedlund, Kupsik and Lyon. Also present: City Administrator Jordan, City Attorney Draper, Comptroller Pollitt and City Clerk Waswo.

Public hearing and Adoption of the 2015 Operating and Capital Budget for the City of Lake Geneva.

Administrator Jordan stated there were a couple changes since the budget was published in the paper. In speaking with the auditor, he made a couple recommendations. The first was moving the cemetery from the general property tax and putting it under the cemetery fund. The second was moving the equipment replacement fund from the general property tax into a separate category. There was also \$4,300 put into contingency. Mr. Jordan stated he is concerned about setting aside money for the equipment replacement and thinks money needs to be put aside for it now. At this time, there is \$135,000 in the fund. Mr. Jordan also stated the mill rate did not go up. Mayor Connors stated the cemetery funding had always been in the budget at \$150,000, it just is shown under a separate line item, which Mr. Jordan confirmed.

Public Hearing Comments

Terry O'Neill, 954 George Street, stated his concerns on the budget. He said that most important item is the TIF Fund. He commended Mayor Connors on his letter addressing the capital equipment problem and the steps taken towards a solution. He was also concerned with why the 2014 property tax 9 month actual number is listed at 1½ million dollars higher than the 12 month number at the end. Also stated his concerns with the projected room tax amount and believes the amount listed is optimistic as there has been a steady decline in room tax. He further stated he believes there is a decrease in people visiting and staying overnight in the city.

Kupsik/Kordus motion to close the public hearing. Unanimously carried.

Resolution 14-R44, a resolution approving and adopting the 2015 operating and capital budgets for the City of Lake Geneva

Comptroller Pollitt said the room tax item that Mr. O'Neill referenced did drop in 2013. When the Cove was taken over, the prior entity did not pay their last three quarters of room tax, which the city took a hit on, causing the \$20,000 drop. She stated she feels confident that we will finish the year at \$450,000. Mayor Connors noted we typically under budget and finish the year higher.

Ms. Pollitt commented on the other item Mr. O'Neill referenced about the 9 months being higher. She stated the 9 month figure is higher as the funds have not been segregated out of the general fund, which will be before the end of the year. These amounts are the debt service portion, \$90,000 to capital projects and the Library's portion.

Administrator Jordan stated the money generated for the Equipment Replacement Fund comes from the parking ticket increase, the beach pass increase, the increase in construction in the city and the re-evaluation.

Alderman Hill stated we had a shortage of roughly \$66,000 and through the budget workshops, staff was able to balance the budget by raising parking tickets from \$12 to \$20 and an administrative fee of \$3.00 per beach pass. We have since learned through the annual re-evaluation that our assessed value has gone up, which is what created the revenue of \$130,000 that we didn't know we had before, that is now going into the equipment replacement fund. Mr. Jordan stated the revenues that were increased came to \$115,000 and the assessed value if the difference between that and what we are showing.

Ms. Hill stated she has no problem with the \$3 beach passes. She believes the hike on the parking increase is a little severe. She stated the one thing she is really concerned about is that the budget includes a 1.5% raise for staff. She feels the staff works harder every year with less and by far is our biggest asset. She said the 1.5% does not cover the cost of living and would like to see a 2% increase for staff. She appreciates having a goal for self sufficiency regarding the equipment replacement fund; however, she doesn't believe it is realistic to fully fund a \$871,000 equipment replacement fund. She stated she would rather take care of our most important aspect, our employees, and increase the raise to 2% for staff.

Alderman Jordan stated the equipment replacement fund is not going to be funded immediately, but stated it could be close from the funds from the TIF 4, when it closes, and also when the property sells on Edwards Boulevard. He stated if council chooses to do the 2% raise for employees, the other half percent could come from the contingency.

Alderman Kehoe asked about other permits on the operating budget. Comptroller Pollitt stated those are special event permits, street use permits and banner permits, which has been budgeted at a lower amount with the discussion about the BID requesting waiver of those fees. Mr. Jordan stated all our fees are looked at in the beginning of the year for adjustments either up or down. Alderman Kehoe stated she is in favor of raising event permit fees to bring in revenue.

Alderman Chappell stated beach passes for our residents have always been complimentary and creating a new fee that will only generate \$24,000 is not the best avenue to generate revenue at this time. She understands increasing the fine for parking tickets as it is a fee that already exists, but she is not in favor of creating a whole new fee. She also stated she doesn't feel our residents are aware of the increase. Mayor Connor noted that the beach tag is a user fee and if a person doesn't use the beach, they do not pay anything. He stated page 27 of the budget shows the cost to operate the beach at almost \$150,000 between employees and the Water Safety Patrol.

Alderman Hill stated she doesn't believe a complimentary beach pass is a given right and would like to get creative in creating new fees. She stated the council has to find a way to balance the budget and would prefer to do it conservatively, but the beach is an expensive line item. Alderman Chappell stated she feels this fee is hurting moms with children and believes the beach is another public space, like our parks, that should remain free.

Alderman Kordus stated the beach is not free, as Ms. Hill pointed out, and there is a large budget that is paid for by the taxpayers. He stated the beach tag is not necessarily a user fee; it is a fee that is going to cover the cost of the beach tag and the cost to administer it. The city still is not making a profit off of the beach passes. Mr. Kordus stated we are not balancing the budget; we are just covering a small expense and passing it onto the people who are using it. The City gives out about 9,000 beach passes per year and we don't even have 8,000 residents in the city, which shows there is way more passes being issued than residents in the city. He stated it is only fair to pass the cost of printing the passes and administering the program onto those people who are using it, rather than adding an additional burden onto the taxpayers who are not using it. He stated he doesn't feel this is a consequential amount.

Ms. Chappell stated she is concerned that charging the residents \$3 for a beach tag was to balance the budget and feels this is nickel and diming our residents.

Administrator Jordan stated all other municipalities but one are charging an average of \$8 to \$10 dollars for beach tags. Alderman Kordus stated this was not a willy-nilly fee that was tossed out there to balance the budget. He stated they looked at different items and the cost to administer these items. He stated there are several other items that do not come into play this year that were not addressed, however, the beach was just one of those that was low hanging fruit.

Alderman Hill stated she is curious to see how the rest of the council feels about a 2% increase for our staff and if the monies are available. Ms. Pollitt stated the funds are available in contingency and that the budget was originally presented with a 2% raise, which was knocked down at the finance level to 1.5%. Ms. Hill noted this was lowered back when there was a \$66,000 shortfall, which Ms. Pollitt confirmed. Ms. Pollitt further stated the budget can still be passed today, as taking the funds from contingency and putting them into the department budgets is done through the general fund. She said at the council's direction, she can rework the numbers, which would leave approximately \$65,000 still in contingency. Mayor Connors stated council is still waiting on the compensation study and the increase can be changed at a later date.

Alderman Wall believes we have a pretty good budget and stated it is refreshing to see money set aside for the future.

Wall/Kordus motion to approve Resolution 14-R44. Alderman Wall stated the budget is something the taxpayers can live with as there is a zero percent increase and funds are being set aside for the future.

Roll Call: Wall, Kordus, Hill, Kehoe, Hedlund, Kupsik and Lyon voted "yes." Motion carried 7 to 1 with Alderman Chappell voting "no."

Resolution 14-R45, a resolution approving the 2014 tax levy for the City of Lake Geneva

Hill/Kehoe motion to approve. Administrator Jordan stated there was an additional number in the Linn Joint 4 School column, and it should read as \$1,265.28.

Hill/Kupsik motion an amendment to correct the Linn Joint 4 figure to \$1,265.28. Unanimously Carried.

Roll Call: Chappell, Wall, Kordus, Hill, Kehoe, Hedlund, Kupsik, and Lyon voted "yes." Unanimously approved.

Adjournment

Kordus/Wall motion to adjourn at 5:40 p.m. Unanimously carried.

/s/ Sabrina Waswo, City Clerk

THESE ARE NOT OFFICIAL MINUTES UNTIL APPROVED BY THE COMMON COUNCIL

SPECIAL PERSONNEL COMMITTEE MINUTES

THURSDAY, JUNE 4, 2015 – 4:00 P.M.

CITY HALL, COUNCIL CHAMBERS

Meeting was called to order by Alderman Hedlund at 4:03 p.m.

Roll Call. Alderman Hedlund, Chappell, Kupsik, Hill, Wall. Also Present: City Attorney Draper, City Administrator Oborn, Comptroller Pollitt and City Clerk Waswo.

Comments from the public limited to 5 minutes

Jeff Nethery, President of the Police Union and member of the taskforce, as put together by the Mayor, recommended the normalized rate for the health insurance. Mr. Nethery asked the Personnel Committee to give the employees a chance to adjust to the rates. He reminded them of the Mayor's words "win win," and does not feel the whole 20% to 30% should fall on the employees' backs. He stated in 2017 they can further change and adapt the plan to accommodate.

Rich Meinel, 1295 Wilmot Blvd, retired Police Officer, stated they do not get the insurance for free. Retirees contribute almost \$1,000 per month for insurance. Many contributed an excess of \$12,000 in total costs last year for health care. They have taken pay reductions during their time of employment to secure the insurance benefits upon retirement and while employed. Instead of the 4% raise on good years, they took a 2% to ensure the benefits. Mr. Meinel stated they certainly want to be healthier and asked the committee to consider some of the recommendations of the taskforce.

Joanne Wolleger, employee of the Lake Geneva Library and part of the task force, thanked the committee for allowing an Ad Hoc Committee to meet regarding this topic. They have worked really hard to compromise and have appreciated the opportunity. She hoped they can see the savings based on the options put further by the Ad Hoc committee and asked them to consider the recommended plan.

Discussion/Recommendation on employee compensation

City Administrator Oborn explained the history of City employee raises and went over what currently has been approved as well as what has not been implemented for 2015. Alderman Hill stated the employees have accepted nominal to no raises over the years due to the benefit package. Mr. Oborn questioned if the committee wanted across the board raises. Ms. Hill stated they have always done across the board raises and noted this would be retroactive. She noted that at budget time the discussion on raises was for full time employees and stated they normally have separate discussions regarding part time employees.

Hill/Kupsik motion to draft a resolution with across the board raises to full time city employees to 2% retroactive to January 1, 2015.

Alderman Hill stated there is money in contingency, which is noted in the budget hearing minutes from last year. She stated the Comptroller clearly laid out how the City has the money to pay for 2% raises. Alderman Chappell stated a \$93,000 contingency is not a lot of money in an 8 million dollar budget. Ms. Hill answered there is 2.8 million in reserves. Ms. Chappell stated this was in CDs and questioned if it was liquid money, to which Ms. Hill stated it was. Comptroller Pollitt stated the fund balance is 2.4 million. She stated the contingency is money set aside for whatever the Council wants to direct it for. Ms. Chappell stated they only budgeted 1.5%, not 2%. Alderman Wall stated he agrees with Ms. Chappell. The compensation study came back with everyone being average excluding a few above, a few below, and the Library. He further stated, for what they have already done as far as insurance, he thinks 1.5% is fair.

Alderman Hill stated 2% is a nominal amount. She noted the wage schedule was only back to 2009 and prior Councils did not give any raises for a long time. The compensation study is a moot point starting back to January 1 as the study is 15 months late, which the employees should not be penalized for. She feels the 1.5% is insulting. Alderman Hedlund stated the time to have that discussion would have been when they were doing the budget. Ms. Hill stated the only reason they went down to 1.5% is because in one particular round of budget sessions, there was a \$66,000 deficit. When the final numbers came in, there was over \$100,000 in surplus. A fee was associated to the beach tags, parking was raised and compensation was lowered to 1.5% to balance the budget. When the final numbers came in, the beach passes and parking tickets stayed in. She noted in the budget minutes, Ms. Pollitt said they could have gone ahead and approved the budget as it was, otherwise they would have had to have another special meeting. Ms. Hill stated it was discussed that the 2% was fair and there was money to pay for it.

Ms. Chappell stated it is not that employees are not deserving of a raise. However, noted it was only by magic that the budget turned out to be a surplus. She is being cautious to make sure the beach passes and parking tickets actually bring in revenue. She stated at 2%, they were \$66,000 in the hole, which is why the budget was revised to add in additional fees. She noted these fees are not guaranteed, which means the math does not actually work until they know the money is there. She feels 1.5% is what the Council budgeted for as it was the safe route. It is all about being conservative with the budget.

Alderman Kupsik stated he is concerned with the compensation study and agrees they budgeted 1.5%. He has no objection that all employees deserve a raise, but questioned how the 2% will tie into the study. He thought the raise was going to be based on the compensation study and questioned if the study will be used as a reference for all the employees. Ms. Hill noted they hoped to have the study before the last budget season; however, raises would normally go into effect after the budget is approved. She explained the study was received too late, which is not the employees' fault. The Committee has never come to a consensus about what they are going to do with the results of the study. They knew some employees would be over and some below. They never said they were going to decrease wages. The reality is the City does not have the systems in place to give raises based on performance and merit. She does not feel they can take the study as bible or gold. Hopefully a performance evaluation system will happen in the future. It is not the employees' fault the City's expenses have gone up in the last 5 years and the Council has not raised taxes. She stated the Personnel Committee is here to make sure the employees are the City's largest asset and pay them fairly. It is not a matter of revenues necessarily.

Ms. Chappell asked if this meeting is meant to use information from the compensation study or is it meant to be one swooping motion as well as the presumption 2% will be approved. She wondered if the study should be utilized. Mr. Hedlund stated the City paid for it, they should use it, but it probably would not happen before Christmas. He felt the employees should be given what was budgeted.

Mayor Connors asked, based on the audit last week, if the City was over budget. Ms. Pollitt stated the City was over slightly. He noted City Administrator Oborn would be excluded from the raises as he was just hired, as well as City Clerk Waswo since she is under contract. Mr. Connors stated the compensation study needs to be used as before they had no idea of wage ranges.

Mr. Kupsik asked about the Police and Fire Departments as they are still under a union contract. Ms. Hill asked City Attorney Draper how the resolution would affect the Police contract. Mr. Draper stated the resolution would not include the Police as it is a separate issue currently being negotiated. Mr. Kupsik stated dispatchers and the Street Department are no longer in the union and feels they cannot give 2% raises across the board for everybody. Ms. Hill stated she was under the impression that Council gives the PFC a set amount and it is up to them to determine how it is spent. Mr. Draper stated they can only pay out what is in the collective bargaining

agreement. Mr. Oborn stated he thought the intent was to include the dispatchers in the 1.5% or 2% raises. Mr. Draper stated all this body is doing is giving a recommendation.

Hill/Kupsik motion an amendment to give City employees, full-time, non-union, non-contracted a 2% raise retroactive to January 1, 2015 for existing employees.

Mr. Kupsik questioned if the 2% would affect the budget or create a problem in the future. Ms. Pollitt stated it would have to come out of the contingency fund. A rough calculation of 0.5% is about \$28,000. She believes there is \$93,000 in contingency; however, they did negotiate to pay the City Administrator more than what was budgeted. A budget resolution needs to be done to take the money out of contingency to balance the City Administrator budget.

Alderman Wall questioned, if the City is over budget slightly, how would the Council explain to taxpayers a 2% raise when only 1.5% is budgeted. Ms. Pollitt clarified the City was over budget on expenditures, but also over on revenues. The net was favorable at \$13,190 in revenue.

Roll Call: Alderman Hill, Kupsik voted "yes." Alderman Chappell, Wall, Hedlund voted "no." Motion failed 3 to 2.

Chappell/Wall motion an amendment to give city employees, full-time, non-union, non-contracted a 1.5% raise retroactive to January 1, 2015 for current employees.

Roll Call: Alderman Kupsik, Hedlund, Wall, Chappell voted "yes." Alderman Hill voted "no." Motion carried 4 to 1.

Discussion/Recommendation on health insurance and benefits.

Mayor Connors thanked the employees who participated in the task force. He gave a recap of the City's healthcare costs in 2014. Monthly costs for a single employee, including health and dental, were \$1,077 and family was \$2,445, making yearly costs \$12,924 for single and \$29,340 for family. A 2,080 work year comes to \$6.21 per hour for single and \$14.11 for family coverage. According to the Affordable Care Act which takes effect in 2018, the plans that are deemed as Cadillac plans would be subject to a penalty. If the plan is left unchanged, it is estimated the City would have to pay a penalty to the federal government of \$411,000. He stated the employees are the face of the City and deal with the public on a daily basis. He seldom hears complaints from residents. He suggested a moderate approach to the insurance change and recommended the Committee select one of the plans that came out of the task force along with continued work over the next 6 months toward something beneficial to everyone.

Mr. Connors stated a new plan has to be in place by July 1. He encouraged a 6 month plan rather than 1 year. Mr. Oborn discussed the plans listed in the packet. He said any of the plans proposed should be done on a January 1 basis with 4 months notice to the employees. He stated this is being looked at in a number of phases and recommended the flex elect go on a calendar year. He discussed 2 options. The recommendation of the employees is the normalized plan which would be an estimated 16% reduction in costs. Ms. Chappell questioned if the deductible would fall right on the employee. Mr. Oborn stated discussion was on plan design only. Mr. Connors asked if the proposed plans still have zero premium share, which was confirmed by Ms. Pollitt. The current plan has a \$500 deductible and the proposed is \$1,000. Mr. Kupsik felt this was still free insurance as there are no premiums. Ms. Hill questioned the retiree insurance and was not aware some paid a premium. She wondered what was offered to retirees now and how would the changes affect them. Ms. Pollitt stated the only employees who get insurance after retirement are the Police Department. The percentages paid vary by what contract they were under when they retired. It ranges from 25% to 50% for a family. Single plans are free and 100% paid by the City.

Ms. Hill thanked the employees once again for their openness to the changes that need to be made. She agrees with the Mayor that changes need to be moderate and is in favor of the normalized plan. She questioned the primary care copay, specifically the zero copay for out-of-network. Ms. Pollitt stated it was made that way as comparing the normalized to the current plan, there is a hefty hit for going out-of-network. The copays were dropped as nothing is ever paid at 100% for out-of-network. Mr. Kupsik asked what the savings would be to switching over to the normalized plan. Mr. Connors stated 16% for the normalized plan and 19.4% for the 1250 normalized plan. He followed by saying it would be beneficial to have this completed by this Monday's meeting and felt it would be a penalty to staff to put it off to the second meeting of the month.

Mr. Hedlund felt it was commendable of the task force to get so close to 20% at 19.4%. He wondered if the 16% was just a wish list. Ms. Pollitt stated the task force wanted to get the savings to the City by plan design. They discussed a lot of different scenarios and learned a lot. The changes made were ones they could live with and seemed reasonable. She stated the task force did not know what the percentages were until the numbers came back yesterday. Mr. Kupsik asked if the normalized plan will cover everyone across the board, which Ms. Pollitt confirmed. Mr. Connors wanted everyone to be aware it will still need to be looked at and changed. Ms. Pollitt stated she has a meeting with the broker next week to nail down the stop loss insurance. Mr. Oborn said in the future, they may want to look at pulling out of a self insured plan. He is hopeful the changes can get costs down.

Kupsik/Hill motion to move forward and utilize the normalized plan as discussed.

Mr. Hedlund suggested the motion be amended to change the date to January 1 to allow for a trial period. Ms. Pollitt noted in order to change a plan, it would have to be January but behind the scenes it would still be July 1 for purposes of bidding it out. The plan year really does not change. Ms. Hill asked if the plan would be prorated. Mayor Connors stated credit would be given for what has already been paid this year. Mr. Oborn explained it would not be feasible to implement an HSA plan in a half fiscal year.

Roll Call: Alderman Hedlund, Chappell, Wall, Hill and Kupsik vote "yes". Unanimously carried.

Adjournment

Hill/Wall motion to adjourn at 5:15 p.m. Unanimously carried.

/s/ Stephanie Gunderson, Assistant City Clerk

THESE MINUTES ARE NOT OFFICIAL UNTIL APPROVED BY THE PERSONNEL COMMITTEE

City of Lake Geneva 2014 Healthcare Costs

(2014 Audit Figures from Comptroller)

\$1,513,000 Healthcare
18.2% of the total budget

\$8,322,000 Total General Fund Spending

Monthly Cost per Employee:

<u>Single</u>		<u>Family</u>	
Health	\$1,042	Health	\$2,335
Dental	\$35	Dental	\$110
<hr/>		<hr/>	
Total	\$1,077	Total	\$2,445

Yearly Total Cost per Employee:

<u>Single</u>	<u>Family</u>
\$12,924	\$29,340

Cost per hour based on 2,080 hours per year:

<u>Single</u>	<u>Family</u>
\$6.21/hour	\$14.11/hour



Cadillac Plan Estimation for 2018 PPO PLAN



Effective January 1, 2018

Single	\$10,200	40% tax on value above \$10,200/single & \$27,500/family. Using the 2014 funding rates for the PPO plan, assuming a 10% trend, the plan would exceed the threshold by 2018 for both Single and Family Coverage. The PPO plan would be subject to Cadillac Plan Tax.
Family	\$27,500	

Current Self Funded PPO Plan

Assumes 10% trend, used current annualized funding rates with no plan design changes

Single	\$12,938.04
Family	\$28,903.32

2015	2016	2017	2018
\$14,232	\$15,655	\$17,221	\$18,943
\$31,794	\$34,973	\$38,470	\$42,317

*Single Premium Excise	\$3,497
*Family Premium Excise	\$5,927
Total Estimated Excise Based on January 2015 Enrollments	\$411,273



Enrollment Count as of 1/1/2015

Single: 21
Family: 57

Actuarial Modeling

Model Comparison: \$500 PPO Plan

Total Paid Comparison	Current	1500 PPO 90%	3000 HSA 90%	1500 HSA 90%
Value of Medical Plan Changes		-28%	-35.6%	-25.1%
Value of Rx Plan Changes		n/a	n/a	n/a
Total Value of Plan Changes		-28%	-35.6%	-25.1%
Total Medical Paid	\$915,500.22			
Total Rx Paid	\$354,018.00			
Total Projected Paid	\$1,269,518.22	\$914,053.12	\$817,569.73	\$950,869.15

Members Affected Comparison									
Total Claimants	169								
Total Enrolled	190								
	Current		1500 PPO 90%		3000 HSA 90%		1500 HSA 90%		
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	
Deductible	500	500	1500	4500	3000	6000	1500	4500	
Members affected			-138	-23	-138	-23	-138	-23	
% of total claimants			-81.66%	-13.61%	-81.66%	-13.61%	-81.66%	-13.61%	
% of total enrolled			-72.63%	-12.11%	-72.63%	-12.11%	-72.63%	-12.11%	
Primary Care Copay	10	10	25	25	0	0	0	0	
Members affected			-79	-4	79	4	79	4	
% of total claimants			-46.75%	-2.37%	46.75%	2.37%	46.75%	2.37%	
% of total enrolled			-41.58%	-2.11%	41.58%	2.11%	41.58%	2.11%	
Specialist Copay	10	10	50	50	0	0	0	0	
Members affected			-39	-2	39	2	39	2	
% of total claimants			-23.08%	-1.18%	23.08%	1.18%	23.08%	1.18%	
% of total enrolled			-20.53%	-1.05%	20.53%	1.05%	20.53%	1.05%	
Plan Coinsurance	100	80	90	70	90	70	90	70	
Members affected			-138	-23	-138	-23	-138	-23	
% of total claimants			-81.66%	-13.61%	-81.66%	-13.61%	-81.66%	-13.61%	
% of total enrolled			-72.63%	-12.11%	-72.63%	-12.11%	-72.63%	-12.11%	

Single Out of Pocket Max	500	1000	4500	9000	6000	12000	4500	9000
Members affected			-138	-23	-138	-23	-138	-23
% of total claimants			-81.66%	-13.61%	-81.66%	-13.61%	-81.66%	-13.61%
% of total enrolled			-72.63%	-12.11%	-72.63%	-12.11%	-72.63%	-12.11%
Inpatient Copay	0	0	0	0	0	0	0	0
Members affected			0	0	0	0	0	0
% of total claimants			n/a	n/a	n/a	n/a	n/a	n/a
% of total enrolled			n/a	n/a	n/a	n/a	n/a	n/a
Outpatient Surgery Copay	0	0	0	0	0	0	0	0
Members affected			0	0	0	0	0	0
% of total claimants			n/a	n/a	n/a	n/a	n/a	n/a
% of total enrolled			n/a	n/a	n/a	n/a	n/a	n/a
Emergency Room Copay	25	25	100	100	0	0	0	0
Members affected			-24	-2	24	2	24	2
% of total claimants			-14.2%	-1.18%	14.2%	1.18%	14.2%	1.18%
% of total enrolled			-12.63%	-1.05%	12.63%	1.05%	12.63%	1.05%
Urgent Care Copay	10	10	50	50	0	0	0	0
Members affected			-13	0	13	0	13	0
% of total claimants			-7.69%	0%	7.69%	0%	7.69%	0%
% of total enrolled			-6.84%	0%	6.84%	0%	6.84%	0%
Well Child Annual Max	10000	10000	10000	10000	10000	10000	10000	10000
Members affected			0	0	0	0	0	0
% of total claimants			n/a	n/a	n/a	n/a	n/a	n/a
% of total enrolled			n/a	n/a	n/a	n/a	n/a	n/a
Adult Wellness Annual Max	10000	10000	10000	10000	10000	10000	10000	10000
Members affected			0	0	0	0	0	0
% of total claimants			n/a	n/a	n/a	n/a	n/a	n/a
% of total enrolled			n/a	n/a	n/a	n/a	n/a	n/a

Medical Plan Comparison	Current		1500 PPO 90%		3000 HSA 90%		1500 HSA 90%	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible	500	500	1500	4500	3000	6000	1500	4500
Family Deductible	1000	1000	3000	9000	6000	12000	3000	9000
HSA Style Family Limit	No	No	No	No	No	No	No	No
Primary Care Copay	10	10	25	25	0	0	0	0
Specialist Copay	10	10	50	50	0	0	0	0
Copay Type	Just O.V.	Just O.V.	Just O.V.	Just O.V.	Just O.V.	Just O.V.	Just O.V.	Just O.V.
Plan Coinsurance	100%	80%	90%	70%	90%	70%	90%	70%
Single Out of Pocket Max	500	1000	4500	9000	6000	12000	4500	9000
Family Out of Pocket Max	1000	2000	9000	18000	12000	24000	9000	1800
Inpatient Copay	0	0	0	0	0	0	0	0
Outpatient Surgery Copay	0	0	0	0	0	0	0	0
Emergency Room Copay	25	25	100	100	0	0	0	0
Urgent Care Copay	10	10	50	50	0	0	0	0
Plan Psych Chem Dep Coinsurance	0%	0%	0%	0%	0%	0%	0%	0%
Psych Chem Dep Inpatient Limit	0	0	0	0	0	0	0	0
Psych Chem Dep Outpatient Limit	0	0	0	0	0	0	0	0
Well Child Annual Max	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Adult Wellness Annual Max	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Lifetime Max	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Percent of Total Care in Network	99%	1%	99%	1%	99%	1%	99%	1%
PCP & SCP Copays Apply After Deductible	No	No	No	No	No	No	No	No
Do Copays Apply to Out of Pocket Max?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

Prescription Drug Comparison	Current	1500 PPO 90%	3000 HSA 90%	1500 HSA 90%
Separate Rx Card?	No	No	No	No
Drug Claims as Percent of Total Claims	27.8860%	27.8860%	27.8860%	27.8860%

	Tier 1; Tier 2; Tier 3			
Deductible	0; 0; 0	0; 0; 0	0; 0; 0	0; 0; 0
Plan Coinsurance	100%; 100%; 100%	100%; 100%; 100%	0%; 0%; 0%	0%; 0%; 0%
Employee Coinsurance Minimum	n/a; n/a; n/a	n/a; n/a; n/a	n/a; n/a; n/a	n/a; n/a; n/a

Employee Coinsurance Maximum	Unlimited; Unlimited; Unlimited	Unlimited; Unlimited; Unlimited	0; 0; 0	0; 0; 0
Copay	10; 20; 30	10; 30; 60	0; 0; 0	0; 0; 0
Generic Mandate Options	None	None	None	None
Rx Copays Apply After Medical Deductible	No	No	No	No
Do Copays Apply Against Out of Pocket Max?	Yes	Yes	Yes	Yes

City of Lake Geneva

Contribution Modeling: 5.1.15

Medical only - doesn't include dental

Current Funding Rates

Single	\$	1,041.81
Family	\$	2,334.67

Current Employee Enrollment

Single	19
Family	58

Contribution Modeling	Employee Rates			
	Current	Alternate 1 (Flat Dollar)	Alternate 2 (Flat Dollar)	Alternate 3 (5% Employee Share)
Single	\$0.00	\$50/mo.	\$50/mo.	\$52.09
Family	\$0.00	\$100/mo.	\$150/mo.	\$116.73
Monthly Employee Contributions	\$0.00	\$6,750.00	\$9,650.00	\$7,760.26
Annual Employee Contributions	\$0.00	\$81,000.00	\$115,800.00	\$93,123.15

ACA "Affordability" = Single premium rate cannot exceed 9.5% of gross income.

Example:

Annual Gross Income	\$15,000	\$20,000	\$25,000	\$30,000
Maximum Monthly Rate	\$118.75	\$158.33	\$197.92	\$237.50

*Assumes current total funding rates for Alternate 3. Any change in rates will result in contribution changes.

Section 125 Cafeteria Plan - Premium Only Plan

What is Section 125?

The US Congress created Code section 125 in an effort to make benefit programs more affordable for employees.

Section 125 is part of the IRS Code that allows employees to convert a taxable cash benefit (salary) into non-taxable benefits. ***Under a Section 125 program you may choose to pay for qualified benefit premiums before any taxes are deducted from employee paychecks.***

The Section 125 program is a tremendous opportunity for you to enhance your benefits package.

The **Premium Only Plan** is the building block of the Section 125 Plan. It allows for certain employee paid group insurance premiums to be paid with **pre-tax dollars**. The qualified premiums (if offered by employer) are:

- Health
- Prescription
- Dental
- Vision
- Disability (not recommended)
- Employee Group Term Life (up to \$50,000.00)
- Cancer
- Medicare Supplement
- Hospital Indemnity
- Accident

Employee Savings

Employees can save 20 - 40% of their payroll deductions. The savings are on city, state, and federal income taxes, including Social Security and Medicare.

Employer Savings

Employers save the matching Social Security (6.20%) and Medicare (1.45%) taxes, which equates to 7.65% (1.45% for municipalities) of all the dollars put through the plan, a substantial savings.

Actuarial Modeling

Model Comparison: \$500 PPO Plan

Total Paid Comparison	Current	HSA NonEmbedded	1250 Normalized	"Normalized"
Value of Medical Plan Changes		-17.3%	-19.4%	-16%
Value of Rx Plan Changes		n/a	n/a	n/a
Total Value of Plan Changes		-17.3%	-19.4%	-16%
Total Medical Paid	\$915,500.22			
Total Rx Paid	\$354,018.00			
Total Projected Paid	\$1,269,518.22	\$1,049,891.57	\$1,023,231.69	\$1,066,395.30

Members Affected Comparison									
Total Claimants	169								
Total Enrolled	190								
	Current		HSA NonEmbedded		1250 Normalized		"Normalized"		
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	
Deductible	500	500	1300	3000	1250	2500	1000	2000	
Members affected			-138	-23	-129	-23	-129	-23	
% of total claimants			-81.66%	-13.61%	-76.33%	-13.61%	-76.33%	-13.61%	
% of total enrolled			-72.63%	-12.11%	-67.89%	-12.11%	-67.89%	-12.11%	
Primary Care Copay	10	10	0	0	25	0	25	0	
Members affected			79	4	-79	4	-79	4	
% of total claimants			46.75%	2.37%	-46.75%	2.37%	-46.75%	2.37%	
% of total enrolled			41.58%	2.11%	-41.58%	2.11%	-41.58%	2.11%	
Specialist Copay	10	10	0	0	50	0	50	0	
Members affected			39	2	-39	2	-39	2	
% of total claimants			23.08%	1.18%	-23.08%	1.18%	-23.08%	1.18%	
% of total enrolled			20.53%	1.05%	-20.53%	1.05%	-20.53%	1.05%	
Plan Coinsurance	100	80	100	80	100	80	100	80	
Members affected			0	0	0	0	0	0	
% of total claimants			n/a	n/a	n/a	n/a	n/a	n/a	
% of total enrolled			n/a	n/a	n/a	n/a	n/a	n/a	

Single Out of Pocket Max	500	1000	1300	6000	1250	5000	1000	2000
Members affected			-138	-23	-129	-23	-129	-23
% of total claimants			-81.66%	-13.61%	-76.33%	-13.61%	-76.33%	-13.61%
% of total enrolled			-72.63%	-12.11%	-67.89%	-12.11%	-67.89%	-12.11%
Inpatient Copay	0	0	0	0	250	0	250	200
Members affected			0	0	-5	0	-5	0
% of total claimants			n/a	n/a	-2.96%	n/a	-2.96%	0%
% of total enrolled			n/a	n/a	-2.63%	n/a	-2.63%	0%
Outpatient Surgery Copay	0	0	0	0	250	0	250	0
Members affected			0	0	-85	0	-85	0
% of total claimants			n/a	n/a	-50.3%	n/a	-50.3%	n/a
% of total enrolled			n/a	n/a	-44.74%	n/a	-44.74%	n/a
Emergency Room Copay	25	25	0	25	150	150	150	150
Members affected			24	0	-24	-2	-24	-2
% of total claimants			14.2%	n/a	-14.2%	-1.18%	-14.2%	-1.18%
% of total enrolled			12.63%	n/a	-12.63%	-1.05%	-12.63%	-1.05%
Urgent Care Copay	10	10	0	0	50	0	50	50
Members affected			13	0	-13	0	-13	0
% of total claimants			7.69%	0%	-7.69%	0%	-7.69%	0%
% of total enrolled			6.84%	0%	-6.84%	0%	-6.84%	0%
Well Child Annual Max	10000	10000	10000	10000	10000	10000	10000	10000
Members affected			0	0	0	0	0	0
% of total claimants			n/a	n/a	n/a	n/a	n/a	n/a
% of total enrolled			n/a	n/a	n/a	n/a	n/a	n/a
Adult Wellness Annual Max	10000	10000	10000	10000	10000	10000	10000	10000
Members affected			0	0	0	0	0	0
% of total claimants			n/a	n/a	n/a	n/a	n/a	n/a
% of total enrolled			n/a	n/a	n/a	n/a	n/a	n/a

Medical Plan Comparison	Current		HSA NonEmbedded		1250 Normalized		"Normalized"	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible	500	500	1300	3000	1250	2500	1000	2000
Family Deductible	1000	1000	2600	6000	2500	5000	2000	4000
HSA Style Family Limit	No	No	Yes	Yes	No	No	No	No
Primary Care Copay	10	10	0	0	25	0	25	0
Specialist Copay	10	10	0	0	50	0	50	0
Copay Type	Just O.V.	Just O.V.	Just O.V.	Just O.V.	Just O.V.	Just O.V.	Just O.V.	Just O.V.
Plan Coinsurance	100%	80%	100%	80%	100%	80%	100%	80%
Single Out of Pocket Max	500	1000	1300	6000	1250	5000	1000	2000
Family Out of Pocket Max	1000	2000	2600	12000	2500	10000	2000	4000
Inpatient Copay	0	0	0	0	250	0	250	200
Outpatient Surgery Copay	0	0	0	0	250	0	250	0
Emergency Room Copay	25	25	0	25	150	150	150	150
Urgent Care Copay	10	10	0	0	50	0	50	50
Plan Psych Chem Dep Coinsurance	0%	0%	0%	0%	0%	0%	0%	0%
Psych Chem Dep Inpatient Limit	0	0	0	0	0	0	0	0
Psych Chem Dep Outpatient Limit	0	0	0	0	0	0	0	0
Well Child Annual Max	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Adult Wellness Annual Max	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Lifetime Max	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Percent of Total Care in Network	99%	1%	99%	1%	99%	1%	99%	1%
PCP & SCP Copays Apply After Deductible	No	No	Yes	Yes	No	No	No	No
Do Copays Apply to Out of Pocket Max?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

Prescription Drug Comparison	Current	HSA NonEmbedded	1250 Normalized	"Normalized"
Separate Rx Card?	No	No	No	No
Drug Claims as Percent of Total Claims	27.8860%	27.8860%	27.8860%	27.8860%

	Tier 1; Tier 2; Tier 3			
Deductible	0; 0; 0	0; 0; 0	0; 0; 0	0; 0; 0
Plan Coinsurance	100%; 100%; 100%	100%; 100%; 100%	100%; 100%; 100%	100%; 100%; 100%
Employee Coinsurance Minimum	n/a; n/a; n/a	n/a; n/a; n/a	n/a; n/a; n/a	n/a; n/a; n/a

Employee Coinsurance Maximum	Unlimited; Unlimited; Unlimited	Unlimited; Unlimited; Unlimited	Unlimited; Unlimited; Unlimited	Unlimited; Unlimited; Unlimited
Copay	10; 20; 30	0; 0; 0	10; 25; 50	10; 25; 50
Generic Mandate Options	None	None	None	None
Rx Copays Apply After Medical Deductible	No	Yes	No	No
Do Copays Apply Against Out of Pocket Max?	Yes	Yes	Yes	Yes

**City of Lake Geneva
Council Meeting
June 8, 2015**

**Prepaid Checks
5/28/15 - 6/04/15**

**Total:
\$12,690.77**

Checks over \$5,000: \$11,466.05
2014 Newport West Revenue Share

**City of Lake Geneva
Council Meeting
June 8, 2015**

Accounts Payable

	<u>Fund #</u>	
1. General Fund	11	\$ 54,357.43
2. Debt Service	20	\$ 94.84
3. TID #4	34	\$ 673.96
4. Lakefront	40	\$ 35,985.95
5. Capital Projects	41	\$ 9,553.39
6. Parking	42	\$ 1,716.19
7. Cemetery	48	\$ 259.67
8. Equipment Replacement	50	\$ -
9. Library Fund	99	\$ 13,947.51
10. Impact Fees	45	\$ 3,572.04
11. Tax Agency Fund	89	\$ -
Total All Funds		\$120,160.98

**CITY OF LAKE GENEVA
ACCOUNTS PAYABLE UNPAID ITEMS OVER \$5,000**

COUNCIL MEETING DATE OF:

6/8/2015

TOTAL UNPAID ACCOUNTS PAYABLE **\$ 120,160.98**

ITEMS > \$5,000

Water Safety Patrol - 2015 lifeguards	\$ 33,250.00
Alliant Energy - April Electric Bills	\$ 19,719.13
Affiliated Communications - 10% Phone System	\$ 7,598.70
Baker & Taylor - library materials	\$ 7,260.73
GovHR - recruitment services	\$ 6,620.31

Balance of Other Items \$ 45,712.11

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CITY OF LAKE GENEVA
 DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 06/09/2015

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ADVANAU ADVANCE AUTO PARTS							
7193513458643	05/14/15	01	PENNZOIL	4800005351		06/09/15	21.49
						INVOICE TOTAL:	21.49
						VENDOR TOTAL:	21.49
AFFIL AFFILIATED COMMUNICATIONS WI							
2542	05/21/15	01	10% PYMT-FINAL	4116101412		06/09/15	7,598.70
						INVOICE TOTAL:	7,598.70
						VENDOR TOTAL:	7,598.70
ALLIANT ALLIANT ENERGY							
RE060215	06/03/15	01	INV 101952-010-SNAKE RD/HWY 50	1134105222		06/09/15	10.26
		02	INV 106985-010-STREET LIGHTS	1134105223			7,104.99
		04	INV 124743-010-S LAKE SHORE DR	1152005222			21.20
		05	INV 127818-010-W HWY 50 BLOCK	1134105222			10.26
		06	INV 140837-010-S LAKE SHORE DR	1134105222			7.58
		07	INV 147744-014-1070 CAREY	1132105222			297.98
		08	INV 178856-010-GEORGE ST	1134105222			7.67
		09	INV 184924-010-COBB PARK	1152005222			21.20
		10	INV 188965-013-1065 CAREY	1132105222			685.24
		11	INV 216918-010-CITY HALL	1116105222			2,329.00
		12	INV 239783-010-TENNIS COURTS	1152005222			7.54
		13	INV 243947-013-1055 CAREY	1132105222			175.35
		14	INV 268954-010-FLAT IRON PK	1152005222			217.88
		15	INV 278857-010-OAK HILL CEM	4800005222			20.95
		16	INV 279779-010-918 MAIN/LIB	9900005222			834.65
		17	INV 292807-010-WELLS ST	1134105222			75.47
		18	INV 302769-011-DUNN BASEBALL	1152005922			408.88
		20	INV 318816-010-HWY 50/HWY 12	1134105222			8.36
		21	INV 335773-010-WELLS ST	1134105222			9.74
		22	INV 336765-010-FLAT IRON PK	1152005222			12.47
		23	INV 355867-010-DODGE ST	1134105222			85.98
		24	INV 375931-010-RIVIERA	4055305222			1,803.19

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CITY OF LAKE GENEVA
DETAIL BOARD REPORT

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RE060215	06/03/15	25	INV 392817-010-LIBRARY PK	1152005222		06/09/15	38.42
		27	INV 433829-010-FIRE HOUSE	1122005222			864.10
		28	INV 433906-010-HAVENWOOD	1134105222			7.19
		29	INV 489578-003-MUSEUM	1151105222			700.75
		30	INV 492771-003-GENEVA SQ	1134105223			38.69
		31	INV 514311-001-BAKER/SEMINARY	1152005222			12.77
		32	INV 517852-001-SAGE ST/DUNN	1129005222			5.04
		33	INV 544872-001-VETS PK/TOWNLIN	1152015222			157.22
		34	INV 551929-001-OAK HILL CEM	4800005222			73.10
		35	INV 560544-002-1003 HOST DR	1122005222			420.37
		36	INV 589078-001-RUSH ST	1152005222			22.10
		37	INV 589905-001-BEACH HOUSE	4054105222			238.37
		38	INV 590084-001-DONIAN PK	1152005222			143.40
		39	INV 594309-001-STREET LIGHTS	1134105223			299.20
		40	INV 605259-001-GENEVA ST LOT	1134105223			277.42
		41	INV 614948-001-VETS PK SCOREBO	1152015222			180.62
		43	INV 621606-001-WELLS ST	1134105222			8.48
		44	INV 621825-001-S WELLS	1134105222			10.45
		46	INV 626232-001-HWY 50/HWY 12	1134105222			19.63
		47	INV 627270-001-730 MARSHALL ST	1129005222			19.06
		48	INV 628749-001-W COOK SIREN	1129005222			11.36
		49	INV 640082-001-201 EDWARDS SIR	1129005222			10.23
		50	INV 652115-002-EDWARDS BVD SIG	1134105223			93.08
		51	INV 653994-001-HWY 120/TOWNLIN	1134105222			92.07
		52	INV 654168-001-HWY 50 SIGNAL	1134105223			182.47
		53	INV 656566-001-HWY 120/BLOOMFI	1134105223			134.14
		54	INV 657276-002-389 EDWARDS SIG	1134105223			123.80
		55	INV 675414-001-VETS PK PAVILN	1152015222			201.58
		56	INV 679833-001-GENEVA ST LOT	1134105223			337.19
		59	INV 696255-001-SHARED SAVINGS	9900005663			7.80
		60	INV 696255-001-SHARED SAVINGS	9900005623			132.02
		63	INV 699860-001-IMPOUND	1121005222			68.46
		64	INV 703098-001-LIB PK RESTROOM	1152005222			28.03
		65	INV 703615-001-MAIN ST LIGHTS	1134105223			329.04

INVOICES DUE ON/BEFORE 06/09/2015

INVOICE # VENDOR #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

ALLIANT ALLIANT ENERGY							
RE060215	06/03/15	66	INV 710858-001-INTRCHG N SGNL	1134105223		06/09/15	61.13
		67	INV 722670-001-COOK ST SIGNL	1134105223			27.47
		68	INV 723022-001-SHARED SAVINGS	2081005664			5.74
		69	INV 723022-001-SHARED SAVINGS	2081005625			89.10
		70	INV 722220-001 BROAD ST SIGNAL	1134105223			64.69
		72	INV 722221-001-724 WILLIAMS ST	1134105223			27.51
						INVOICE TOTAL:	19,719.13
						VENDOR TOTAL:	19,719.13
ALLSTATE ALLSTATE IMAGING INC							
28439	04/30/15	01	MARKERS,NOTES,LEGAL PADS	1121005310		06/09/15	131.46
						INVOICE TOTAL:	131.46
						VENDOR TOTAL:	131.46
AMAZO AMAZON							
8932-5/15	05/10/15	01	87 DVDS	9900005414		06/09/15	1,746.48
		02	13 ITEMS	9900005411			153.91
						INVOICE TOTAL:	1,900.39
						VENDOR TOTAL:	1,900.39
AMYS AMY'S SHIPPING EMPORIUM							
146554	04/20/15	01	UPS-TASER INTL	1121005312		06/09/15	26.61
						INVOICE TOTAL:	26.61
						VENDOR TOTAL:	26.61
AT&TL AT&T LONG DISTANCE							
860141779-5/15	05/22/15	01	LD-MAY	1122005221		06/09/15	0.29
						INVOICE TOTAL:	0.29
						VENDOR TOTAL:	0.29
AUROH AURORA HEALTH CARE							

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CITY OF LAKE GENEVA
 DETAIL BOARD REPORT

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AUROH	AURORA HEALTH CARE						
IN 306	05/14/15	01	NARCAN MEDS	1122005810		06/09/15	13.92
						INVOICE TOTAL:	13.92
						VENDOR TOTAL:	13.92
AUTOW	AUTOWORKS PLUS						
21297	05/26/15	01	TIRE PATCH	1152005250		06/09/15	10.31
						INVOICE TOTAL:	10.31
						VENDOR TOTAL:	10.31
BAKER	BAKER & TAYLOR						
L3367102-4/15	04/30/15	01	2030494836-67 ITEMS	9900005410		06/09/15	1,057.30
		02	2030529683-100 ITEMS	9900005410			1,585.51
		03	2030552631-18 ITEMS	9900005410			240.14
		04	2030575754-42 ITEMS	9900005410			680.62
		05	2030583171-8 ITEMS	9900005410			113.06
						INVOICE TOTAL:	3,676.63
L3367442-3/15	03/31/15	01	2030482763-1 ITEM	9900005413		06/09/15	18.89
		02	2030418471-3 ITEMS	9900005413			48.47
						INVOICE TOTAL:	67.36
L3367512-4/30/15	04/30/15	01	2020585468-3 ITEMS	9900005411		06/09/15	23.43
		02	2030585469-2 ITEMS	9900005411			20.48
		03	2030585470-6 ITEMS	9900005411			97.10
		04	2030585471-17 ITEMS	9900005411			211.63
		05	2030514147-2 ITEMS	9900005411			22.09
		06	2030571027-56 ITEMS	9900005411			763.07
		07	2030571026-1 ITEM	9900005411			4.59
		08	2030571025-3 ITEMS	9900005411			28.49
		09	2030571024-2 ITEMS	9900005411			19.56
		10	2030571023-1 ITEMS	9900005411			11.18
		11	2030558244-3 ITEMS	9900005411			26.27

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INVOICE # VENDOR #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

BAKER	BAKER & TAYLOR						
L3367512-4/30/15	04/30/15	12	2030558243-3 ITEMS	9900005411		06/09/15	40.54
		13	2030558242-3 ITEMS	9900005411			33.27
		14	2030558241-4 ITEMS	9900005411			46.13
		15	2030558240-1 ITEM	9900005411			3.77
		16	2030520262-38 ITEMS	9900005411			306.71
		17	2030520261-1 ITEM	9900005411			22.74
		18	2030514149-1 ITEM	9900005411			14.79
		19	2030514148-4 ITEMS	9900005411			45.78
		20	2030514147-6 ITEMS	9900005411			76.05
						INVOICE TOTAL:	1,817.67
L4013232-3/15	03/31/15	01	2030418480-49 ITEMS	9900005414		06/09/15	996.88
		02	2030456978-3 ITEMS	9900005414			65.97
						INVOICE TOTAL:	1,062.85
L4013232-4/15	04/30/15	01	2030494811-3 ITEMS	9900005414		06/09/15	74.23
		02	2030494812-10 ITEMS	9900005414			204.57
		03	2030533132-4 ITEMS	9900005414			82.44
		04	2030575170-11 ITEMS	9900005414			252.98
		05	2030573436-1 ITEM	9900005414			22.00
						INVOICE TOTAL:	636.22
						VENDOR TOTAL:	7,260.73
BATT+	BATTERIES PLUS BULBS						
575-352353	05/26/15	01	BATT RINGS-CHG STN	4234505250		06/09/15	81.90
						INVOICE TOTAL:	81.90
						VENDOR TOTAL:	81.90
BEAR	BEARINGS INC SOUTH						
55333	05/18/15	01	BEARINGS,RACES-RHINO	1152005250		06/09/15	78.00
						INVOICE TOTAL:	78.00
55355	05/22/15	01	BEARINGS,SPINDLES-RHINO	1152005250		06/09/15	156.00
						INVOICE TOTAL:	156.00
						VENDOR TOTAL:	234.00

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CITY OF LAKE GENEVA
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BENDL	BENDLIN FIRE EQUIPMENT CO INC						
88955	04/23/15	01	WHEEL CHOCH FIX ASSMY- E#2	1122005351		06/09/15	62.57
						INVOICE TOTAL:	62.57
						VENDOR TOTAL:	62.57
BOUND	BOUND TREE MEDICAL LLC						
81779666	05/06/15	01	EMS SUPPLIES	1122005810		06/09/15	692.96
						INVOICE TOTAL:	692.96
						VENDOR TOTAL:	692.96
BUMPL	BUMPER TO BUMPER AUTO PARTS						
662-314892	04/29/15	01	WIPER BLADES-CAR 4	1122005351		06/09/15	5.49
						INVOICE TOTAL:	5.49
662-316912	05/28/15	01	HYD COUPLER	1132105351		06/09/15	6.99
						INVOICE TOTAL:	6.99
						VENDOR TOTAL:	12.48
CDW	CDW GOVERNMENT INC						
PQ86181	09/24/14	01	TABLET PEN-#201	1121005305		06/09/15	39.69
						INVOICE TOTAL:	39.69
VP47097	05/20/15	01	PHONE NETWORK ITEMS	4116101412		06/09/15	67.19
		02	PHONE NETWORK ITEMS	4599005960			17.04
		03	MONITOR, CABLE, THUMB DRIVE	1115105450			146.89
						INVOICE TOTAL:	231.12
						VENDOR TOTAL:	270.81
COMPL	COMPLETE OFFICE OF WISCONSIN						
91005	05/06/15	01	TONERS, PENS	1121005310		06/09/15	809.84
						INVOICE TOTAL:	809.84
						VENDOR TOTAL:	809.84

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CITY OF LAKE GENEVA
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CORDO	MARIA CORDOVA						
MILEAGE 5/15	05/14/15	01	MILEAGE-11.6 MILES	9900005211		06/09/15	6.67
						INVOICE TOTAL:	6.67
						VENDOR TOTAL:	6.67
DANTU	LINDA DANTUMA						
MILEAGE 5/15	05/28/15	01	72 MILES-BELOIT TRAINING	9900005211		06/09/15	41.40
						INVOICE TOTAL:	41.40
						VENDOR TOTAL:	41.40
DIAMO	DIAMOND BLADE SOLUTIONS LLC						
178	04/27/15	01	CORE BIT	1132105340		06/09/15	125.80
						INVOICE TOTAL:	125.80
						VENDOR TOTAL:	125.80
DUNCAN	DUNCAN PARKING TECHNOLOGIES						
DPT22502	05/28/15	01	HNDHLD SOFTWARE-NEW CLUSTERS	4234505870		06/09/15	350.00
						INVOICE TOTAL:	350.00
						VENDOR TOTAL:	350.00
DUNN	DUNN LUMBER & TRUE VALUE						
603667	05/11/15	01	MOP,PAIL,CLEANER	4800005350		06/09/15	31.73
						INVOICE TOTAL:	31.73
604355	05/15/15	01	STRANDED WIRE-#2871 FIX	1122005351		06/09/15	32.98
		02	DISCOUNT	1100004819			-1.65
						INVOICE TOTAL:	31.33
605042	05/20/15	01	BOLTS,NUTS-HANG SHELVES	1122005241		06/09/15	4.00
		02	DISCOUNT	1100004819			-0.65
		03	BATTERIES	1122005340			8.99
						INVOICE TOTAL:	12.34

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CITY OF LAKE GENEVA
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DUNN	DUNN LUMBER & TRUE VALUE						
605185	05/21/15	01	BACKPACK SPRAYER	1152005340		06/09/15	99.99
		02	DISCOUNT	1100004819			-5.00
						INVOICE TOTAL:	94.99
605410	05/22/15	01	WOOD-DINGY RAMP FIX	4052105399		06/09/15	16.66
						INVOICE TOTAL:	16.66
605719	05/26/15	01	TOILET SEAT	1152005350		06/09/15	25.99
		02	DISCOUNT	1100004819			-1.30
						INVOICE TOTAL:	24.69
605776	05/26/15	01	NUTS,BOLTS,SHOP TOWELS	4234505399		06/09/15	7.08
		02	DISCOUNT	1100004819			-0.35
						INVOICE TOTAL:	6.73
606062	05/28/15	01	PAINT-CURBS	4234505850		06/09/15	29.94
		02	DISCOUNT	1100004819			-1.50
						INVOICE TOTAL:	28.44
606191	05/28/15	01	DRILL BITS,COUPLERS,CHLORINE	4055105350		06/09/15	34.92
		02	DISCOUNT	1100004819			-0.75
						INVOICE TOTAL:	34.17
606220	05/29/15	01	STAPLES-FIREARMS	1121005410		06/09/15	9.87
		02	HITCH PIN-TRUCK	1121005361			0.85
		03	DISCOUNT	1100004819			-0.54
						INVOICE TOTAL:	10.18
606487	06/01/15	01	MOP BUCKET,LIGHTBULBS	9900005350		06/09/15	116.95
		02	DISCOUNT	9900004819			-11.70
						INVOICE TOTAL:	105.25
606585	06/01/15	01	BATTERY HANDLES-PVC	4234505250		06/09/15	0.33
		02	DISCOUNTQ	1100004819			-0.02
						INVOICE TOTAL:	0.31
						VENDOR TOTAL:	396.82

INVOICES DUE ON/BEFORE 06/09/2015

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

FIRSTS	FIRST SUPPLY LLC						
1001539-01	05/18/15	01	COVER,RING,SENSOR	1152005241		06/09/15	374.21
						INVOICE TOTAL:	374.21
1007648-00	05/18/15	01	KITCHEN SINK	4055105350		06/09/15	220.50
						INVOICE TOTAL:	220.50
1012980-00	05/20/15	01	TOILET/SINK VALVES	1152005241		06/09/15	53.76
						INVOICE TOTAL:	53.76
						VENDOR TOTAL:	648.47
FORD	FORD OF LAKE GENEVA						
47198	05/19/15	01	RUNNING LIGHT FIX-#204	1121005361		06/09/15	53.05
						INVOICE TOTAL:	53.05
47479	05/19/15	01	REVERSE LIGHT INSTALL-#204	1121005361		06/09/15	210.00
						INVOICE TOTAL:	210.00
47724	04/28/15	01	OIL,FILTER CHG-#204	1121005361		06/09/15	30.80
						INVOICE TOTAL:	30.80
47727	04/28/15	01	OIL,FILTER CHG-#207	1121005361		06/09/15	30.80
						INVOICE TOTAL:	30.80
47731	04/28/15	01	OIL,FILTER CHG-#205	1121005361		06/09/15	30.80
						INVOICE TOTAL:	30.80
47813	05/05/15	01	LIGHTBULB-#205	1121005361		06/09/15	83.08
						INVOICE TOTAL:	83.08
47852	05/07/15	01	OIL,FILTER CHG-EXPLORER	1121005361		06/09/15	39.75
						INVOICE TOTAL:	39.75
47985	05/19/15	01	BATTERY CK-#206	1121005361		06/09/15	21.00
						INVOICE TOTAL:	21.00

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FORD	FORD OF LAKE GENEVA						
48057	05/26/15	01	OIL, FILTER CHG, BRAKE INSP	1129005361		06/09/15	329.42
						INVOICE TOTAL:	329.42
						VENDOR TOTAL:	828.70
FOXVA	FOX VALLEY TECHNICAL COLLEGE						
700176397 5/15	05/19/15	01	PAPENFUS-LE ADMIN CLASS	1121005410		06/09/15	225.00
						INVOICE TOTAL:	225.00
TRAINING 6/6/15	04/17/15	01	RICHARDSON-SCH OFF CLASS	1121005410		06/09/15	225.00
						INVOICE TOTAL:	225.00
						VENDOR TOTAL:	450.00
GALLS	GALLS LLC						
003483441	05/05/15	01	UNIFORM-REUSS	1121005138		06/09/15	71.05
						INVOICE TOTAL:	71.05
003506963	05/11/15	01	BIKE SHIRTS	1121005139		06/09/15	307.50
						INVOICE TOTAL:	307.50
003524552	05/13/15	01	UNIFORM-REUSS	1121005138		06/09/15	71.95
						INVOICE TOTAL:	71.95
						VENDOR TOTAL:	450.50
GENON	GENEVA ONLINE INC						
1009956	05/01/15	01	EMAIL SVC-APR	1121005221		06/09/15	39.00
						INVOICE TOTAL:	39.00
1011471	06/01/15	01	JUNE EMAIL SVC	1112005221		06/09/15	2.00
						INVOICE TOTAL:	2.00
						VENDOR TOTAL:	41.00
GLENF	GLEN FERN CONSTRUCTION LLC						

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GLENF	GLEN FERN CONSTRUCTION LLC						
14-118-3	05/09/15	01	FINAL DRAW	4152001430		06/09/15	1,887.50
						INVOICE TOTAL:	1,887.50
						VENDOR TOTAL:	1,887.50
GLWAT	GENEVA LAKE WATER SAFETY						
6/15	06/01/15	01	2015 PAYMENT	4054105720		06/09/15	33,250.00
						INVOICE TOTAL:	33,250.00
						VENDOR TOTAL:	33,250.00
GOVHR	GOVHR USA						
3-5-15-137	05/27/15	01	RECRUITMENT SVCS-34%	1114205399		06/09/15	4,000.00
		02	RECRUITMENT EXPENSES	1114205399			2,620.31
						INVOICE TOTAL:	6,620.31
						VENDOR TOTAL:	6,620.31
HALVE	HALVERSON OVERHEAD DOOR CO						
0089504-IN	04/24/15	01	DOORS ADJMT-STN #1 BAY	1122005241		06/09/15	208.00
						INVOICE TOTAL:	208.00
						VENDOR TOTAL:	208.00
HENRYS	HENRY SCHEIN INC						
16629767	01/28/15	01	OXYGEN BAGS-SQUADS	1121005342		06/09/15	96.00
						INVOICE TOTAL:	96.00
						VENDOR TOTAL:	96.00
HESTA	HE STARK AGENCY INC						
6089COURT-5/15	05/11/15	01	COLLECTION FEES-MAY	1112005214		06/09/15	11.76
						INVOICE TOTAL:	11.76
6089CRTPRK-5/15	05/11/15	01	COLLECTION FEES-MAY	1112005214		06/09/15	2.50
						INVOICE TOTAL:	2.50
						VENDOR TOTAL:	14.26

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IDVIL	IDVILLE						
2888618	05/26/15	01	BUSINESS/BADGE CARD STOCK	1121005310		06/09/15	39.60
						INVOICE TOTAL:	39.60
						VENDOR TOTAL:	39.60
ILT	INNOVATIVE LABEL TECHNOLOGY						
202457	04/08/15	01	PROCESSING LABELS	9900005512		06/09/15	41.85
						INVOICE TOTAL:	41.85
						VENDOR TOTAL:	41.85
INFIN	INFINITY HEALTHCARE PHYSICIANS						
190-1	05/04/15	01	NEW HIRE PHYSICALS	1121005411		06/09/15	2,210.10
						INVOICE TOTAL:	2,210.10
						VENDOR TOTAL:	2,210.10
ITU	ITU ABSORB TECH INC						
6000709	05/08/15	01	MATS	1122005360		06/09/15	112.87
						INVOICE TOTAL:	112.87
6006629	05/21/15	01	MATS,MOPS,FRAGRANCE	4055105360		06/09/15	64.43
						INVOICE TOTAL:	64.43
						VENDOR TOTAL:	177.30
JAMES	JAMES IMAGING SYSTEMS INC						
605657	05/18/15	01	TOSH-ES3555-MAY	1121005531		06/09/15	95.29
						INVOICE TOTAL:	95.29
605658	05/18/15	01	TOSH ES357-MAY	1121005531		06/09/15	33.19
						INVOICE TOTAL:	33.19
						VENDOR TOTAL:	128.48
JANIK	JANI-KING OF MILWAUKEE						

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JANIK	JANI-KING OF MILWAUKEE						
MIL06150475	06/01/15	01	JUNE CLEANING	9900005360		06/09/15	1,083.00
						INVOICE TOTAL:	1,083.00
						VENDOR TOTAL:	1,083.00
LARK	LARK UNIFORM OUTFITTERS INC						
193840	04/20/15	01	UNIFORM-SOETH	1121005139		06/09/15	16.00
						INVOICE TOTAL:	16.00
193841	04/20/15	01	UNIFORM-SCHAUER	1121005139		06/09/15	59.95
						INVOICE TOTAL:	59.95
193842	04/20/15	01	UNIFORM-WISNIEWSKI	1121005139		06/09/15	121.90
						INVOICE TOTAL:	121.90
193843	04/20/15	01	UNIFORM-GRITZNER	1121005138		06/09/15	113.90
						INVOICE TOTAL:	113.90
193934	04/21/15	01	UNIFORM-SOETH	1121005139		06/09/15	16.95
						INVOICE TOTAL:	16.95
193935	04/21/15	01	UNIFORM-TYLER	1121005139		06/09/15	16.95
						INVOICE TOTAL:	16.95
194175	04/23/15	01	UNIFORM-WISNIEWSKI	1121005139		06/09/15	19.95
						INVOICE TOTAL:	19.95
195551	05/12/15	01	UNIFORM-NELSON	1121005138		06/09/15	53.40
						INVOICE TOTAL:	53.40
195553	05/12/15	01	UNIFORM-NETHERY	1121005138		06/09/15	44.45
						INVOICE TOTAL:	44.45
195568	05/12/15	01	UNIFORM-GRITZNER	1121005138		06/09/15	120.40
						INVOICE TOTAL:	120.40

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LARK	LARK UNIFORM OUTFITTERS INC						
195588	05/12/15	01	UNIFORM-WAY	1121005138		06/09/15	17.45
						INVOICE TOTAL:	17.45
195589	05/12/15	01	UNIFORM-HALL	1121005138		06/09/15	59.45
						INVOICE TOTAL:	59.45
196370	05/21/15	01	COMMENDATION BARS	1121005139		06/09/15	90.80
						INVOICE TOTAL:	90.80
						VENDOR TOTAL:	751.55
LARRY	LARRY'S TOWING & RECOVERY						
24010	05/10/15	01	TOWING-MAZDA MPV	1134105290		06/09/15	145.00
						INVOICE TOTAL:	145.00
24034	05/22/15	01	TOWING-FORD ESCORT	1134105290		06/09/15	165.00
						INVOICE TOTAL:	165.00
						VENDOR TOTAL:	310.00
LASERE	LASER ELECTRIC SUPPLY						
143484200	05/19/15	01	LAMPS	4055205350		06/09/15	67.25
		02	DISCOUNT	1100004819			-1.35
						INVOICE TOTAL:	65.90
						VENDOR TOTAL:	65.90
LASERW	LASER WORKS UNLIMITED LLC						
980	04/24/15	01	TAGS FOR SWAT	1121005342		06/09/15	42.08
		02	AWARD PLAQUE	1121005399			31.07
		03	AWARD PLAQUE	1121005190			26.50
						INVOICE TOTAL:	99.65
986	05/01/15	01	AWARDS	1121005399		06/09/15	151.00
						INVOICE TOTAL:	151.00
						VENDOR TOTAL:	250.65

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LGUTI	LAKE GENEVA UTILITY COMMISSION						
ZTT00038	05/21/15	01	ZTT00038-CUMBERLAND TRL	4500002452		06/09/15	1,690.00
		02	ZTT00038-CUMBERLAND TRL	4500002453			1,865.00
						INVOICE TOTAL:	3,555.00
						VENDOR TOTAL:	3,555.00
MARTIN	MARTIN GROUP						
1177695	05/20/15	01	KONICA 20-MAY	1121005531		06/09/15	12.65
						INVOICE TOTAL:	12.65
1177696	05/20/15	01	BIZHUB-MAY	1116105531		06/09/15	153.66
						INVOICE TOTAL:	153.66
						VENDOR TOTAL:	166.31
MIDWEA	MIDWEST ACTION CYCLE						
04242015	04/24/15	01	MOTORCYCLE BATTERY-#215	1121005361		06/09/15	134.99
						INVOICE TOTAL:	134.99
						VENDOR TOTAL:	134.99
MLIC	MINNESOTA LIFE INSURANCE CO						
RE060215	06/01/15	01	INV 099002-JUL LIFE INS	1112005134		06/09/15	9.67
		02	INV 099002-JUL LIFE INS	1113005134			33.60
		03	INV 099002-JUL LIFE INS	1114305134			8.71
		04	INV 099002-JUL LIFE INS	4234505134			3.72
		05	INV 099002-JUL LIFE INS	1115105134			51.18
		07	INV 099002-JUL LIFE INS	1124005134			30.67
		12	INV 099009-JUL LIFE INS	1121005134			259.61
		15	INV 099010-JUL LIFE INS	1122005133			76.58
		17	INV 099019-JUL LIFE INS	9900005134			86.98
		20	INV 099044-JUL LIFE INS	4234505134			54.52
		23	INV 099052-JUL LIFE INS	4055105134			28.70
		24	INV 099052-JUL LIFE INS	1132105134			179.35

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MLIC	MINNESOTA LIFE INSURANCE CO						
RE060215	06/01/15	25	INV 099052-JUL LIFE INS	1116105134		06/09/15	20.47
		26	INV 099016-JUL LIFE INS	4800005134			29.06
		27	JUL LIFE INS	1110005133			150.40
		28	JUL LIFE INS	1100002134			1,013.84
						INVOICE TOTAL:	2,037.06
						VENDOR TOTAL:	2,037.06
MUNIC	MUNICIPAL SERVICES LLC						
201520	04/30/15	01	APR SVCS	1124005219		06/09/15	527.25
						INVOICE TOTAL:	527.25
						VENDOR TOTAL:	527.25
NISH	JOHN NISH						
5/27/15	05/27/15	01	VETS MEMORIAL FLOWERS	1152005340		06/09/15	114.93
						INVOICE TOTAL:	114.93
						VENDOR TOTAL:	114.93
NORTH	NORTHWIND PERENNIAL FARM						
6533	05/11/15	01	GARDEN WEEDING	9900005360		06/09/15	202.50
						INVOICE TOTAL:	202.50
						VENDOR TOTAL:	202.50
OTIS	OTIS ELEVATOR COMPANY						
CMM65267615	05/20/15	01	ELEV CONTR-JUN/JUL	4055105360		06/09/15	249.96
						INVOICE TOTAL:	249.96
CMM65522615	05/20/15	01	ANNUAL ELEV MAINT	1116105360		06/09/15	2,754.68
						INVOICE TOTAL:	2,754.68
						VENDOR TOTAL:	3,004.64
OTTER	OTTER SALES & SERVICE INC						

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OTTER	OTTER SALES & SERVICE INC						
20049	04/21/15	01	ENVIRONMENTAL FEE	1132105351		06/09/15	7.00
						INVOICE TOTAL:	7.00
						VENDOR TOTAL:	7.00
PARAT	PARATECH AMBULANCE SERVICE						
23349	05/05/15	01	CPR CARDS-11	1122005610		06/09/15	77.00
						INVOICE TOTAL:	77.00
23355	05/12/15	01	CPR CARDS-14	1122005610		06/09/15	98.00
						INVOICE TOTAL:	98.00
						VENDOR TOTAL:	175.00
PCL	PETTY CASH - LIBRARY						
REIMB-6/315	06/03/15	01	QUICHES-VOLUNTEER LUNCHEON	9900005211		06/09/15	151.60
						INVOICE TOTAL:	151.60
USPS 5/13/15	05/13/15	01	USPS-LEXINGTON, KY	9900005312		06/09/15	9.65
						INVOICE TOTAL:	9.65
USPS 5/15/15	05/15/15	01	USPS-GENEVA, IL	9900005312		06/09/15	2.56
						INVOICE TOTAL:	2.56
USPS 6/1/15	06/01/15	01	USPS-LA VISTA, NE	9900005312		06/09/15	2.59
		02	USPS-MINNEAPOLIS, MN	9900005312			2.59
						INVOICE TOTAL:	5.18
						VENDOR TOTAL:	168.99
PERSO	PERSONNEL EVALUATION INC						
13837	05/08/15	01	TRAINING-GRITZNER	1121005410		06/09/15	274.00
						INVOICE TOTAL:	274.00
						VENDOR TOTAL:	274.00

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PETER ANDREA PETERSON							
MILEAGE 6/15	06/02/15	01	22 MILES-LLS/LAC MEETING	9900005211		06/09/15	12.65
						INVOICE TOTAL:	12.65
REIMB 5/15	05/19/15	01	OFFICE CHAIR	9900005310		06/09/15	105.42
						INVOICE TOTAL:	105.42
REIMB 6/15	06/03/15	01	REFRESHMENT,SUPPLIES-LUNCHEON	9900005211		06/09/15	95.69
						INVOICE TOTAL:	95.69
						VENDOR TOTAL:	213.76
PFI PFI FASHIONS INC							
221267	04/28/15	01	BIKE SHIRTS EMBROIDERY	1121005139		06/09/15	38.40
						INVOICE TOTAL:	38.40
						VENDOR TOTAL:	38.40
PHILS PHILS ELECTRIC DRAIN SVC LLC							
120298	05/22/15	01	DRAIN RODDING	9900005360		06/09/15	195.00
						INVOICE TOTAL:	195.00
						VENDOR TOTAL:	195.00
PIRAN PIRANHA PAPER SHREDDING LLC							
12490051815	05/18/15	01	SHREDDING-MAY	1121005399		06/09/15	35.00
						INVOICE TOTAL:	35.00
						VENDOR TOTAL:	35.00
QUILL QUILL CORPORATION							
4302793	05/18/15	01	LABELS, GLUE, PAPER, POST-ITS, ENV	9900005310		06/09/15	290.58
						INVOICE TOTAL:	290.58
4390	05/18/15	01	POST-IT NOTES, PAPER	9900005310		06/09/15	-137.89
						INVOICE TOTAL:	-137.89

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QUILL	QUILL CORPORATION						
4468924	05/22/15	01	POST-IT NOTES,COPY PAPER	9900005310		06/09/15	137.89
						INVOICE TOTAL:	137.89
						VENDOR TOTAL:	290.58
RED	RED THE UNIFORM TAILOR						
00W59908	04/29/15	01	UNIFORM-RICHARDSON	1121005138		06/09/15	79.90
		02	UNIFORM-NELSON	1121005138			79.90
		03	UNIFORM-CONNELLY,BAUMAN	1122005138			174.72
						INVOICE TOTAL:	334.52
00W59991	04/24/15	01	UNIFORM-RICHARDSON	1121005138		06/09/15	360.69
						INVOICE TOTAL:	360.69
						VENDOR TOTAL:	695.21
RHYME	RHYME BUSINESS PRODUCTS						
166806	05/26/15	01	SHARP-APR COLOR	1116105531		06/09/15	31.02
		02	SHARP-APR B&W	1116105531			40.55
						INVOICE TOTAL:	71.57
						VENDOR TOTAL:	71.57
ROBER	KEN ROBERS						
MILEAGE 5/15	05/29/15	02	JUN MILEAGE-333 MILES	1124005330		06/09/15	184.79
						INVOICE TOTAL:	184.79
						VENDOR TOTAL:	184.79
ROTE	ROTE OIL COMPANY						
3052540	05/20/15	01	663 GAL DYED DIESEL	1132105341		06/09/15	1,489.75
		02	493.3 GAL CLEAR DIESEL	1132105341			1,260.88
						INVOICE TOTAL:	2,750.63
						VENDOR TOTAL:	2,750.63

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SIGNA	SIGNATURE SIGNS LLC						
4688	05/18/15	01	NEW STALL DECALS	4234505870		06/09/15	1,091.40
						INVOICE TOTAL:	1,091.40
						VENDOR TOTAL:	1,091.40
SOMAR	SOMAR TEK LLC/SOMAR ENTERPRISE						
99074	05/06/15	01	UNIFORM-WARD	1121005138		06/09/15	24.65
						INVOICE TOTAL:	24.65
99076	05/06/15	01	UNIFORM-WARD	1121005138		06/09/15	123.18
						INVOICE TOTAL:	123.18
99085	05/08/15	01	UNIFORM-TRACY	1121005138		06/09/15	99.98
						INVOICE TOTAL:	99.98
						VENDOR TOTAL:	247.81
STRYK	STRYKER SALES CORPORATION						
1698247M	04/21/15	01	COT MATTRESS-AMB #2	1122005810		06/09/15	188.44
						INVOICE TOTAL:	188.44
						VENDOR TOTAL:	188.44
SUPPLY	THE SUPPLY CORPORATION						
0061977-IN	05/20/15	01	GARBAGE POKERS	1152005352		06/09/15	108.00
						INVOICE TOTAL:	108.00
						VENDOR TOTAL:	108.00
T0001022	CYNDI QUEBBEMANN						
REFUND	05/27/15	01	SEC DEP REFUND-SEM PARK 5/25	1100002353		06/09/15	150.00
						INVOICE TOTAL:	150.00
						VENDOR TOTAL:	150.00
T0001023	ANDRES CRUZ JR						

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T0001023	ANDRES CRUZ JR						
REFUND	05/27/15	01	OVERPMT-I000894-5,6	1112004510		06/09/15	10.00
						INVOICE TOTAL:	10.00
						VENDOR TOTAL:	10.00
T0001024	PAMELA KINGWILL						
MILEAGE 5/15	05/14/15	01	11.6 MILES-TRAINING	9900005211		06/09/15	6.67
						INVOICE TOTAL:	6.67
						VENDOR TOTAL:	6.67
T0001025	CHERYL HEGER						
MILEAGE 5/15	05/15/15	01	42.4 MILES-TRAINING	9900005211		06/09/15	24.38
						INVOICE TOTAL:	24.38
						VENDOR TOTAL:	24.38
T0001026	BRIAN D MCAULEY						
REFUND	06/02/15	01	REFUND BOND-CIT #I000846-6	1112004510		06/09/15	98.80
						INVOICE TOTAL:	98.80
						VENDOR TOTAL:	98.80
TARTA	TARTAN SUPPLY CO INC						
333134	05/13/15	01	VACUUM CORD	1116105350		06/09/15	61.40
						INVOICE TOTAL:	61.40
						VENDOR TOTAL:	61.40
TASER	TASER INTERNATIONAL						
SI1400246	05/19/15	01	BATTERIES-TASERS	1121005410		06/09/15	131.70
						INVOICE TOTAL:	131.70
						VENDOR TOTAL:	131.70
TOSHI	TOSHIBA FINANCIAL SOLUTIONS						

DATE: 06/05/15
 TIME: 13:59:03
 ID: AP441000.WOW

CITY OF LAKE GENEVA
 DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 06/09/2015

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

TOSHI	TOSHIBA FINANCIAL SOLUTIONS						
17036869	05/27/15	01	ES2540C-JUN LEASE	9900005532		06/09/15	316.23
						INVOICE TOTAL:	316.23
						VENDOR TOTAL:	316.23
TRANS	TRANS UNION LLC						
04522880	04/28/15	01	BACKGROUND CHECKS	1121005411		06/09/15	33.20
						INVOICE TOTAL:	33.20
						VENDOR TOTAL:	33.20
TRIEB	TRIEBOLD IMPLEMENT INC						
IW42000	05/22/15	01	FLANGE,BOLTS-SPINDLE	1152005250		06/09/15	63.38
						INVOICE TOTAL:	63.38
						VENDOR TOTAL:	63.38
TSC	TRACTOR SUPPLY CREDIT PLAN						
323874	04/25/15	01	GRASS SEED	1152005352		06/09/15	239.94
						INVOICE TOTAL:	239.94
						VENDOR TOTAL:	239.94
TWINPD	VILLAGE OF TWIN LAKES						
WARRANT 5/28/15	05/28/15	01	WARRANT-SALEMI PD LGPD	1112002428		06/09/15	695.50
						INVOICE TOTAL:	695.50
						VENDOR TOTAL:	695.50
UNIQ	UNIQUE MANAGEMENT SERVICES INC						
306528	05/01/15	01	COLLECTION FEES-APR	9900005510		06/09/15	62.65
						INVOICE TOTAL:	62.65
						VENDOR TOTAL:	62.65
UNIVE	UNIVENTURE						

INVOICES DUE ON/BEFORE 06/09/2015

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

UNIVE	UNIVENTURE						
420334	04/29/15	01	AUDIO BOOK CASES	9900005512		06/09/15	155.73
						INVOICE TOTAL:	155.73
420917	05/18/15	01	CREDIT-WRONG COLOR SENT	9900005512		06/09/15	-12.86
						INVOICE TOTAL:	-12.86
						VENDOR TOTAL:	142.87
USBANK	US BANK						
3341-5/15	05/13/15	01	AIRSPLAT-RETURN	1121005410		06/09/15	-199.98
		02	AIRSOFT-METAL SLIDE	1121005410			328.18
		03	WISHING WELL FLORIST-FLOWERS	1121005399			42.20
		04	TUSCAN-LUNCH	1121005331			56.00
		05	WHEEL & SPR-BIKE TUNE UPS	1121005361			559.95
		06	PIG WIG-TRAINING FOOD	1121005410			56.95
		07	PIG WIG FOOD	1121005410			62.18
		08	WALMART-CLEANERS	1121005399			20.38
		09	WALMART-CARWASH, FOAM	1121005361			83.98
		10	WALMART-TRAINING FOOD	1121005410			41.71
		11	QUICKNSAVE-GAS	1121005361			14.51
		12	LGC MEATS-BRATS	1121005410			30.69
		13	TEXAS RDHSE-GRITZNER MEAL	1121005331			20.33
		14	TRVL PLAZA-FUEL-GRITZNER	1121005330			15.00
		15	NWTC REG-HANSEN CLASS	1121005410			595.00
		16	PIG WIG-FLOWERS	1121005399			36.65
		17	USPS-ANTENNAES	1121005312			6.15
		19	DYMO-ADDRESS LABELS	1121005310			35.51
		20	CHIPOTLE-MEAL	1121005331			6.86
		21	CHIPOTLE-MEAL	1121005331			8.76
		22	PIG WIG-WATER	1121005399			4.98
		23	WALMART-AWARD CER FOOD	1121005399			24.59
		24	HOME DEPOT LUMBER-EVID BARN	1121005380			320.30
		25	HOME DEPOT LUMBER-EVID BARN	1121005380			139.49
		26	OFFICEMAX-BINDERS	1121005310			18.99

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CITY OF LAKE GENEVA
 DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 06/09/2015

INVOICE # VENDOR #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

USBANK	US BANK						
3341-5/15	05/13/15	27	TARGET-BEVERAGE TUB	1121005399		06/09/15	19.99
		28	PAYPAL FRGN TRANS FEE	1121005399			6.56
						INVOICE TOTAL:	2,355.91
						VENDOR TOTAL:	2,355.91
USCELL	US CELLULAR						
RE060215	06/12/15	01	HARBORMASTER CELL-MAY	4055105221		06/09/15	11.46
		02	MAYOR'S CELL-MAY	1116105221			0.51
		03	BLDG INSP CELL-MAY	1124005262			12.48
		07	BEACH CELL-MAY	4054105221			0.51
		08	PARKING MTR 1 CELL-MAY	4234505221			4.04
		09	PARKING MTR 2 CELL-MAY	4234505221			4.04
		10	CITY HALL CELL-MAY	1116105221			4.80
		12	PARKING SUPERVISOR-MAY	4234505221			46.11
		13	CEMETERY CELL-MAY	4800005221			21.97
		14	ST DIRECTOR CELL-MAY	1132105221			46.11
		15	ST FOREMAN CELL-MAY	1132105221			36.74
		16	PARKING MGR CELL-MAY	4234505221			43.11
						INVOICE TOTAL:	231.88
						VENDOR TOTAL:	231.88
VANDE	VANDEWALLE & ASSOCIATES INC						
201505018	05/20/15	01	MAY PLANNING	1100001391		06/09/15	1,660.50
		02	MAY PLANNING	3430005214			673.96
						INVOICE TOTAL:	2,334.46
						VENDOR TOTAL:	2,334.46
WALCOT	WALWORTH COUNTY TREASURER						
64-246 5/15	05/31/15	01	COURT FINES-MAY	1112002420		06/09/15	1,765.00
						INVOICE TOTAL:	1,765.00
						VENDOR TOTAL:	1,765.00

INVOICES DUE ON/BEFORE 06/09/2015

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

WALLA DARCY BREWSTER-WALLACE							
MILEAGE 4/15	04/07/15	01	42 MILES-LAC MTG	9900005211		06/09/15	24.15
						INVOICE TOTAL:	24.15
MILEAGE 5/15	05/05/15	01	42 MILES-LAC MTG	9900005211		06/09/15	24.15
						INVOICE TOTAL:	24.15
						VENDOR TOTAL:	48.30
WALMA WALMART COMMUNITY							
1086-4/15	05/16/15	01	COPY PAPER	4800005310		06/09/15	24.97
		02	GREASE	4800005340			36.40
						INVOICE TOTAL:	61.37
						VENDOR TOTAL:	61.37
WIDOA WI DEPT OF ADMINISTRATION							
067724	04/30/15	01	TEACH SERVICES	9900005510		06/09/15	600.00
						INVOICE TOTAL:	600.00
						VENDOR TOTAL:	600.00
WILIB WI LIBRARY ASSOCIATION							
WLA-SSCS-008	05/20/15	01	CONFERENCE-5/28/15 (2)	9900005332		06/09/15	130.00
						INVOICE TOTAL:	130.00
						VENDOR TOTAL:	130.00
WISC STATE OF WISCONSIN							
64-246 5/15	05/29/15	01	COURT FINES-MAY	1112002424		06/09/15	4,154.94
						INVOICE TOTAL:	4,154.94
						VENDOR TOTAL:	4,154.94
WMCCA WI MUNICIPAL COURT CLERKS ASOC							
REGISTRATION 2015	05/26/15	01	REGISTRATION-DEE	1112005332		06/09/15	240.00
						INVOICE TOTAL:	240.00
						VENDOR TOTAL:	240.00

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CITY OF LAKE GENEVA
DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 06/09/2015

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WOLLA	JOANNE WOLLAEGER						
REIMB 5/15	06/03/15	01	FOOD-VOLUNTEER LUNCH	9900005211		06/09/15	44.84
						INVOICE TOTAL:	44.84
						VENDOR TOTAL:	44.84
ZEE	ZEE MEDICAL INC						
0100383208	02/20/15	01	GLOVES,FIRST AID SUPPLIES	1132105390		06/09/15	115.30
						INVOICE TOTAL:	115.30
100D1267A	05/07/15	01	GLOVES	1132105390		06/09/15	242.55
						INVOICE TOTAL:	242.55
						VENDOR TOTAL:	357.85
						TOTAL ALL INVOICES:	120,160.98

City of Lake Geneva
Treasurer's Report as of APRIL 30, 2015

Walworth State Bank	Type	Cash Activity			Cash Balances	
		Expenditures	Receipts	Transfers	Mar-15	Apr-15
City Expenses & Collections	General Checking	237,552.76	615,207.82	600,000.00		
City Net Payroll	General Checking	383,690.14				
City Health Claims	General Checking	278,064.23				
General Checking	TOTALS	899,307.13	615,207.82	600,000.00	374,820.24	690,720.93

Other Banks	Type	Cash Activity			Cash Balances	
		Expenditures	Receipts	Transfers	Mar-15	Apr-15
BMO Harris Bank	TID #4 Certificates of Deposit				607,049.99	607,049.99
Community Bank of Delavan	TID #4 Certificate of Deposit		39.60		374,995.77	375,035.37
Community Bank of Delavan	TID #4 CDARS				600,000.00	600,000.00
Community Bank of Delavan	TID #4 Money Market		0.30		3,393.66	3,393.96
US Bank	Tax Collection	47,874.41	70,426.31		2,885.38	25,437.28
Town Bank	TID #4 Money Market				-	-
Associated Bank	TID #4 Certificates of Deposit				314,480.01	314,480.01
Walworth State Bank	Police Seizure Account				3,709.59	3,709.59
Other Banks	TOTALS	47,874.41	70,466.21	-	1,906,514.40	1,929,106.20

Local Govt Investment Pool	Type	Cash Activity			Cash Balances	
		Expenditures	Receipts	Transfers	Mar-15	Apr-15
LGIP Acct #1	General		189,417.70	(600,000.00)	5,845,750.17	5,435,167.87
LGIP Acct #4	Treasurer		13.51		134,308.25	134,321.76
LGIP Acct #5	Impact Fees-Park		5.48		54,540.42	54,545.90
LGIP Acct #6	Impact Fees-Fire		1.32		13,115.60	13,116.92
LGIP Acct #7	TID #4		710.09		7,061,137.74	7,061,847.83
LGIP Acct #8	Capital Projects		2.03		20,177.05	20,179.08
LGIP Acct #9	Public Library		9.35		92,968.52	92,977.87
LGIP Acct #10	Impact Fees-Library		18.53		184,220.16	184,238.69
LGIP Acct #11	Capital Projects-2014		248.07		2,466,788.52	2,467,036.59
Local Gov't Investment Pool	TOTALS	-	190,426.08	(600,000.00)	15,873,006.43	15,463,432.51

GRAND TOTAL ALL BANKS

947,181.54	876,100.11	-	18,154,341.07	18,083,259.64
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Al Lenz

Attest: