City of Lake Geneva
626 Geneva Street
Lake Geneva, WI 53147
(262) 248-3673
www.cityoflakegeneva.com

FINANCE, LICENSING & REGULATION COMMITTEE

TUESDAY, JUNE 4, 2019 – 6:00 PM

CITY HALL, CONFERENCE ROOM 2A

Committee Members: Chairperson Ken Howell, Alderpersons: Selena Proksa, Doug Skates, John Halverson, and Rich Hedlund

AGENDA

1. Call to Order by Chairperson Howell

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 Regular Finance, Licensing and Regulation Committee Meeting minutes of May 21, 2019, as prepared and distributed

5. Licenses & Permits

a. 2019-2020 Original & Renewal Operator License applications filed by various applicants as listed in packet

b. Discussion/Recommendation regarding Renewal of 2019-2020 "Class B" Intoxicating Liquor & Class "B" Fermented Malt Beverage license application filed by Samson Enterprises LLC d/b/a Northsiders, 642 W Main St, Michelle Norgard, Agent

c. Discussion/Recommendation regarding Renewal of 2019-2020 Class "A" Fermented Malt Beverage license application filed by Tienda El Rancho Inc d/b/a Tienda El Rancho, 1151 Elkhorn Rd, Mercedes Jaramillo, Agent

d. Discussion/Recommendation regarding an Original "Class A" Intoxicating Liquor license and Class "A" Fermented Malt Beverage license application filed by Kelley Williamson Company d/b/a Kelley's Market, 350 N Edwards Blvd, Suzanne Dorsey-Sterling, Agent

e. Discussion/Recommendation regarding an Original Class "B" Fermented Malt Beverage license and "Class C" Wine license application filed by The Candle Mercantile LLC d/b/a The Candle Mercantile, 870 W Main St, Elizabeth Doyle, Agent

f. Discussion/Recommendation regarding an application for Temporary Class "B"/ "Class B" Retailer's License filed by the Lake Geneva Rotary Club to be used at the Lake Geneva Oktoberfest on Saturday, October 12, 2019 (11:00 a.m. to 5:00 p.m.) and Sunday, October 13, 2019 (11:00 a.m. to 5:00 p.m.); Beer tent to be located in street between 726 Geneva St and 727 Geneva St

g. Discussion/Recommendation regarding Renewal of 2019-2020 Massage Establishment License applications filed by the following:

1) Therapeutic Touch, 601 W Main St, Lake Geneva, WI

h. Discussion/Recommendation regarding Renewal 2019-2020 of Taxi Cab Company License applications filed by the following *(Approval contingent upon favorable review of Insurance by City Attorney)*

1) Lakefront Shuttle, 300 Wrigley Dr, Lake Geneva, WI

6. Discussion/Recommendation regarding **Resolution 19-R43** authorizing the use of Contingency funds for additional Comprehensive Plan workshops and focus groups, in an amount not to exceed $6,716

7. Discussion/Recommendation regarding **Resolution 19-R44** updating of City of Lake Geneva Wage Scale for Full-Time Employees

8. Discussion/Recommendation regarding **Resolution 19-R45** updating of City of Lake Geneva Wage Scale for Part-Time Employees

9. Discussion/Recommendation regarding update to City of Lake Geneva Compensation Policy

10. Discussion/Recommendation regarding Oak Hill Cemetery Water/Sewer extension/repair

11. Presentation of Accounts

a. Prepaid Bills in the amount of $16,930.37

b. Regular Bills in the amount of $110,228.30

11. 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.

cc: Committee Members, Mayor, Council, Administrator, Attorney

FINANCE, LICENSING & REGULATION COMMITTEE MINUTES
TUESDAY, MAY 21, 2019 – 6:00 PM

CITY HALL, CONFERENCE ROOM 2A

Committee Members: Chairperson Ken Howell, Alderpersons: Selena Proksa, Doug Skates, John Halverson, and Rich Hedlund

The May 21, 2019 Finance, Licensing, and Regulation Committee meeting was called to order by Chairperson Howell at 6:00 p.m.

Roll Call
Clerk Kropf called the roll and noted that Howell, Proksa, Skates, Halverson, and Hedlund were present.

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
Bob Lee; 140 Broad St; Spoke in regards to the sidewalk ordinance. He spoke in opposition of the new ordinance as he feels what would be allowed on the sidewalks could block pedestrian traffic.

Gary Poetzinger; 152 Broad St; Spoke in opposition of the new proposed sidewalk ordinance.

Kevin Flemming; 1032 Wisconsin St; Spoke in favor of the new proposed ordinance and would like to maintain the current ordinance that does not allow for merchandise to be displayed outside.

858 W Main St; Spoke in opposition of the current ordinance banning outdoor displays as long as it is family appropriate.

Paul Ochalek; Spoke in favor of the new proposed ordinance. He also spoke in opposition of the current ordinance banning outdoor merchandise display.

Bethany Suza; 997 Lakeshore Dr; Spoke in favor of the agent change for the Baker House and discussed some upcoming events at the Baker House.

Kent Martkze; Spoke in favor of updating his awning at the boat launch down by the Riviera. He offered a rendering of the proposed awnings and displayed some material samples.

Todd Krause; 1112 Wisconsin St; Spoke in favor of the West End Pier gate or some kind of security to deter trespassing.

Motion by Skates to move agenda item #10, #11, #12, and #13, second by Hedlund. Motion carried 5-0.

Discussion/Recommendation regarding installing a security gate at the West End Pier location or possible other security alternatives
Skates addressed the committee regarding the security options that were discussed at the last Piers and Harbors meeting. DPW Superintendent Waswo addressed the committee regarding the most current design that he is proposing. He noted that the outer fins around the gate would be removed along with the proposed keypad. Proksa noted that she is not in favor of blocking off the pier as it is a public pier. She indicated that this should have been monitored to avoid any issues. Skates noted that there has been an increase of visitors of the west end pier and issues with dogs not being leashed. He further added that there is room to add more piers in the future that could be used for non-boating purposes. Skates added that there could be additional signage that could outline the ordinances for what is allowed on the pier. Skates stated that he is not in favor with the current gate design and would like to see something a little less ominous. Hedlund noted that he was very in favor of the proposed sign and would like to see that move forward right away. He also added that he would like to see a gate that maybe has a dutch door to seem less onerous.

Motion by Proksa to approve the purchase and installation, second by Hedlund. Motion carried 5-0.

Discussion regarding City of Lake Geneva line of credit/Promissory Note dated May 15, 2017
Finance Director Hall noted that the City currently has a line of credit for $1.7M. She noted that the draw period is ending in May 2020. She noted that the City will need to draw on this for the street improvement project. Hall stated that the committee will need to evaluation how we move forward. No action taken.

Discussion regarding April 2019 Treasurer's Report and Budget versus Actual Report
Finance Director Hall reviewed

Motion by Hedlund to move item #8 up, second by Proksa. No discussion. Motion carried 5-0.

Discussion/Recommendation regarding **Resolution 19-R37** a resolution authorizing the carryover of 2018 Equipment Replacement Funds to the 2019 Equipment Replacement Fund Budget and authorizing additional 2019 purchases from the Equipment Replacement Fund
Finance Director Hall noted that this would carry over half the cost of the project as it wasn't completed until 2019. This will also include the carry over for funds for the ambulance that was approved in 2018.

Motion by Hedlund to approve second by Skates. Motion carried 5-0.

Motion by Skates to move up agenda item #7, second by Heldund. Motion carried 5-0.

Discussion/Recommendation regarding **Ordinance 19-08** an ordinance amending Chapter 62, Streets, Sidewalks and other Public Places, Article III, Obstructions and Encroachments, Section 62-67, exceptions, by adding Subsection (9), Sidewalk Furnishings: Benches and Planters within Public Rights-Of-Way, allowing certain furnishings within the Public Right-Of-Way
Halverson stated that he is concerned with the allowing of merchandise on the City sidewalks. Mayor Hartz stated that this intent of this ordinance to keep the sidewalk clear and to create creative expression for business owners. This would allow for the placement of sandwich boards within the specified areas as outlined in the ordinance.

Motion by Proksa to approve, second by Skates. Motion carried 5-0.

Approve the Regular Finance, Licensing and Regulation Committee Meeting minutes of May 7, 2019, as prepared and distributed
Motion by Hedlund to approve, second by Skates. No discussion. Motion carried 5-0.

Licenses & Permits

2019-2020 Original & Renewal Operator License applications filed by various applicants as listed in packet
Motion by Skates to approve, second by Heldund. No discussion. Motion carried 5-0.

Discussion/Recommendation regarding an Agent Change for EYM Pizza of Wisconsin LLC d/b/a Pizza Hut to John Dethloff
Motion by Skates to approve, second by Halverson. No discussion. Motion carried 5-0.

Discussion/Recommendation regarding an Agent Change for Stone Soup LLC d/b/a Baker House to Robert Lopez
Motion by Skates to approve, second by Proksa. No discussion. Motion carried 5-0.

Discussion/Recommendation regarding an Agent Change for Quick and Save LLC d/b/a Quick and Save to Pradip Patel
Motion by Proksa to approve, second by Skates. No discussion. Motion carried 5-0.

Discussion/Recommendation regarding an Agent Change for Target Corporation d/b/a Target Store T2348 to Katherine Johnston
Motion by Skates to approve, second by Proksa. No discussion. Motion carried 5-0.

Discussion/Recommendation regarding an Agent Change for D & D Restaurant Group Inc d/b/a Flat Iron Tap to John Sherman Lindsey
Motion by Skates to approve, second by Proksa. No discussion. Motion carried 5-0.

Discussion/Recommendation regarding an Event Permit Application filed by Knockerball Southern Lakes LLC requesting the use of Seminary Park from May 24, 2019 to August 11, 2019 and August 20, 2019 to September 2, 2019 (Monday through Sunday 11:00 a.m. to 10:00 p.m.) to conduct Knockerball *(Carried over from May 7, 2019 FLR Meeting)*
Motion by Skates to suspend the rules to allow Olaf Borchert from Knockerball to speak, second by Proksa. Motion carried 5-0.

Olaf Borchert explained to the committee what his intended purpose and space was. Howell added that he wondered if the usage could be limited to some days of the week. Proksa and Skates questioned the blocked use of the park for guests. Olaf added that he had looked at other parks, but liked this location as it is close to the downtown to attract patrons. Skates noted that the City wants to encourage these types of things.

Motion by Proksa to approve the event permit for Fridays, Saturdays, Sundays, Mondays, on the dates specificed, and will refund for the unused days, and that the applicant pay for the boat trailer parking, second by Skates. Motion carried 5-0.

Discussion/Recommendation regarding Renewal of 2019-2020 "Class A" Liquor & Class "A" 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) ALDI Inc Wisconsin d/b/a ALDI #56, 200 N. Edwards Blvd, Lake Geneva, Ryan McDermid, Agent
2) Cove Condominium Association Inc d/b/a The Cove of Lake Geneva (Gift Shop), 111 Center St, Patrick McCarthy, Agent
3) Kwik Trip Inc d/b/a Kwik Trip 219, 710 Williams St, Stephen Abel, Agent
4) Maya Geneva Inc d/b/a Maya Geneva Inc, 605 Williams St, Wayne Schwartz, Agent
5) Midwest Fuel Inc d/b/a Northside Mobil, 501 Interchange North, John Consolino, Agent
6) Walgreen Co. d/b/a Walgreens #05600, 351 Edwards Blvd, Suzanne Tiedke, Agent
7) Quick and Save LLC d/b/a Quick and Save, 1231 Grant St, Pradip Patel, Agent
8) Stinebrinks Lake Geneva Foods LLC d/b/a Stinebrink's Piggly Wiggly, 100 East Geneva Sq, Mark Stinebrink, Agent
9) Walmart Stores INC d/b/a Walmart Store #910, 201 S Edwards Blvd, Rebecca Edwards, Agent
10) Target Corp d/b/a Target Store T2348, 660 N Edwards Blvd, Katherine Johnson, Agent
11) StopNGo of Madison INC d/b/a StopNGo Store # 265, 896 Wells St, Andrew Bowman, Agent
12) New World Wine Shop INC d/b/a New World Wine Shop, 830 W Main St Suite G, Jerry Sibbing, Agent
13) Prairie State Enterprises of Darien LLC d/b/a Lake Geneva Mobil, 350 N Edwards Blvd, Kenneth Kearns, Agent
14) Queso LLC d/b/a The Cheese Box, 801 S Wells St, Zbigniew Boroweic, Agent
15) Brutap LLC d/b/a Bruno's Liquors, 524 Broad St, James Sharkus, Agent

Motion by Skates to approve, second by Halverson. Motion carried 5-0.

Discussion/Recommendation regarding Renewal of 2019-2020 "Class A" Intoxicating Liquor License application 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, John Bogan, Agent
2) Lake-Ben INC d/b/a Cornerstone Shop & Gallery, Karin Bennett, Agent

Motion by Skates to approve, second by Heldund. Motion carried 5-0.

Discussion/Recommendation regarding Renewal of 2019-2020 "Class B" Intoxicating Liquor & Class "B" Fermented Malt Beverage License (Hotel Exemption) application 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 St, Patrick McCarthy, Agent

2) Harbor Shores Hotel Management INC d/b/a Harbor Shores on Lake Geneva, 300 Wrigley Dr, William Strangeway, Agent

Motion by Hedlund to approve, second by Skates. Motion carried 5-0.

Discussion/Recommendation regarding Renewal of 2019-2020 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 Dr, Nancy Trilla, Agent
2) Simple Café LLC d/b/a Simple Café, 525 Broad St, Thomas Hartz, Agent
3) Plaza Media LLC d/b/a Geneva Theater, 244 Broad St, Shad Branen, Agent
4) Martins Olympic Restaurant LLC d/b/a Olympic Restaurant, 748 Main St, Yolanda Zavaleta, Agent
5) Happy Restaurant INC d/b/a Happy Café, 526 Wells St, Min Ting Zhong, Agent
6) Breakfast Bungalow LLC d/b/a Great Eggs, 220 Cook St #101, Justin Ochlek, Agent
7) D & D Restaurant Group INC d/b/a Flat Iron Tap, 150 Center St, John Sherman Lindsey, Agent
8) Sabai Sabai Thai Cuisine, INC d/b/a Sabai Sabai Thai Cuisine, 306 Center St, Jirapa Cox, Agent
9) DCRB Inc d/b/a Avant Cycle Café, 234 Broad St, Andrew Gruber, Agent
10) Mama Cimino's LLC d/b/a Mama Cimino's, 131 S Wells St, John Bobak, Agent
11) EYM Pizza of Wisconsin LLC d/b/a Pizza Hut, 801 Williams St, John Dethloff, Agent
12) Ovalle-Perez LLC d/b/a Taqueria el Gallo de Oro, 820 Williams St, Cynthia Perez, Agent

Motion by Helund to approve, second by Proksa. Motion carried 5-0.

Discussion/Recommendation regarding Renewal of 2019-2020 Class "B" Fermented Malt Beverage License application 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) KNMG Hotels LLC d/b/a Comfort Suites, 300 E Main St, Eric Schmitt, Agent
2) B & B Lake Geneva LLC d/b/a Board & Brush Lake Geneva, 262 Center St, Julie Selby, Agent

Motion by Skates to approve, second by Hedlund. Motion carried 5-0.

Discussion/Recommendation regarding Renewal of 2019-2020 "Class B" Intoxicating Liquor & Class "B" 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) American Legion Post 24 d/b/a American Legion, 735 Henry St, Charles Schlehlein, Agent
2) Harry's Café & Place Inc d/b/a Harry's Café, 808 Main St, James Chironis, Agent
3) Medusa Grill & Bistro LLC d/b/a Medusa Grill & Bistro, 501 Broad St, Gregory Anagnos, Agent
4) Popeyes Galley & Grog LTD d/b/a Popeye's on Lake Geneva, 811 Wrigley Dr, Veronica Anagnos, Agent
5) Gleneagles LLC d/b/a Sopra, 724 W Main St, Alastair Cumming, Agent
6) Capitol Geneva LLC d/b/a Sprecher's Restaurant & Pub, 111 Center St, Susan Getgen, Agent
7) Stone Soup LLC d/b/a Baker House, 327 Wrigley Dr, Roland Wolff, Agent
8) Mercedes or Bust LLC d/b/a The Bottle Shop, 617 W Main St, Elizabeth Tumas, Agent
9) Samson Enterprises LLC d/b/a Northsiders, 642 W Main St, Michelle Norgard, Agent
10) 422 S. Wells St. LTD d/b/a Celebration on Wells, 422 S Wells St, Charles Lorenzi, Agent
11) L&B Main Street Inc d/b/a Champs Sports Bar & Grill, 747 W Main St, Jessica Bush, Agent
12) Chubby Kitty LLC d/b/a Fat Cat's, 104 Broad St, Mark Basil, Agent
13) Hogs & Kisses Inc d/b/a Hogs & Kisses, 149 Broad St, Linda Chironis, Agent
14) Sandal Inc d/b/a Lake Geneva Lanes, 192 E Main St, Franklin Guske, Jr, Agent
15) Geneva Bay Club LLC d/b/a Maxwell Mansion, 421 Baker St, Charles Fritz IV, Agent
16) DCR Restaurant Group LLC d/b/a Next Door Pub & Pizzeria, 411 Interchange North, Chad Bittner, Agent
17) SS2 Inc d/b/a The Red Geranium Restaurant, 393 N Edwards Blvd, Troy Bartz, Agent

18) Two Thumbs Up LLC d/b/a Thumbs Up, 260 Broad St, Benjamin Barels, Agent
19) LG Hospitality Group LLC d/b/a Tuscan Tavern & Grill, 430 Broad St, James Georgalas, Agent
20) Oakfire LLC d/b/a Oakfire, 831 Wrigley Dr, David Scotney, Agent

Motion by Howell to approve with the exception Samson Enterprises, second by Proksa. Motion carried 5-0.

Discussion/Recommendation regarding Renewal of 2019-2020 "Class B" Winery License & Class "B" Fermented Malt Beverage License application filed by Jackson Wine LLC d/b/a Studio Winery, 401 Sheridan Springs Rd., Kathleen Jackson, Agent, 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
Motion by Hedlund to approve, second by Proksa. Motion carried 5-0.

Discussion/Recommendation regarding Renewal of 2019-2020 Reserve "Class B" Intoxicating Liquor & Class "B" 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) Lake Aire LLC d/b/a Lake Aire Restaurant, 804 W Main St, George Argiropoulos, Agent
2) Harborside Pub & Grill LLC d/b/a Harborside Pub & Grill, 100 Broad St, Spyro Condos, Agent
3) Su Wings Corp d/b/a Su Wing's Chinese, 743 North St, Siu Wing Leung, Agent
4) Bella Vista Suites on the Shores of Lake Geneva, INC d/b/a Bella Vista Suites on the Shores of Lake Geneva, 335 Wrigley Dr, Charles Lorenzi, Agent

Motion by Hedlund to approve, second by Proksa. Motion carried 5-0.

Discussion/Recommendation regarding Renewal of 2019-2020 Massage Establishment License applications filed by the following:

1) Element Massage Studio, 647 W Main St
2) Lake Geneva Massage Therapy, 905 Marshall St
3) Healing Muscle Therapies, 201 Broad St Suite D
4) Clear Waters Salon Spa, 734 Main St
5) Bella Vista Suites and the Lakeview Spa, 335 Wrigley Dr

Motion by Hedlund to approve, second by Proksa. Motion carried 5-0.

Discussion/Recommendation regarding Renewal 2019-2020 of Taxi Cab Company License applications filed by the following *(Approval contingent upon favorable review of Insurance by City Attorney)*

1) Senior Cab, W3099 Krueger Rd, Lake Geneva, WI

Motion by Skates to approve, second by Hedlund. Motion carried 5-0.

Discussion/Recommendation regarding the purchase of two standing mowers from Larry's Towing in an amount not to exceed $16,308 to be paid from the Equipment Replacement Fund
Motion by Proksa to approve, second by Hedlund. Motion carried 5-0.

Discussion/Recommendation regarding proposed structure replacement by Lake Geneva Boat Line *(referred to by Piers, Harbors & Lakefront Committee)*
Halverson worried about the colors of the awnings not working with the Riviera
Motion by Proksa to approve, second by Hedlund. Motion carried 4-1, with Halverson voting no.

Presentation of Accounts

Prepaid Bills in the amount of $55,286.04
Motion by Heldund to approve, second by Skates. Motion carried 5-0.

Regular Bills in the amount of $124,416.32
Motion by Hedlund to approve, second by Proksa. Motion carried 5-0.

Adjournment
Motion by Hedlund to adjourn the meeting, second by Proksa. Motion carried 5-0. The meeting of the Finance, Licensing, and Regulation Committee adjourned at 7:23 p.m.

Original License:
Leigh Ann Myers
Mckinley Veith
Brandon Coolman
Paul Meckler
Sarah Siudak
Kendra Holmes
Samantha Knapp
Brianna Kincaid
Andrea Behm
John Nichols
Sharon Klein
Antoinette Moritz

Renewal Operator:
Roxanne Smith
Calli Brellenthin
Jessica Jenner
Eric Rude
Alexander Klotz
Charles Rude
Moises Garcia
Jean Morales
Amanda Morales
Nicholas Grimme
James Georgalas
Jessica Christenson
Dean Leptich
Evan Knutson
Megan Hall
Chelsea Matthews
Steven Hahn
Michael Fryar
Timothy Stinebrink
Andrew Newcomb
Thomas Trilla
Dana Trilla
Linda Diamond
Alexander Gygax
Kyle Cary
Amor Sanchez
Henri Lorenzi
Amanda Andrews
Ransi Lei
Kelly Lei
Varsha Shah

Kevin Dickey
Anthony Silverstri
Barbara Morris
Beth Jurgensen
Dawn Hancock
Sheila Miller
Laura Lopresto
Chandler Carlson
Wendy Brewington
Kevin Kazimier
Kelsie Rammel
Nancy Lazansky
Crystal Bauman
Jennifer Jones
Scott Fazel
Chase Brugger
Emily Mills
Amy Yachik
Dan Kuhl
Nicholas Bertram
Kevin Andresen
Rhonda Holden
Zachary Belanus
Cynthia Wisniewski
Rachael Engelhardt
Veronika Vigil
David Stinebrink
Robert Peters
Terence Conell
Wendy Anderson
Donald Weber
Chaz Wagner
Wayne Sertzel Jr.
Catherine Petrassi
Tai Serna
Michelle Bane
Austen Racette
Paul Ochalek
Kendra Feld
Kevin Smith
Kathleen Consolino

Renewal Alcohol Beverage License Application

Submit to municipal clerk. **Read instructions on reverse side.**

For the license period beginning: 07/01/2019 (MM DD YYYY) ending: 06/30/2020 (MM DD YYYY)

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

County of Walworth Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE ☐ Individual ☐ Partnership ☑ Limited Liability Company ☐ Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.: 456102699377803	FEIN Number: 134282545
LICENSE REQUESTED ▶	
TYPE	**FEE**
☐ Class A beer	$
☑ Class B beer	$100
☐ Class C wine	$
☐ Class A liquor	$
☐ Class A liquor (cider only)	$ N/A
☑ Class B liquor	$500
☐ Reserve Class B liquor	$
☐ Class B (wine only) winery	$
Publication fee	$25.00 oct 4/16/19
TOTAL FEE	$625.00

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
▶ Caravette, Daniel Christopher	39W101 Dean Lane	St Charles, IL 60175

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 Member	Daniel Christopher Caravette	[redacted]	
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent ▶ Michelle Norgard			
Directors/Managers			

C. 1. Trade Name ▶ NORTHSIDERS LAKE GENEVA Business Phone Number 630-306-9563

2. Address of Premises ▶ 642 W Main 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.) Restaurant, Bar, Patio, Basement storage - See Maps

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.** Agent Change ☑ 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 undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	Date reported to council/board	Date license granted
Apr 16, 2019		
License number issued	**Date license issued**	**Signature of Clerk / Deputy Clerk**

Renewal Alcohol Beverage License Application

Submit to municipal clerk. **Read instructions on reverse side.**

For the license period beginning: 07 01 2019 (MM DD YYYY) ending: 06 30 2020 (MM DD YYYY)

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☑ City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE ☐ Individual ☐ Partnership ☐ Limited Liability Company ☒ Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.:	FEIN Number:
456-10200-4870403.	20-2479235

LICENSE REQUESTED ▶	
TYPE	FEE
☒ Class A beer	$ 100
☐ Class B beer	$
☐ Class C wine	$
☐ Class A liquor	$
☐ Class A liquor (cider only)	$ N/A
☐ Class B liquor	$
☐ Reserve Class B liquor	$
☐ Class B (wine only) winery	$
Publication fee	$ 25
TOTAL FEE	$ 125

5/21/19

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 ▶ Tienda El Rancho Inc

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 1151 Elkhorn Rd. Lake Geneva. WI

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	Gerardo Jaramillo	[redacted]	
Vice President/Member	Mercedes Jaramillo		
Secretary/Member	Mercedes Jaramillo		
Treasurer/Member	Gerardo Jaramillo		
Agent ▶	Mercedes Jaramillo		
Directors/Managers			

C. 1. Trade Name ▶ Tienda El Rancho Inc Business Phone Number (262) 249-0698

2. Address of Premises ▶ 1151 Elkhorn Rd Lake Geneva WI Post Office & Zip Code ▶ 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.) It's store in the restaurant Area

5. Legal description (omit if street address is given above): in a 3 door cooler & in the outside walking cooler.

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 undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000.

Mercedes Jaramillo

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	Date reported to council/board	Date license granted
May 21, 2019		
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

CITY OF LAKE GENEVA
ALCOHOL LICENSE CHECKLIST

Checklist must be submitted by each applicant seeking a new Alcohol License. Incomplete applications will be rejected.

Applicant/Agent Name: Kelley Williamson Co. / Suzanne Dorsey-Sterling
Business Name and Address: Lake Geneva Mobil 350 N Edwards Blvd
Type of Alcohol License(s) Sought: Class A Beer / liquor

Applicant	Office Use	Item
☐	☐	Discuss with City Clerk (or Assistant City Clerk) the desired alcohol license and proposed use.
☒	☐	**Original Alcohol Beverage Retail License Application (AT-106)** Thoroughly complete questions 1-14 and complete the box in the upper right corner. Application can be notarized by the Clerk's Office.
☒	☐	**Auxiliary Questionnaire (AT-103).** Thoroughly complete the top sections and questions 1-6. A copy must be submitted for each officer, director, member, manager and agent of the corporation, LLC, or non-profit organization. Application(s) can be notarized by the Clerk's Office.
☒	☐	**Agent Schedule (AT-104).** Thoroughly complete the top section and the "Acceptance by Agent" section.
☐	☐	**$25 publication fee** payable to the City of Lake Geneva and due upon application.
☐	☐	**Proof of Completing Responsible Beverage Server Training Course.** Individuals, partners and agents of corporations and LLC's must have successfully completed an approved responsible beverage server training course within the past two years. *Does not apply to individuals who held, or were an agent of a corporation or LLC that held a liquor license within the past two years.*
☒	☐	**Proof of Residency.** Applicants must have resided 90 days continuously in this state prior to the date of application. Proof of residency could include voter registration, motor vehicle registration, driver's license, residential lease or purchase agreement, or income tax records. *Officers, directors, members or managers of corporations or LLCs are not required to meet the State residency requirement.*
☒	☐	**Proof of Wisconsin Seller's Permit.** Can be a copy of a letter, e-mail or website from the State of Wisconsin proving that the applicant is in good standing for sales tax purposes and holds a valid seller's permit.
☒	☐	**Map of premises.** Applicant must submit a map of the premises, identifying the building(s), room(s), and/or land area under his/her control where alcohol beverages will be sold, served, consumed, or stored. Map does not need to be drawn to scale but should include a small compass arrow showing which direction is north.

Applications (AT-106, AT-103, AT-104) may be obtained at City Hall or from the Wisconsin Department of Revenue website, http://www.revenue.wi.gov/forms/alcohol

For Office Use Only

Date Filed with Clerk: _____

Publication Fee Receipt: _____ Amount Paid: _____

Date Published in Newspaper: _____

License Fee Receipt: _____ Amount Paid: _____

Date forwarded to Police Chief: _____ MM ok -

FLR/Council Approval: _____

License Issued Date: _____ License Number: _____

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: 6/30/19 (mm dd yyyy) ending: 5/31/20 (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 Wisconsin Seller's Permit Number 456-0000322069-03

FEIN Number 36-1314080

TYPE OF LICENSE REQUESTED	FEE
☒ Class A beer	$ 100 00
☐ Class B beer	$
☐ Class C wine	$
☒ Class A liquor	$ 500 00
☐ Class A liquor (cider only)	$ N/A
☐ Class B liquor	$
☐ Reserve Class B liquor	$
☐ Class B (wine only) winery	$
Publication fee	$ 25 00
TOTAL FEE	$625 -

pd 5/15/19

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)

Kelley Williamson Company

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 full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
See Attached			
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Dorsey-Sterling	Suzanne		[redacted]
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Kellerp Market Business Phone Number Not yet Available
2. Address of Premises 350 N Edwards Blvd Post Office & Zip Code Lake Geneva WI 53147
3. 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 Map

4. Legal description (omit if street address is given above): _____
5. (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? Prairie State Enterprises of Darien LLC

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** ..... ☐ Yes ☒ No

7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? ..... ☐ Yes ☒ No
If yes, explain.

8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** ..... ☐ Yes ☒ No

9. (a) **Corporate/limited liability company applicants only:** Insert state IL and date _____ of registration.

   (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** ..... ☐ Yes ☒ No

   (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? ☒ Yes ☐ No
   If yes, explain. See Attached

10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] ..... ☒ Yes ☐ No

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

12. 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 signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000. Signer agrees 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, or one member of a partnership applicant must sign; one corporate officer, one member/manager 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.

Contact Person's Name (Last, First, M.I.)	Title/Member	Date
Viederis, Debbie	Admin Assist	5/9/19
Signature	**Phone Number**	**Email Address**
Debbie Viederis	815-387-6243	debbiev@kw-oil.com

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

NAME
GRIFFIN, JOHN C.
SOCIAL SECURITY NO.
NAME
BETO, CHERRY
SOCIAL SECURITY NO.
NAME
BEVILLE, WALLY
SOCIAL SECURITY NO.
NAME
GRIFFIN, KIMBERLY J (SCHMIDT)
SOCIAL SECURITY NO.
NAME
TOM FURST
SOCIAL SECURITY NO.
NAME
JOHN SANDERS
SOCIAL SECURITY NO.
NAME
SUZANNE DORSEY-STERLING
SOCIAL SECURITY NO.

[redacted]

* Shares held by John C. Griffin, as Trustee of the John C. Griffin Trust No.1, a grantor trust

** Shares held by Cherry Beto, as Trustee of the Cherry Beto Revocable Trust, a grantor trust

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APP

Each person listed on the first page of the application MUST:
- Complete the Auxiliary Questionnaire
- Include a copy of their Drivers License or ID Card

Submit to municipal clerk.

Individual's Full Name *(please print)* *(last name)*	*(first name)*	*(middle name)*	
Griffin John C			
Home Address (street/route)	Post Office	City	State	Zip Code
[redacted]				

The *above named individual* provides the following information as a person who is *(check one)*:

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of a partnership which is making application for an alcohol beverage license.

☒ President Treasurer *(Officer/Director/Member/Manager/Agent)* of Kelley Williamson Company *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? 0
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? ☐ Yes ☒ No
   If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. *(If more room is needed, continue on reverse side of this form.)*
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? ☐ Yes ☒ No
   If yes, describe status of charges pending.
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? ☒ Yes ☐ No
   If yes, identify. See Attached *(Name, Location and Type of License/Permit)*
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ☐ Yes ☒ No
   If yes, identify. *(Name of Wholesale Licensee or Permittee)* *(Address By City and County)*
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Kelley Williamson Co	1132 Harrison Ave Rockford	1974	Present
Employer's Name	Employer's Address	Employed From	To

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 13th day of May, 20 19.

(Clerk/Notary Public)

My commission expires 4-6-22

OFFICIAL SEAL
KAREN M SANDERS
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:04/06/22

John C. Griffin
(Signature of Named Individual)

Printed on Recycled Paper

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APP

Each person listed on the first page of the application MUST:
- Complete the Auxiliary Questionnaire
- Include a copy of their Drivers License or ID Card

Submit to municipal clerk.

Individual's Full Name *(please print)* *(last name)*	*(first name)*	*(middle name)*
Beto Cherry G		

[redacted]

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of a **partnership** which is making application for an alcohol beverage license.

☒ Director / Secretary *(Officer/Director/Member/Manager/Agent)* of Kelley Williamson Co. *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? 0
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? ☐ Yes ☒ No
   If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. *(If more room is needed, continue on reverse side of this form.)*
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? ☐ Yes ☒ No
   If yes, describe status of charges pending.
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? ☒ Yes ☐ No
   If yes, identify. See Attached *(Name, Location and Type of License/Permit)*
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ☐ Yes ☒ No
   If yes, identify. *(Name of Wholesale Licensee or Permittee)* *(Address By City and County)*
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
None			
Employer's Name	Employer's Address	Employed From	To

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 13th day of May, 20 ~~16~~ 19

(Clerk/Notary Public)

Cherry Beto
(Signature of Named Individual)

My commission expires 4-6-22

OFFICIAL SEAL
KAREN M SANDERS
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:04/06/22

Printed on Recycled Paper

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)	(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER
Beville	Wally	G	353-44-2505

[redacted]

The *above named individual* provides the following information as a person who is (**check one**):

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of a **partnership** which is making application for an alcohol beverage license.

☒ Director (Officer/Director/Member/Manager/Agent) of Kelley Williamson Co. (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION) which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? 0
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws,any Wisconsin laws, any laws of any other states or ordinances of any municipality? . Yes ☐ No ☒
   (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? . . . . Yes ☐ No ☒
   (If yes, describe status of charges pending.)
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? . . . . . Yes ☒ No ☐
   (If yes, identify.) See Attached
   (NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? . . . . . Yes ☐ No ☒
   (If yes, identify.)
   (NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	Employed To
Mr. Laffs (No longer there)	Leys	1984	

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 15th day of May, 20 19

(CLERK/NOTARY PUBLIC) (SIGNATURE OF NAMED INDIVIDUAL)

My commission expires 4-6-22

OFFICIAL SEAL
KAREN M SANDERS
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:04/06/22

AT-103 (R. 01-01)

Printed on Recycled Paper
Wisconsin Department of Revenue

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APP

Each person listed on the first page of the application MUST:
- Complete the Auxiliary Questionnaire
- Include a copy of their Drivers License or ID Card

Submit to municipal clerk.

Individual's Full Name *(please print)* *(last name)*	*(first name)*	*(middle name)*
Griffin	Kimberly	J

[redacted]

The *above named individual* provides the following information as a person who is (*check one*):

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of a partnership which is making application for an alcohol beverage license.

☒ Asst. Secretary *(Officer/Director/Member/Manager/Agent)* of Kelley Williamson Company *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? 0
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? ☐ Yes ☒ No
   If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. *(If more room is needed, continue on reverse side of this form.)*
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? ☐ Yes ☒ No
   If yes, describe status of charges pending.
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? ☒ Yes ☐ No
   If yes, identify. See Attached *(Name, Location and Type of License/Permit)*
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ☐ Yes ☒ No
   If yes, identify. *(Name of Wholesale Licensee or Permittee)* *(Address By City and County)*
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Kelley Williamson CO	1132 Harrison Ave Rockford	11/93	Present
RL Leek Industries	1924 23RD Ave Rockford	1/90	11/93

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 13th day of May, 20 19.

(Clerk/Notary Public) *(Signature of Named Individual)*

My commission expires 4-6-22

OFFICIAL SEAL
KAREN M SANDERS
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:04/06/22

Printed on Recycled Paper

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)	(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER
Furst	Thomas	C	309-42-6640

[redacted]

The *above named individual* provides the following information as a person who is (**check one**):

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of a **partnership** which is making application for an alcohol beverage license.

☒ Director (Officer/Director/Member/Manager/Agent) of Kelley Williamson Co (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION) which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? 0
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws,any Wisconsin laws, any laws of any other states or ordinances of any municipality? . Yes ☐ No ☒
   (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? .... Yes ☐ No ☒
   (If yes, describe status of charges pending.)
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? ..... Yes ☒ No ☐
   (If yes, identify.) See Attached
   (NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? ..... Yes ☐ No ☒
   (If yes, identify.) _____ (NAME OF WHOLESALE LICENSEE OR PERMITTEE) _____ (ADDRESS BY CITY AND COUNTY)
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address		Employed From	Employed To
The Furst Group	6870 Rote Rd	Rockford	1971	Present
Ned Dickey & Assoc.	State St.	Rockford	1968	1971

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 13th day of May, 2019

(CLERK/NOTARY PUBLIC)

(SIGNATURE OF NAMED INDIVIDUAL)

My commission expires 4-6-22

OFFICIAL SEAL
KAREN M SANDERS
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:04/06/22

AT-103 (R. 01-01)

Printed on Recycled Paper
Wisconsin Department of Revenue

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name)	(¿rst name)	(middle name)
Sanders	John	H

[redacted]

The *above named individual* provides the following information as a person who is *(check one)*:

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of a **partnership** which is making application for an alcohol beverage license.

☒ Director *(Officer/Director/Member/Manager/Agent)* of Kelley Williamson Company *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? 0
2. Have you ever been convicted of any offenses (other than traf¿c unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? ..... ☐ Yes ☒ No
   If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. *(If more room is needed, continue on reverse side of this form.)*
3. Are charges for any offenses presently pending against you (other than traf¿c unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? ..... ☐ Yes ☒ No
   If yes, describe status of charges pending.
4. Do you hold, are you making application for or are you an of¿cer, director or agent of a corporation/nonpro¿t organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? ..... ☒ Yes ☐ No
   If yes, identify. See Attached *(Name, Location and Type of License/Permit)*
5. Do you hold and/or are you an of¿cer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or recti¿er permit in the State of Wisconsin? ..... ☐ Yes ☒ No
   If yes, identify. *(Name of Wholesale Licensee or Permittee)* *(Address By City and County)*
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Anderson Enterprises LLC	330 Spring Creek Rd 61107	5/1/15	Present
McGladry + Pullen	1252 Bell Valley Rd #300 61108	1975	4/30/15

The undersigned, being ¿rst duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and af¿davits in connection with this application.

Subscribed and sworn to before me

this 19th day of May, 20 19

(Clerk/Notary Public) *(Signature of Named Individual)*

My commission expires 4-6-22

OFFICIAL SEAL
KAREN M SANDERS
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:04/06/22

Printed on Recycled Paper

Auxiliary Questionnaire
Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name *(please print)* *(last name)*	*(first name)*	*(middle name)*
Dorsey-Sterling	Suzanne	

[redacted]

The above named individual provides the following information as a person who is *(check one)*:

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of a **partnership** which is making application for an alcohol beverage license.

☒ Agent *(Officer / Director / Member / Manager / Agent)* of Kelley Williamson Company *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? _____
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? ..... ☐ Yes ☒ No
   If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. *(If more room is needed, continue on reverse side of this form.)*
   _____
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? ..... ☐ Yes ☒ No
   If yes, describe status of charges pending. _____
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? ..... ☒ Yes ☐ No
   If yes, identify. See Attached
   (Name, Location and Type of License/Permit)
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ..... ☐ Yes ☒ No
   If yes, identify.
   _____ *(Name of Wholesale Licensee or Permittee)* _____ *(Address By City and County)*
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Clark Retail Entp.	Out of Business	12 years	
Employer's Name	Employer's Address	Employed From	To
Poti Enterprises	Out of Business	6 years	

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000.

_____
(Signature of Named Individual)

Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

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

The undersigned duly authorized officer/member/manager of Kelley Williamson Company
(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 Kellerp Market
(Trade Name)

located at 350 N Edwards Blvd

appoints Suzanne Dorsey - Sterling

[redacted]
(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+ years

Place of residence last year [redacted]

For: Kelley Williamson Company
(Name of Corporation / Organization / Limited Liability Company)

By: John C. Huffman, President
(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than $1,000.

ACCEPTANCE BY AGENT

I, Suzanne Dorsey - Sterling, 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.

5/15/19

[redacted]

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 5-21-19 (Date) by [signature] (Signature of Proper Local Official) Title Police Chief (Town Chair, Village President, Police Chief)

WISCONSIN DEPARTMENT OF REVENUE
PO BOX 8902
MADISON, WI 53708-8902

Contact Information:

2135 RIMROCK RD PO BOX 8902
MADISON, WI 53708-8902
ph: 608-266-2776 fax: 608-264-6884
email: DORBusinessTax@wisconsin.gov
website: revenue.wi.gov

Letter ID L1483742224

KELLEY WILLIAMSON COMPANY
1132 HARRISON AVE
ROCKFORD IL 61104-7262

Wisconsin Business Tax Registration Certificate

Expiration date: **October 31, 2020**

Legal/real name: **KELLEY WILLIAMSON COMPANY**

- This certificate confirms that you are registered with the Wisconsin Department of Revenue for the tax types shown below.
- This registration certificate is not a seller's permit, and should not be used as proof that you hold a seller's permit.
- You may not transfer this certificate to any other individual or business.

Tax Type	Account Type	Number
Sales & Use Tax	Sales & Use Tax	456-0000322069-03
Withholding Tax	Withholding Tax	036-0000322069-04
Excise Cigarette	OS Cigarette Mult Retail	409-0000322069-06
Motor Fuel	Transporter	540-0000322069-10
Motor Fuel	Restricted Supplier	540-0000322069-10

The following is a list of the business locations that you have registered with the Department of Revenue.

409-0000322069-06
KELLEY WILLIAMSON COMPANY
901 S Gammon Rd.
Madison WI 53719

409-0000322069-06
KELLEY WILLIAMSON COMPANY
8613 University Green
Middleton WI 53562

409-0000322069-06
KELLEY WILLIAMSON COMPANY
2956 fish Hatchery Rd
Madison WI 53713

409-0000322069-06
KELLEY WILLIAMSON COMPANY
2601 Shopko Dr.
Madison WI 53704

409-0000322069-06
KELLEY WILLIAMSON COMPANY
3859 E Washington
Madison WI 53704

409-0000322069-06
KELLEY WILLIAMSON COMPANY
33 Junction Ct
Madison WI 53717

409-0000322069-06
KELLEY WILLIAMSON COMPANY
8230 Watts Rd.
Madison WI 53719

409-0000322069-06
KELLEY WILLIAMSON COMPANY
5418 N Bluebill Park Dr
Madison WI 53704

409-0000322069-06

The following is a list of the business locations that you have registered with the Department of Revenue.

KELLEY WILLIAMSON COMPANY
636 W Washington
Madison WI 53715

409-0000322069-06
KELLEY WILLIAMSON COMPANY
6829 County Trunk HWY K
Middleton WI 53562

409-0000322069-06
KELLEY WILLIAMSON COMPANY
276 Davison Dr
Sun Prairie WI 53590

409-0000322069-06
KELLEY WILLIAMSON COMPANY
1132 HARRISON AVE
ROCKFORD IL 61104-7262

456-0000322069-03
KELLEY WILLIAMSON COMPANY
GAMMON RD MOBIL
901 S GAMMON RD
MADISON WI 53719-1323

456-0000322069-03
KELLEY WILLIAMSON COMPANY
MIDDLETON MOBIL
8613 UNIVERSITY GRN
MIDDLETON WI 53562-2509

456-0000322069-03
KELLEY WILLIAMSON COMPANY
FISH HATCHERY MOBIL
2956 FISH HATCHERY RD
FITCHBURG WI 53713-3123

456-0000322069-03
KELLEY WILLIAMSON COMPANY
ABERG AVE MOBIL
2601 SHOPKO DR
MADISON WI 53704-4157

456-0000322069-03
KELLEY WILLIAMSON COMPANY
EAST WASHINGTON MOBIL

The following is a list of the business locations that you have registered with the Department of Revenue.

3859 E WASHINGTON AVE
MADISON WI 53704-3648

456-0000322069-03
KELLEY WILLIAMSON COMPANY
OLD SAUK MOBIL
33 JUNCTION CT
MADISON WI 53717-2159

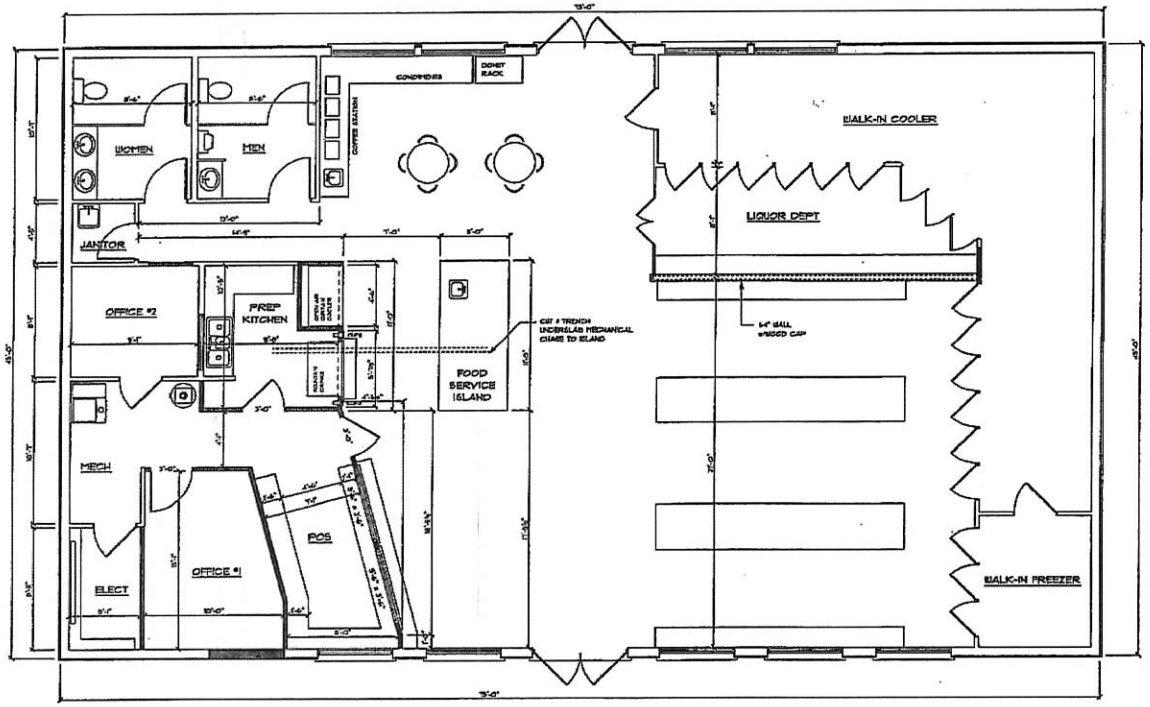
456-0000322069-03
KELLEY WILLIAMSON COMPANY
WEST WASHINGTON MOBIL
636 W WASHINGTON AVE
MADISON WI 53703-4743

456-0000322069-03
KELLEY WILLIAMSON COMPANY
WESTPORT MOBIL
5418 BLUE BILL PARK DR
WESTPORT WI 53597-9079

456-0000322069-03
KELLEY WILLIAMSON COMPANY
WATTS ROAD MOBIL
8230 WATTS RD
MADISON WI 53719-3815

456-0000322069-03
KELLEY WILLIAMSON COMPANY
SPRINGFIELD MOBILE
6829 COUNTY ROAD K
MIDDLETON WI 53562-3900

456-0000322069-03
KELLEY WILLIAMSON COMPANY
SUN PRAIRIE MOBIL
276 DAVISON DR
SUN PRAIRIE WI 53590-2035



NEW FLOOR PLAN
SCALE: 1/4" = 1' 0"

NOTES:

ALL DIMENSIONS ARE TO THE FACE OF STUDS

3x4 WALLS TYPICAL (UNLESS NOTED)

FIELD VERIFY EXISTING DIMENSIONS & CONDITIONS

FDC
framingdesigns@charter.net

LAKEWOOD CONSTRUCTION SERVICES
501 INTERCHANGE NORTH
LAKE GENEVA, WI 53147
262-248-2910 FAX: 262-749-8139

LAKE GENEVA MOBIL
350 N EDWARDS BLVD
LAKE GENEVA, WI 53147

NEW FLOOR PLAN

DATE
2-9-11

SHEET NO.
2
OF 2

SELLER / SERVER CERTIFICATION

school program license #: A1001
trainee's social security #: XXX-XX-XXXX
trainee's name: **Suzanne A Dorsey**
school's name: **Learn2Serve**
certification #: TEMP1001
trainee date of birth: 01/20/1965
class date: Tuesday, May 25, 2010

I, Albert J. Lilly
certify that the above named person successfully completed an approved Learn2Serve Seller/Server course.

this certification expires 3 (three) years after the date issued unless otherwise mandated. Refer questions to 360training at 800-442-1149 or support@360training.com

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, and 134.66

learn2serve powered by 360training.com

Corporate Headquarters
200 Academy Dr., Ste 260
Austin, Texas 78701
800-442-1149: tel
512-441-1811: fax

City of Madison
Operator License
License No. LICOPR-2011-00954

June 30, 2020

Expiration Date	06/30/2020
Date Issued	06/12/2018

SUZANNE A DORSEY-STERLING

Mayor

City Clerk

PURSUANT TO SECTION 38 OF THE MADISON GENERAL ORDINANCES.

Expiration Date 06/30/2020

Not Transferable. Post entire license in a conspicuous place.

SUZANNE A DORSEY-STERLING
406 W WATER ST
CAMBRIDGE WI 53523

CITY OF LAKE GENEVA
ALCOHOL LICENSE CHECKLIST

Checklist must be submitted by each applicant seeking a new Alcohol License. Incomplete applications will be rejected.

Applicant/Agent Name: Elizabeth R Doyle
Business Name and Address: The Candle Mercantile, LLC
Type of Alcohol License(s) Sought: Class B beer and Class C wine

Applicant	Office Use	Item
☐	☐	Discuss with City Clerk (or Assistant City Clerk) the desired alcohol license and proposed use.
☐	☐	**Original Alcohol Beverage Retail License Application (AT-106)** Thoroughly complete questions 1-14 and complete the box in the upper right corner. Application can be notarized by the Clerk's Office.
☐	☐	**Auxiliary Questionnaire (AT-103).** Thoroughly complete the top sections and questions 1-6. A copy must be submitted for each officer, director, member, manager and agent of the corporation, LLC, or non-profit organization. Application(s) can be notarized by the Clerk's Office.
☐	☐	**Agent Schedule (AT-104).** Thoroughly complete the top section and the "Acceptance by Agent" section.
☒	☐	**$25 publication fee** payable to the City of Lake Geneva and due upon application.
☐	☐	**Proof of Completing Responsible Beverage Server Training Course.** Individuals, partners and agents of corporations and LLC's must have successfully completed an approved responsible beverage server training course within the past two years. *Does not apply to individuals who held, or were an agent of a corporation or LLC that held a liquor license within the past two years.*
☐	☐	**Proof of Residency.** Applicants must have resided 90 days continuously in this state prior to the date of application. Proof of residency could include voter registration, motor vehicle registration, driver's license, residential lease or purchase agreement, or income tax records. *Officers, directors, members or managers of corporations or LLCs are not required to meet the State residency requirement.*
☒	☐	**Proof of Wisconsin Seller's Permit.** Can be a copy of a letter, e-mail or website from the State of Wisconsin proving that the applicant is in good standing for sales tax purposes and holds a valid seller's permit.
☐	☐	**Map of premises.** Applicant must submit a map of the premises, identifying the building(s), room(s), and/or land area under his/her control where alcohol beverages will be sold, served, consumed, or stored. Map does not need to be drawn to scale but should include a small compass arrow showing which direction is north.

Applications (AT-106, AT-103, AT-104) may be obtained at City Hall or from the Wisconsin Department of Revenue website, http://www.revenue.wi.gov/forms/alcohol

For Office Use Only

Date Filed with Clerk: _____

Publication Fee Receipt: _____ Amount Paid: _____

Date Published in Newspaper: _____

License Fee Receipt: _____ Amount Paid: _____

Date forwarded to Police Chief: OK _____

FLR/Council Approval: _____

License Issued Date: _____ License Number: _____

Original Alcohol Beverage Retail License Application

Submit to municipal clerk.

Applicant's WI Seller's Permit No.:	FEIN Number:
456103D367646D4	834401693

LICENSE REQUESTED ▶	
TYPE	FEE
☐ Class A beer	$
☑ Class B beer	$ 100 –
☑ Class C wine	$ 100 –
☐ Class A liquor	$
☐ Class A liquor (cider only)	$ N/A
☐ Class B liquor	$
☐ Reserve Class B liquor	$
☐ Class B (wine only) winery	$
Publication fee	$ 25 –
TOTAL FEE	$ 225 –

pd 5/6/19

For the license period beginning _____ 20 _____ ;
ending _____ 20 _____

TO THE GOVERNING BODY of the: ☐ Town of / ☐ Village of / ☑ City of } Lake Geneva, WI

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

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): ▶ The Candle Mercantile, LLC

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 (Last, First, M.I.)	Home Address	Post Office & Zip Code
President/Member		[redacted]	
Vice President/Member Member	Myers, Leigh Ann		
Secretary/Member			
Treasurer/Member			
Agent ▶ Member/Agent	Doyle, Elizabeth, R.		
Directors/Managers			

3. Trade Name ▶ The Candle Mercantile Business Phone Number _____
4. Address of Premises ▶ 870 W Main St. Lake Geneva, WI 53147 Post Office & Zip Code ▶ P.O.Box 58 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 Wisconsin and date February, 2018 of registration.
   (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? ☐ Yes ☑ No
   (c) Does the corporation, or any officer, director, stockholder or agent or 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, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Beer and wine will be consumed in the main area and bathroom of the candle studio. The beer and wine will be stored in a locked storage room. See floorpaln.
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? _____
12. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277]. ☑ Yes ☐ No
13. Does the applicant understand they must hold a Wisconsin Seller's Permit? [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 signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000. Signer agrees 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, or one member of a partnership applicant must sign; one corporate officer, one member/manager 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.

Elizabeth R. Doyle / member
(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

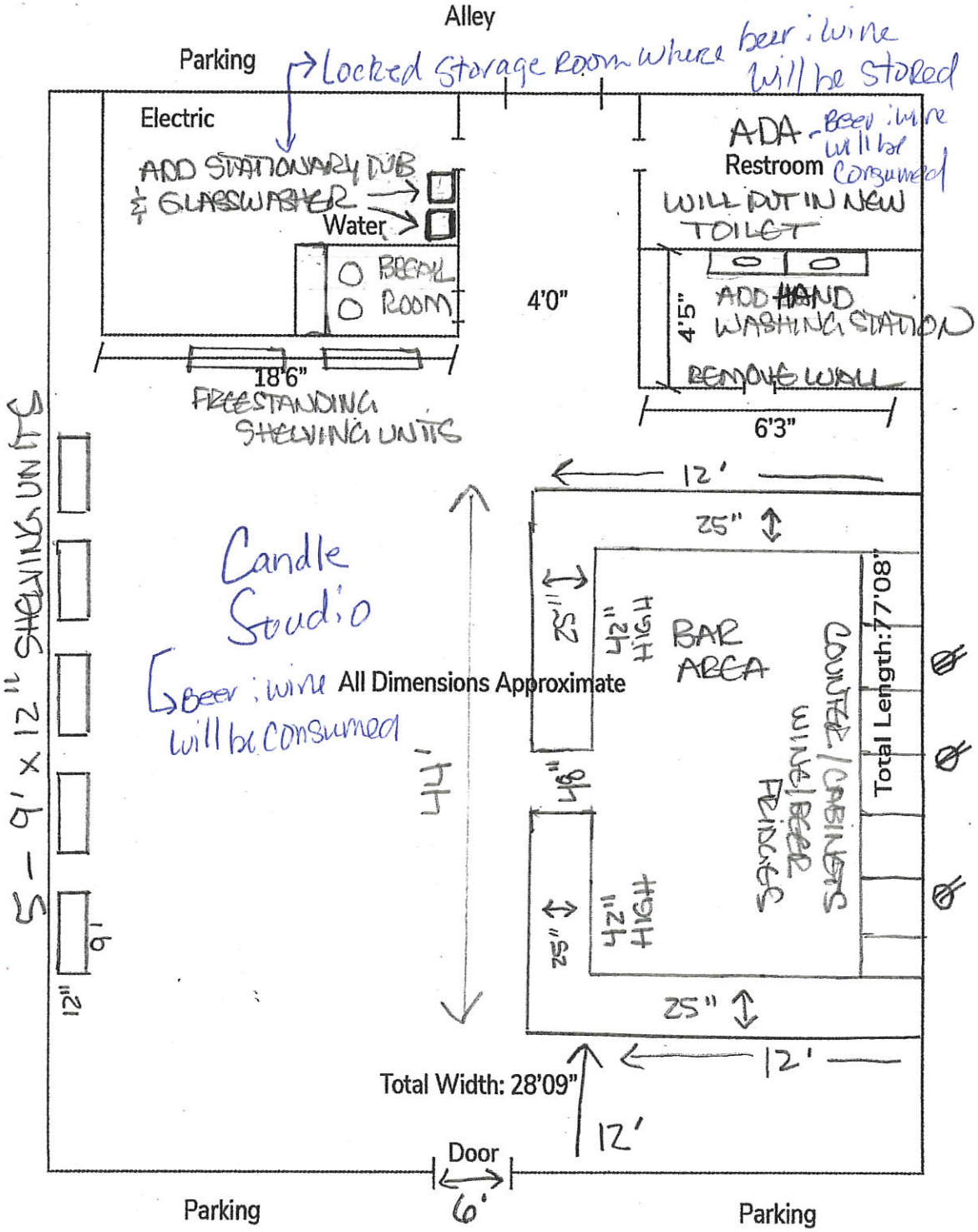
TO BE COMPLETED BY CLERK

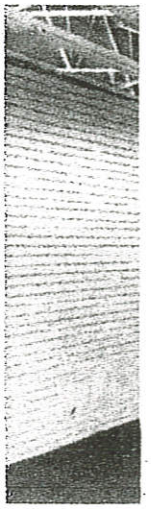
Date received and filed with municipal clerk	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

3 PARKING SPOTS IN BACK

870 W. MAIN STREET

Site Plan





Aerial

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 The Candle Mercantile, 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

The Candle Mercantile
(trade name)

located at 870 W Main St. Lake Geneva, WI 53147

appoints Elizabeth R. Doyle
(name of appointed agent)
[redacted]
(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? 48 years

Place of residence last year Lake Geneva, WI 53147

For: The Candle Mercantile, LLC
(name of corporation/organization/limited liability company)

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

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

ACCEPTANCE BY AGENT

I, Elizabeth R. Doyle, 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] 5/5/19
(date)

[redacted]
(signature of agent)

[redacted]

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 5-21-19 *(date)* by [signature] *(signature of proper local official)* Title Police Chief *(town chair, village president, police chief)*

Serving Alcohol Incorporated

is proud to present this certificate to

Elizabeth Doyle

for successful completion of the online course

Wisconsin Alcohol Seller-Server

PERSONS COMPLETING THIS COURSE HAVE AGREED TO EXECUTE THE FOLLOWING POLICIES TO THE BEST OF THEIR ABILITIES.

* CARD ANY PERSON 35 YEARS OF AGE OR YOUNGER
* OBSERVE AND REPORT ANY CUSTOMER SHOWING SIGNS OF POSSIBLE IMPAIRED BEHAVIOR TO MANAGEMENT
* RESPOND IMMEDIATELY TO ANY POSSIBLE PROBLEM SITUATION
* DETERMINE THE PEOPLE ENTERING THE PREMISES TO CONSUME ALCOHOL ARE OF LEGAL ALCOHOL DRINKING AGE AND RECARD THEM IF THERE IS ANY QUESTION ABOUT THEIR AGE
* ENSURE A PERSON MATCHES THEIR VALID LEGAL IDENTIFICATION

This is a Wisconsin Department of Revenue approved Responsible Beverage Server Training Course in compliance with Sec. 125.17 (6) and 125.04 (5) (a) 5. Wis. Stats.

Verify online at servingalcohol.com

Verification Code

esJWxgGqjl

Date Issued

May 2nd, 2019

VALID FOR 2 YEARS

Learn more about this wallet card at http://servingalcohol.com/wallet-card

Wisconsin Bartender License

Name: Elizabeth Doyle

Certification Date: May 2nd, 2019

Certificate Code: esJWxgGqjl

Verify Online: servingalcohol.com

125.17(6) & 125.04(5)(a)5. Wis. Stats.

SERVING ALCOHOL INC

VALID FOR 2 YEARS

Auxiliary Questionnaire
Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name *(please print)* *(last name)*	*(first name)*	*(middle name)*
Doyle	Elizabeth	Rose

[redacted]

The *above named individual* provides the following information as a person who is *(check one)*:

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of a **partnership** which is making application for an alcohol beverage license.

☒ Member/Agent of The Candle Mercantile. LLC
(Officer / Director / Member / Manager / Agent) *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? 48 years
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? . . . . . ☐ Yes ☑ No
   If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. *(If more room is needed, continue on reverse side of this form.)*
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? . . . . . ☐ Yes ☑ No
   If yes, describe status of charges pending.
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? . . . . . ☐ Yes ☑ No
   If yes, identify.
   (Name, Location and Type of License/Permit)
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? . . . . . ☐ Yes ☑ No
   If yes, identify.
   (Name of Wholesale Licensee or Permittee) *(Address By City and County)*
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
SalonCentric, a Division of Loreal USA	10 Hudson Yards 347 10th Ave. New York, NY 10001	4/2003	Present
Employer's Name	Employer's Address	Employed From	To
Ricoh USA formerly IKON Office Solutions	6737 W Washington St, #2365 West Allis, WI 53214	1994	2003

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000.

Elizabeth R. Doyle
(Signature of Named Individual)

Auxiliary Questionnaire
Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name *(please print)*	*(last name)*	*(first name)*	*(middle name)*
	Myers	Leigh Ann	

[redacted]

The *above named individual* provides the following information as a person who is *(check one)*:

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of a **partnership** which is making application for an alcohol beverage license.

☒ Member *(Officer / Director / Member / Manager / Agent)* of The Candle Mercantile, LLC *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? Part time resident
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? . . . . . ☐ Yes ☑ No
   If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. *(If more room is needed, continue on reverse side of this form.)*
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? . . . . . ☐ Yes ☑ No
   If yes, describe status of charges pending.
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? . . . . . ☐ Yes ☑ No
   If yes, identify. *(Name, Location and Type of License/Permit)*
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? . . . . . ☐ Yes ☑ No
   If yes, identify. *(Name of Wholesale Licensee or Permittee)* *(Address By City and County)*
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Morris Bean & Company	777 E Hyde Road Yellow Springs, OH 45387	January 2016	Present
Employer's Name	Employer's Address	Employed From	To
PerfectServe, Inc.	1024 Investment Dr. #200 Knoxville, TN 37932	December 2011	March 2016

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000.

(Signature of Named Individual)

Application for Temporary Class "B" / "Class B" Retailer's License

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE $ 10.00 Application Date: 5/7/19

☐ Town ☐ Village ☒ City of Lake Geneva County of Walworth

The named organization applies for: *(check appropriate box(es).)*

☒ A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.

☐ A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning Oct 12, 2019 and ending Oct 13, 2019 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

1. Organization *(check appropriate box)* → ☒ Bona fide Club ☐ Church ☐ Lodge/Society ☐ Chamber of Commerce or similar Civic or Trade Organization ☐ Veteran's Organization ☐ Fair Association

(a) Name Lake Geneva Rotary Club

(b) Address P.O. Box 601 *(Street)* ☐ Town ☐ Village ☒ City

(c) Date organized 1979

(d) If corporation, give date of incorporation

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box: ☐

(f) Names and addresses of all officers:

President Martha Thelen

Vice President John Stensland

Secretary

Treasurer

(g) Name and address of manager or person in charge of affair: Bridget Leech - Lake Geneva Business Improvement District

P.O. Box 863 Lake Geneva, WI 53147

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number Beer tent will be set on the street between 727 Geneva St. and 726 Geneva St.

(b) Lot Block Geneva Street, near the intersection to Broad St.

(c) Do premises occupy all or part of building?

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover:

3. Name of Event

(a) List name of the event Lake Geneva Oktoberfest

(b) Dates of event Saturday, October 12 and Sunday October 13, 2019

DECLARATION

The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.

Rotary Club of Lake Geneva *(Name of Organization)*

Officer *(Signature/date)* Officer 5/7/19 *(Signature/date)*

Officer *(Signature/date)* Officer *(Signature/date)*

Date Filed with Clerk may 7, 2019 Date Reported to Council or Board

Date Granted by Council License No.

AT-315 (R. 11-15) Wisconsin Department of Revenue

Receipt #

SUPPLEMENTAL APPLICATION FORM
TEMPORARY CLASS "B" / "CLASS B" RETAILER'S LICENSE
CITY OF LAKE GENEVA

This form needs to be submitted as an attachment to the Application for Temporary Class "B" / "Class B" Retailer's License Form (Form AT-315) and returned to the City Clerk.

Applicant Organization: Lake Geneva Rotary Club

Name of Event: Lake Geneva Oktoberfest

Date of Event Saturday, October 12 and Sunday October 13, 2019

Time of Event: 11:00am - 5:00pm both days
(Beginning) (Ending)

Event Contact Person: Bridget Leech

Contact Phone: 262-395-8128

Contact Email: bridget@streetsoflakegeneva.com

Will a Licensed Operator be serving or supervising the service of alcohol?
***This <u>includes</u> Temporary Operator's who <u>have</u> completed the Responsible Beverage Servers class.**

☒ Yes ☐ No

PLEASE FILL ALL BLANKS COMPLETELY.
THIS INFORMATION IS NEEDED TO COMPLETELY PROCESS YOUR TEMPORARY RETAILER'S LICENSE APPLICATION.

For Office Use Only

Date Filed: 5/8/19 Receipt No: _____

Total Amount: $10.00

Forwarded to Police Chief: 5/8/19

Recommendation: _____ Approved Denied

Verification that not more than 2 temporary wine licenses have been issued to this applicant within the last 12 months: _____

FLR Approval: _____ License Issued: _____
Council Approval: _____ License Number: _____
License Expires: _____

MAILTO: Organization

CITY OF LAKE GENEVA
MASSAGE ESTABLISHMENT APPLICATION

$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original ☐ or Renewal ☒

Application must be accompanied by the following documents:

1. $50.00 License fee, payable to the City of Lake Geneva and due upon application
2. Copy of Applicant's Driver's License
3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
5. Copy of each Massage Technician's Driver's License
6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: The Therapeutic Touch

Corporate Name (if applicable): M & M Clausen dba The Therapeutic Touch, LLC

Business Address (Physical): 601 W. Main St., Lake Geneva, WI

Mailing Address (if different): Same

City, State, Zip: Lake Geneva, WI 53147

Phone: 262-248-6888 Email: info@thetherapeutictouch.com

Please explain the nature of services to be provided: Massages & Facials

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Name: Max Clausen / Monica Clausen

[redacted]

☐ Copy of Driver's License Attached

Please provide names and addresses of any and all previous establishments where applicant was employed or subcontracted as a Massage technician during the last 3 years, including type of work performed and dates of employment:

See attached

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

☒ NO ☐ YES If yes, please explain:

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state?

☒ NO ☐ YES If yes, provide the 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 his/her knowledge and belief.

APPLICANT SIGNATURE: _____ Date: 5-22-19

For Office Use Only

Date Filed: May 22, 2019 Receipt #: 10003923 Amt Paid: $50

Forwarded to Police Dept: May 22, 2019 Background Completed: 5-26-19

Police Chief Recommendation: _____ Approved Denied

Fingerprinting required for new establishments – Fingerprinted by LGPD: ☐

Forwarded to Building Dept: _____ *Inspector approval required for new establishments*

Building Inspector Recommendation: _____ Approved Denied

FLR/Council Approval Dates: _____ License #: _____

Verified: Stark ☐ MSI ☐ Notes/Conditions: _____

Copies to: Building & Zoning Police Chief Fire Chief

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

CITY OF LAKE GENEVA
TAXI COMPANY LICENSE APPLICATION

Please Check:

☒ Original Application

☐ Renewal of Current License

Fees of $50.00 for first car and $25.00 per each additional car are due upon application

Annual License Expires June 30th each year

Please fill in all blanks completely, as incomplete applications will be rejected.

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: Lakefront Shuttle

Bus. Address (Physical): 300 Wrigley Dr Lake Geneva, WI 53147

Mailing Address (if different): _____

City, State, Zip: _____

Bus. Phone: 262-203-4769 Fax: _____

E-Mail: info@lakefrontshuttle.com

Name of Liability Carrier: National Liability & Fire Ins / Glass Insurance

Policy Number: _____

BUSINESS OWNER/AGENT INFORMATION

Owner/Agent Name: Robert McAllister

[redacted]

PLEASE ANSWER THE FOLLOWING QUESTIONS COMPLETELY

1. Have you been previously licensed to operate a taxicab company? YES NO

   If Yes, please state where: _____

2. Have you ever had a license revoked? YES NO

   If Yes, please explain: _____

TAXI VEHICLE INFORMATION

Total Number of Vehicles to be operated: 1

Vehicle #1		
Ford	E450	2005
Make	Model	Year
12 plus driver		
Capacity	License Plate No.	
1FDXE45S55HB31415		
VIN	Certificate of Title No.	

Vehicle #2		
Make	Model	Year
Capacity	License Plate No.	
VIN	Certificate of Title No.	

Vehicle #3		
Make	Model	Year
Capacity	License Plate No.	
VIN	Certificate of Title No.	

Vehicle #4		
Make	Model	Year
Capacity	License Plate No.	
VIN	Certificate of Title No.	

APPLICANT SIGNATURE

_____ DATE: 5/12/19

For Office Use Only

Date Filed: May 17, 2019	Police Chief
Receipt No: 10009799	Recommendation:
Total Amount: $50	~~Approved~~ Denied
Forwarded to Police Chief: 5/17/19	
Forwarded to City Attorney:	City Attorney Approval of Liability
Verified: Stark ☐ MSI ☐	Insurance:
Notes:	
FLR Approval:	License Date:
Council Approval:	License Number:

VEHICLE SAFETY INSPECTION

Instructions: The licensee shall provide this form to the garage, dealership or auto repair shop to be completed by the inspector upon completion of the vehicle inspection. The licensee shall submit the completed form to the City Clerk.

Bo McAllister
Vehicle Owner/Agent Name

Vehicle – Year	Make	Model	Color	Odometer Reading	License Plate Number
2005	Ford	E450	White	99,924	673YUP

Name – Inspecting Company or Agency	Name – Inspector	Telephone Number
Mike's Auto Repair	Eduardo Soto	262-248-3300

Address	City	State	Zip Code
923 Williams St	Lake Geneva	WI	53147

VEHICLE INSPECTION CHECKLIST

Item	Pass	Repair / Replace
BRAKES	☑	☐
1. Failure indicator light	☑	☐
2. System integrity	☑	☐
3. Pedal reserve	☑	☐
4. Disc / drum condition	☑	☐
5. Hoses and assembly	☑	☐
SUSPENSION	☑	☐
6. Shock absorbers / struts	☑	☐
7. Springs	☑	☐
8. Shackles	☑	☐
9. Modifications	☑	☐
STEERING	☑	☐
10. Lash	☑	☐
11. Free turning	☑	☐
12. Linkage play	☑	☐
13. Power system	☑	☐
EXHAUST SYSTEM	☑	☐
14. Leaks	☑	☐
15. Legal muffler	☑	☐
16. Tailpipe	☑	☐

Item	Pass	Repair / Replace
SAFETY FEATURES	☑	☐
17. Turn signals operational	☑	☐
18. Head lights	☑	☐
19. Tail lights	☑	☐
20. Brake lights	☑	☐
21. Horn	☑	☐
22. Windows / Windshield (cracks / chips)	☑	☐
23. Front seat safety belts condition	☑	☐
24. Back seat safety belts condition	☑	☐
25. Door locks operational	☑	☐
WIPERS / WIPER BLADES	☑	☐
26. Wipers operational	☑	☐
27. Blades contact	☑	☐
28. Blades condition	☑	☐

TIRES – FRONT		Lft	Rt	Lft	Rt
29. Tread depth	15/32	☑	☑	☐	☐
30. Matching		☑	☑	☐	☐
31. Condition		☑	☑	☐	☐

TIRES – REAR		Lft	Rt	Lft	Rt
32. Tread depth	7/32	☑	☑	☐	☐
33. Matching		☑	☑	☐	☐
34. Condition		☑	☐	☐	☐

Brief Comments – Refer to Item Number

SIGNATURE – Inspector	Date – Inspection
	05/14/19

MCALL-1

OP ID: JL

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/16/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER 262-248-5555
Glass Insurance Center
500 Commercial Ct, Ste 500
P.O. Box 1149
Lake Geneva, WI 53147-6149
Jodi Cordes

CONTACT NAME: Jodi Cordes
PHONE (A/C, No, Ext): 262-248-5555 FAX (A/C, No): 262-248-5544
E-MAIL ADDRESS: jcordes@glassinsurancecenter.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : National Liability & Fire Ins	
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Robert McAllister DBA
Lake Front Shuttle Service
PO Box 163
Lake Geneva, WI 53147

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE / OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY / PRO-JECT / LOC OTHER:						EACH OCCURRENCE	$
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
							GENERAL AGGREGATE	$
							PRODUCTS - COMP/OP AGG	$
								$
A	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY X SCHEDULED AUTOS HIRED AUTOS ONLY NON-OWNED AUTOS ONLY			73APR367314	08/18/2018	08/18/2019	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB / OCCUR EXCESS LIAB / CLAIMS-MADE DED / RETENTION $						EACH OCCURRENCE	$
							AGGREGATE	$
								$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					PER STATUTE / OTH-ER	
							E.L. EACH ACCIDENT	$
							E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

2005 Ford E450 1FDXE45S55HB31415 - 12 passenger

CERTIFICATE HOLDER

City of Lake Geneva
626 Geneva St
Lake Geneva, WI 53147

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Jodi Cordes

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RESOLUTION OF THE COMMON COUNCIL			
Resolution authorizing the use of Contingency funds for additional Comprehensive Plan workshops and focus groups, in an amount not to exceed $6,716			
Committee:	Finance considered on June 4, 2019		
Fiscal Impact:	N/A		
File Number:	**19-R43**	**Date:**	June 13, 2019

Whereas, the Lake Geneva Common Council approved the 2019 Operating Budget for the General Fund, and,

Whereas, a Contingency account was budgeted at $151,087 for 2019 unbudgeted, approved expenditures, and,

Whereas, the Finance, Licensing and Regulation Committee approved the request for the Comprehensive Plan increases totaling $6,716, and

Whereas, this expenditure was not included in the 2019 General Fund Operating Budget and utilizing Contingency funds for this purpose would be appropriate, and

Now Therefore be it Resolved that the Lake Geneva Common Council approve this resolution to adopt a budget amendment allowing for a transfer in the 2019 General Fund Operating Budget as follows:

Increase Acct #11-69-30-52160, Comprehensive Plan, by $6,716
Decrease Acct #11-10-00-57800, Contingency Fund, by $6,716

Current balance of the contingency fund including this expenditure is $122,755.00

Granted by action of the Common Council of the City of Lake Geneva this 13h day of June, 2019.

Council Action: ☐ **Adopted** ☐ **Failed** **Vote** _____

Mayoral Action: ☐ **Accept** ☐ **Veto**

_____
Thomas Hartz, Mayor Date

Attest:

_____
Lana Kropf, City Clerk Date

Resolution 19-R44

The Common Council of the City of Lake Geneva hereby establishes the following Pay Scale Grades and Pay Scale for the following Full-time Non-Represented Employees for the 2019 Budget Year effective January 1, 2019:

		Grade Salary Range			
Position	**Assigned Pay Scale Grade**	**Min**	**Mid**	**Max**	
Full Time Salaried Staff:					
City Administrator	23	96,575.06	111,061.32	125,547.57	Pay Scale 21 to 23
Police Chief	19	76,496.49	87,970.96	99,445.44	
Finance Director (Comptroller)	18	72,166.50	82,991.48	93,816.45	
Director of Public Works	18	72,166.50	82,991.48	93,816.45	
Police Administrative Lieutenant	17	68,081.60	78,293.85	88,506.09	
Police Patrol Lieutenant	16	64,227.93	73,862.12	83,496.31	
Building & Zoning Administrator	15	60,592.39	69,681.24	78,770.10	
Police Sergeant*	14	57,162.63	65,737.02	74,311.42	
City Clerk	13	53,927.01	62,016.06	70,105.11	
Parking Manager	12	50,874.54	58,505.72	66,136.90	
PD Communications Supervisor*	10	45,278.16	52,069.88	58,861.60	
PD Data Systems Administrator*	7	38,016.41	43,718.87	49,421.34	
PD Confidential Administrative Assistant*	7	38,016.41	43,718.87	49,421.34	
Telecommunicators*	6	35,864.54	41,244.22	46,623.90	
Data Specialist*	6	35,864.54	41,244.22	46,623.90	
Full time Hourly Staff:					
DPW Superintendent	14	27.4820	31.6043	35.7266	
Lead Financial Analyst/Treasurer	11	23.0744	26.5356	29.9968	
Human Resources/Benefits Specialist	11	23.0744	26.5356	29.9968	
DPW Arborist/Lead	11	23.0744	26.5356	29.9968	
DPW Lead Operator	10	21.7683	25.0336	28.2988	
Assistant City Clerk	9	20.5362	23.6166	26.6970	
Cemetery Sexton	8	19.3737	22.2798	25.1859	Corrected Pay Grade 8
Heavy Equipment Operators	8	19.3737	22.2798	25.1859	
Equipment Operators	7	18.2771	21.0187	23.7603	
Cemetery Equipment Operator	7	18.2771	21.0187	23.7603	
Riviera Maintenance Engineer	7	18.2771	21.0187	23.7603	
Building & Grounds Administrator	7	18.2771	21.0187	23.7603	
Municipal Court Clerk	7	18.2771	21.0187	23.7603	
Front Desk Counter Clerk	7	18.2771	21.0187	23.7603	
Building & Zoning Adm. Asst.	7	18.2771	21.0187	23.7603	
Parking Clerk	7	18.2771	21.0187	23.7603	
Cemetery Laborer / Operator	6	17.2426	19.8290	22.4153	
DPW Laborer / Operator	6	17.2426	19.8290	22.4153	
Custodian	5	16.2666	18.7066	21.1465	
Permanent Part-time Staff:					

Notes:

* Salaried Employees that receive Overtime.

THOMAS HARTZ, Mayor

LANA KROPF, City Clerk

Resolution 19-RXX

The Common Council of the City of Lake Geneva hereby establishes the following Pay Scale Grades and Pay Scale for the following Part-time Non-Represented Employees for the 2019 Budget Year effective January 1, 2019:

			Grade Salary Range		
Position	**% Pro Rated**	**Assigned Pay Scale Grade**	**Min**	**Mid**	**Max**
Permanent Part Time Salaried Staff:					
City Attorney *	60%	22	54,665.13	62,864.90	71,064.67
City Judge *	15%	20	12,162.94	13,987.38	15,811.82
Fire Chief	50%	17	34,040.80	39,146.92	44,253.04
Deputy Fire Chief	8%	12	4,069.96	4,680.46	5,290.95
Assistant Fire Chief	5%	10	2,263.91	2,603.49	2,943.08
Emergency Mgmt Deputy Director	30%	10	13,583.45	15,620.96	17,658.48
Permanent Part Time Hourly Staff:					
PD Part time Patrol Officer		9	20.5362	23.6166	26.6970
Financial Analyst		9	20.5362	23.6166	26.6970
Harbormaster		7	18.2771	21.0187	23.7603
Assisstant Building Inspector/Code Enforcement		7	18.2771	21.0187	23.7603
City Hall Counter Clerk		7	18.2771	21.0187	23.7603
Part-time Telecommunicator		6	17.2426	19.8290	22.4153
Lead Booking Officer		4	15.3458	17.6477	19.9496
FD Confidential Administrative Assistant		4	15.3458	17.6477	19.9496
Assistant Court Clerk		4	15.3458	17.6477	19.9496
PD Booking Officer		3	14.4772	16.6488	18.8203
Parking Maintenance Lead		2	13.6577	15.7064	17.7550
Parking Enforcement		1	12.8846	14.8173	16.7500
Videographer		1	12.8846	14.8173	16.7500
Chief Inspector poll workers per hour		0.4	9.0832	10.4456	11.8081
Poll Workers per hour		0.2	8.0840	9.2966	10.5092
Seasonal Part-time Hourly Staff:					
Beach Supervisor		1	12.8846	14.8173	16.7500
Street Seasonal Lead		1	12.8846	14.8173	16.7500
Asst Beach Supervisor		0.9	12.1553	13.9786	15.8019
Street Seasonal		0.9	12.1553	13.9786	15.8019
Boat Launch Attendants		0.8	11.4673	13.1874	14.9075
Riviera Security Guards		0.8	11.4673	13.1874	14.9075
Beach Attendants		0.5	9.6282	11.0724	12.5166
Crossing Guards		0.5	9.6282	11.0724	12.5166

THOMAS HARTZ, Mayor

LANA KROPF, City Clerk

CITY OF LAKE GENEVA PERSONNEL POLICY

COMPENSATION POLICY

Adopted by Common Council	7/11/2016
Amended by Common Council	11/14/2016 2/13/2017 6/10/2019

I. PURPOSE

The City recognizes that employees play a significant role in the provision of services in the community. The City strives to recruit and retain high quality employees to provide public services. It is the policy of the City to provide fair and competitive pay and benefits to its employees. Compensation, inclusive of all pay and benefits, shall be established and adjusted periodically to ensure the city's ability to recruit, motivate and retain quality employees. The City's pay plan shall be based on the principles of job content and responsibility, with compensation based on merit and local market conditions.

II. DEPARTMENT RESPONSIBLE

The City Administrator will ensure that this policy is enforced.

III. COMMITTEE OVERSIGHT

The Personnel Committee and Common Council will oversee this policy.

IV. OBJECTIVES

- Provide fair and equitable rates of pay to employees with respect to comparable municipal employers.
- Maintain an equitable compensation relationship among the various positions within the City.
- Provide a rational, consistent, and objective method to establish and maintain a wage/salary structure that includes a market rate, with a minimum and maximum wage rate, for each position.

- Ensures pay rates and employee progression through the pay range are based on individual performance that meets or exceeds expectations and reflects changing economic conditions.
- Establishes and maintains a market position which is fiscally responsible with public resources.
- Establishes pay rates that allow the City to successfully compete for, recruit and retain qualified employees

V. POSITION CLASSIFICATION PLAN

The City of Lake Geneva utilizes an objective classification system to rate job positions. The basis of the system is a written job description and job evaluation points for each position. The City Administrator is responsible for the administration and maintenance of the Classification Plan with job classification changes approved by the Personnel Committee and City Council.

The job description includes essential duties; education; experience; training; licensure; certification(s); level of knowledge; and skills and abilities required to perform essential duties of the position.

Job evaluation points are assigned to each position. Job descriptions are the basis for the assignment of job evaluation points. The job evaluation point totals are used to assign a position to a pay range.

VI. PAY RATE ADJUSTMENTS

The City Administrator shall be responsible for implementing all salary adjustments. Employees shall be advised of all salary changes. Salary adjustments may occur as result of the following:

- Cost-of-Living Adjustment to Pay Scale: The Common Council may grant a cost-of-living adjustment each fiscal year based on the recommendation of the City Administrator and budgetary constraints. Cost of living increases shall be applied uniformly to each pay range in the Pay Scale.
- Performance-Based Increase: Performance-based increases may be awarded in conjunction with the City's Performance Evaluation Program. The Performance Evaluation Program shall include the following performance levels:
    - Excellent (E)
    - Very Good (VG)

- Satisfactory (S)
- Needs Improvement (NI)
  Employees who receive a performance rating below "satisfactory" shall be placed on a performance improvement plan and shall be ineligible for a performance-based wage increase.

VII. PERFORMANCE EVALUATIONS

Employee performance evaluations shall be completed annually, between July and November, for implementation in January of the subsequent year. Performance increases are based on individual employee's performance evaluation rating. The maximum amount of a performance adjustment shall be established annually by the Common Council.

VIII. PERFORMANCE-BASED INCREASE

Employees whose base pay is less than the maximum rate established for their respective position range will be eligible for an annual step advancement and performance adjustment in accordance with the following:

1) Performance Advancement for Employees Below Mid Range: Annually and until the employee reaches the mid-point rate of the pay range, covered employees shall be eligible to advance to a higher pay rate amount in the Wage and Salary Schedule. Advancement shall be granted as a percentage, up to 100%, of the maximum allowed Performance Based Increase in accordance with the scoring method.

~~2) Performance Adjustment for Employees above Mid Range: Upon attaining the mid-point rate of the pay range, covered employees become eligible for a performance increase annually thereafter. Advancement beyond the mid-point of the salary range shall be granted as a percentage, up to 75%, of the maximum allowed Performance Based Increase in accordance with the scoring method.~~

~~3)~~2) Performance Bonus for Employees above the Maximum Range: An employee shall not be paid at a rate exceeding the maximum step in the pay range. Employees whose base pay has reached the maximum rate for their respective position range shall be eligible to receive a Performance Bonus. The criteria for a performance bonus shall be the same as established for performance adjustment for employees above mid range. A performance bonus shall be recognized to be a one-time payment that does not increase the employee's base pay rate.

~~4)~~3) Scoring Method for Performance Based Increase. Using the Employee Performance Evaluation Form, the scoring for each goal/criteria item and for the overall goals and performance rating, shall be as follows:

Excellent (E) equals 10 points.
Very Good (VG) equals 8 points.
Satisfactory (S) equals 6 points.
Needs Improvement (NI) equals 4 points.

The completed Employee Performance Evaluation Form shall be submitted to the City Human Resources Department (HR). HR shall calculate the Total Evaluation Score and the Total Score Possible and then derive the Percentage Eligible Score. The Total Merit Increase percentage as determined by the Common Council shall be multiplied by the Percentage Eligible Score to determine the Merit Increase % (percentage) Earned. The Merit Increase % Earned shall be applied as set forth in the Compensation Policy, Section VIII Items (1), (2), and (3).

IX. NEW EMPLOYEES

The annual step advancement or performance adjustment for employees with less than one year of service shall be postponed to the anniversary date of employment and unless otherwise agreed upon by the Personnel Committee. ~~The City Administrator may approve hiring from the minimum to midpoint pay range.~~ Starting salary will be substantiated based on skills and experience. ~~Hiring above midpoint shall require Personnel Committee approval.~~ The City Administrator shall approve pay wage within appropriate wage grade, prior to employment offer is initiated by Department Head.

X. SPECIAL ADJUSTMENTS

In the event that an employee's experience; and/or skills and abilities; and/or performance substantially exceed expectations for an employment position(s), the Personnel Committee may recommend special adjustments in addition to the cost-of-living and performance-based increases. The City Administrator may approve progress promotions (already approved progressions such as Laborer to Equipment Operator, and Equipment Operator to Heavy Equipment Operation) from the minimum to mid point in the new pay scale range. New salary will be substantiated based on skills and experience. Promotions above midpoint shall require Personnel Committee approval.

XI. ELECTED POSITIONS OF CITY ATTORNEY AND MUNICIPAL JUDGE

The elected positions of City Attorney and Municipal Judge are exempt from the annual evaluation process and shall receive the annual cost of living increase when there is one.

City of Lake Geneva
Finance, License, & Regulation Committee
June 4, 2019

<u>Prepaid Checks</u>

5/20/19 - 5/31/19

Total:
$16,930.37

Checks over $5,000:

$ 8,892.03 US Bank - PD Credit Card

Report Criteria:
Report type: Summary
[Report].Check Issue Date = 05/22/2019,05/29/2019
Check.Type = {<>} "Adjustment"
Bank.Bank account = "043230"

Check Issue Date	Check Number	Vendor Number	Payee	Amount	
05/22/2019	70598	2108	AT&T LONG DISTANCE	122.25	
05/22/2019	70599	2800	KORNAK, EMILY	57.42	
05/22/2019	70600	830	MONAHAN, MICHAEL	12.76	
05/22/2019	70601	3038	NELSON, BRANDI	32.35	
05/22/2019	70602	5225	NETTESHEIM, GLEN	272.60	
05/22/2019	70603	5001	VERIZON WIRELESS	40.01	
05/22/2019	70604	5477	WMCCA	540.00	
05/22/2019	70605	5287	KOSTMAN, REBECCA	122.38	
05/22/2019	70606	2876	LAKE GENEVA POLICE DEPT	.00	V
05/22/2019	70607	4915	TIETZ, KATIE	19.50	
05/22/2019	70608	5001	VERIZON WIRELESS	1,011.22	
05/22/2019	70609	3124	PETTY CASH - POLICE DEPT	75.04	
05/29/2019	70674	2104	AT&T	1,978.46	
05/29/2019	70675	2625	HALL, KAREN	364.87	
05/29/2019	70676	2670	HOME DEPOT CREDIT	642.22	
05/29/2019	70677	2787	KINGWILL, PAMELA	12.76	
05/29/2019	70678	2800	KORNAK, EMILY	99.76	
05/29/2019	70679	5386	MCNEIL, KYLE	20.00	
05/29/2019	70680	3024	MUTUAL OF OMAHA	1,289.62	
05/29/2019	70681	241	REGISTRATION FEE TRUST	74.50	
05/29/2019	70682	3362	STANG, KAY	281.88	
05/29/2019	70683	5376	SWANSON, SARA	299.86	
05/29/2019	70684	4918	TIME WARNER CABLE	63.29	
05/29/2019	70685	4973	US BANK	8,892.03	
05/29/2019	70686	4975	US CELLULAR	532.96	
05/29/2019	70687	5034	WALWORTH CO REGISTER OF DEEDS	60.00	
05/29/2019	70688	5055	WATSON, PEGGY	12.63	
Grand Totals:				16,930.37	

Summary by General Ledger Account Number

GL Account	Debit	Credit	Proof
11-00-00-13910	2,311.98	.00	2,311.98
11-00-00-21100	75.04	15,170.98-	15,095.94-
11-10-00-53160	60.00	.00	60.00
11-10-20-51340	1,003.40	.00	1,003.40
11-12-00-52210	102.79	.00	102.79
11-12-00-53320	540.00	.00	540.00
11-14-20-53990	29.98	.00	29.98
11-15-10-53200	305.00	.00	305.00
11-16-10-52210	983.12	.00	983.12
11-16-10-53500	12.63	.00	12.63
11-21-00-51380	215.52	.00	215.52

M = Manual Check, V = Void Check

GL Account	Debit	Credit	Proof
11-21-00-51390	1,015.30	.00	1,015.30
11-21-00-52210	1,794.45	.00	1,794.45
11-21-00-53100	39.14	.00	39.14
11-21-00-53120	142.52	71.26-	71.26
11-21-00-53300	344.45	.00	344.45
11-21-00-53310	735.97	.00	735.97
11-21-00-53420	141.32	.00	141.32
11-21-00-53610	74.50	.00	74.50
11-21-00-53800	1,889.33	.00	1,889.33
11-21-00-53990	486.68	3.78-	482.90
11-21-00-54110	49.00	.00	49.00
11-21-00-54150	122.38	.00	122.38
11-21-00-58100	2,015.35	.00	2,015.35
11-22-00-52210	82.53	.00	82.53
11-24-00-52620	21.90	.00	21.90
11-29-00-52210	40.01	.00	40.01
11-32-10-52210	119.83	.00	119.83
11-52-00-53400	491.90	.00	491.90
40-00-00-21100	.00	314.94-	314.94-
40-52-11-53990	29.89	.00	29.89
40-54-10-52210	11.46	.00	11.46
40-55-10-52210	86.00	.00	86.00
40-55-20-52210	37.27	.00	37.27
40-55-20-52400	16.97	.00	16.97
40-55-20-53500	133.35	.00	133.35
42-00-00-21100	.00	186.44-	186.44-
42-34-50-51370	16.81	.00	16.81
42-34-50-52210	169.63	.00	169.63
48-00-00-21100	.00	76.06-	76.06-
48-00-00-51370	25.89	.00	25.89
48-00-00-52210	50.17	.00	50.17
61-00-00-21100	.00	78.72-	78.72-
61-00-00-53110	2.30	.00	2.30
61-00-00-92625	76.42	.00	76.42
62-00-00-21100	.00	111.17-	111.17-
62-00-00-92100	16.34	.00	16.34
62-00-00-92625	94.83	.00	94.83
99-00-00-21100	.00	1,067.10-	1,067.10-
99-00-00-51370	72.27	.00	72.27
99-00-00-52110	12.76	.00	12.76
99-00-00-52210	230.39	.00	230.39
99-00-00-53320	751.68	.00	751.68
Grand Totals:	17,080.45	17,080.45-	.00

Dated: _____

Mayor: _____

City Council: _____

_____

_____

_____

_____

_____

City Recorder: _____

Report Criteria:
Report type: Summary
[Report].Check Issue Date = 05/22/2019,05/29/2019
Check.Type = {<>} "Adjustment"
Bank.Bank account = "043230"

City of Lake Geneva
Finance, License, & Regulation Committee
June 4, 2019

Accounts Payable

		Fund #		
1.	General Fund	11	$	67,939.16
2.	Debt Service	20	$	-
3.	Lakefront	40	$	3,198.29
4.	Capital Projects	43	$	15,900.18
5.	Parking	42	$	6,198.70
6.	Cemetery	48	$	186.06
7.	Equipment Replacement	50	$	14,394.85
8.	Library Fund	99	$	1,786.06
9.	Impact Fees	45	$	-
10.	Tourism Commission	47	$	625.00
11.	Use of Building Funds-Library	98	$	-
Total All Funds				**$110,228.30**

CITY OF LAKE GENEVA
ACCOUNTS PAYABLE UNPAID ITEMS OVER $5,000

FINANCE, LICENSE, & REGULATION COMMITTEE
6/4/2019

TOTAL UNPAID ACCOUNTS PAYABLE	**$**	**110,228.30**

ITEMS > $5,000

Accurate Appraisal -60% of 2019 Contract	$	24,600.00
Down to Earth Contractors - Storm Drain Repairs	$	15,112.68
Baycom Inc - Mobile Data Car #1, Ambulance #2	$	7,782.00
General Fire Equipment Co - PD Squad #204-19 Equipment	$	6,514.90
Gateway Technical College - Fire/EMS Training, Tuition, Fees	$	5,316.66
Balance of Other Items	$	50,902.06

Report Criteria:
Detail report.
Invoices with totals above $0.00 included.
Only unpaid invoices included.
Invoice.Batch = "190610","190611","F90610","F90611","P90610","P90611","L90610","L90611"
Invoice Detail.GL account (2 Characters) = {<>} "61"
Invoice Detail.GL account (2 Characters) = {<>} "62"

Invoice Number	Invoice Date	Description	GL Account and Title		Net Invoice Amount
ACCURATE APPRAISAL LLC					
ACCAPP2019-	05/20/2019	60% OF 2019 CONTRACT	11-15-40-52100	ASSESSOR CONTRACTED SERVICES	24,600.00
Total ACCURATE APPRAISAL LLC:					24,600.00
ACL SERVICES LLC					
X670-201904-0	05/01/2019	BLOOD DRAW	11-21-00-53800	PD SPECIAL INVESTIGATIONS	14.21
Total ACL SERVICES LLC:					14.21
ADAMS ELECTRIC INC					
10689001	05/07/2019	REMOTE MONITORING SYSTE	11-22-00-53500	BLDG MAINT SUPPLIES-FIREHOUSE	650.00
Total ADAMS ELECTRIC INC:					650.00
ALADTEC, INC.					
2019-1330	05/14/2019	SCHEDULING SYSTEM	11-22-00-54500	FIRE IT SERVICES	1,495.00
Total ALADTEC, INC.:					1,495.00
ASPINALL, NEAL					
197582	05/19/2019	RIVIERA/CITY LOGO DESIGN	47-70-00-57150	PROMOTIONAL GRANT	625.00
Total ASPINALL, NEAL:					625.00
BAYCOM INC					
EQUIPINV_019	03/26/2019	MOBILE DATA-CAR#1/AMB#2	50-22-00-58000	FIRE EQUIPMENT PURCHASES	7,782.00
Total BAYCOM INC:					7,782.00
BLACK POINT ESTATE & GARDENS					
038	03/20/2019	CAMPS OF LG-ADULT PRG 6/10	99-00-00-54150	LIBRARY PROGRAMS	25.00
Total BLACK POINT ESTATE & GARDENS:					25.00
BOUND TREE MEDICAL LLC					
83208675	05/14/2019	BBP RESTRAINT,GLOVES,SYRI	11-22-00-58100	EMS EQUIPMENT/SUPPLIES	617.57
83212973	05/17/2019	PERS PROTECTION KIT	11-22-00-58100	EMS EQUIPMENT/SUPPLIES	7.39
Total BOUND TREE MEDICAL LLC:					624.96
BUMPER TO BUMPER AUTO PARTS					
662-402770	01/30/2019	DIESEL	11-22-00-53510	EQUIP MAINT SUPPLIES-FIRE DEPT	32.96
662-407735	05/04/2019	OIL	11-22-00-53510	EQUIP MAINT SUPPLIES-FIRE DEPT	13.78
662-407943	05/09/2019	SWITCHES-BEACH GROOMER	40-54-10-53520	BEACH MAINTENANCE SUPPLIES	5.99
662-408068	05/10/2019	FUSES-CAR#2	11-22-00-53510	EQUIP MAINT SUPPLIES-FIRE DEPT	4.51
662-408738	05/23/2019	SWITCHES-BEACH GROOMER	40-54-10-53520	BEACH MAINTENANCE SUPPLIES	23.08
662-408773	05/23/2019	WIRE-BEACH GROOMER	40-54-10-53520	BEACH MAINTENANCE SUPPLIES	2.89

Invoice Number	Invoice Date	Description	GL Account and Title		Net Invoice Amount
Total BUMPER TO BUMPER AUTO PARTS:					83.21
CDW GOVERNMENT INC					
SCT2737	05/01/2019	COMPUTER SUPPLIES	11-21-00-53050	DATA PROCESSING	96.35
SHG9986	05/14/2019	ANTI-VIRUS RENEWAL	11-15-10-54500	COMPUTER IT SVC & EQUIPMENT	570.40
Total CDW GOVERNMENT INC:					666.75
CHERVAK, MARIIA					
REFUND 7/25/	05/07/2019	REFUND-BD038168-4,BD038169	11-12-00-45100	COURT PENALTIES & FINES	34.10
Total CHERVAK, MARIIA:					34.10
CONWAY SHIELD					
0441293-IN	05/30/2019	SCBA COMPRESSOR REPAIR	11-22-00-52400	EQUIPMENT REPAIRS-FIRE DEPT	273.00
Total CONWAY SHIELD:					273.00
DAM ROAD GUN SHOP INC					
235673	05/08/2019	UNIFORM-TRACY	11-21-00-51380	PD UNIFORM ALLOWANCE	450.00
316441	05/04/2019	UNIFORM-GREETHAM	11-21-00-51380	PD UNIFORM ALLOWANCE	592.95
Total DAM ROAD GUN SHOP INC:					1,042.95
DARIEN MUNICIPAL COURT					
WARRANT-DA	05/30/2019	WARRANT #19-6649/DAVIS	11-12-00-24280	COURT FINES-OTHER	1,000.00
Total DARIEN MUNICIPAL COURT:					1,000.00
DATA EQUIPMENT SERVICES					
1200	05/14/2019	MODEM SVC-MAY	42-34-50-52210	TELEPHONE EXPENSE	990.00
1200	05/14/2019	MODEM SVC-MAY	40-54-10-53400	LUKE OPERATING AND CC EXP	45.00
Total DATA EQUIPMENT SERVICES:					1,035.00
DINGES FIRE COMPANY					
53939	02/11/2019	FIT TEST MACHINE FILTERS	11-22-00-58200	STATE MANDATED EQUIP TESTING	194.00
Total DINGES FIRE COMPANY:					194.00
DOWN TO EARTH CONTRACTORS INC					
7051	05/20/2019	STORM DRAIN RPR-MAXWELL/	43-32-10-17010	2018/2019 STREET IMP PROGRAM	3,012.64
7052	05/20/2019	STORM DRAIN RPR-EVERGRE	43-32-10-17010	2018/2019 STREET IMP PROGRAM	2,219.38
7053	05/20/2019	STORM DRAIN RPR-MAIN/COO	43-32-10-17010	2018/2019 STREET IMP PROGRAM	3,120.52
7054	05/20/2019	STORM DRAIN RPR-WRIGLEY	43-32-10-17010	2018/2019 STREET IMP PROGRAM	4,094.14
7055	05/20/2019	STORM DRAIN RPR-WELLS ST	43-32-10-17010	2018/2019 STREET IMP PROGRAM	2,666.00
Total DOWN TO EARTH CONTRACTORS INC:					15,112.68
DUNN LUMBER & TRUE VALUE					
757727	05/04/2019	GROUNDING CONNECTOR	11-22-00-53500	BLDG MAINT SUPPLIES-FIREHOUSE	16.99
757756	05/05/2019	NUTS,BOLTS,BITS-PROPERTY	11-21-00-53420	PD SPECIAL EQUIPMENT	32.47
758034	05/08/2019	LIGHT BULBS-LAMPS	99-00-00-53500	LIBRARY MAINT SUPPLIES	13.98
758171	05/09/2019	SUPPLIES-EVIDENCE RM	11-21-00-53420	PD SPECIAL EQUIPMENT	35.33
758226	05/09/2019	SUPPLIES-EVIDENCE RM	11-21-00-53420	PD SPECIAL EQUIPMENT	5.20
759184	05/20/2019	SPACKLING-PUBLIC RR	99-00-00-52500	LIBRARY BLDG REPAIR	5.29

Invoice Number	Invoice Date	Description	GL Account and Title		Net Invoice Amount
759222	05/20/2019	COUPLING,FASTENERS-RESTR	11-52-01-53500	BLDG MAINT & REPAIR	37.74
759227	05/20/2019	BATTERIES,CLEANER	40-54-10-53100	BEACH OFFICE SUPPLIES	12.28
759257	05/20/2019	PLUGS,BUSHING-BEACH HOUS	40-54-10-53520	BEACH MAINTENANCE SUPPLIES	13.46
759338	05/21/2019	SPRAY PAINT-WEST PIER	40-52-10-53510	EQUIP MAINT SUPP-BUOYS,STALLS	4.99
759363	05/21/2019	BATTERIES,BOLTS-BEACH HO	40-54-10-53520	BEACH MAINTENANCE SUPPLIES	14.08
759392	05/21/2019	BUSHING,TUBE-BEACH HOUSE	40-54-10-53520	BEACH MAINTENANCE SUPPLIES	19.27
759481	05/22/2019	2 CYCLE OIL-WEED EATERS	11-52-00-52500	EQUIPMENT REPAIR SERVICES	6.38
759485	05/22/2019	90 DEG ELBOWS-GENEVA/BRO	11-34-10-52610	STREET LIGHTS REPAIRS	5.98
759513	05/22/2019	CLOROX,MARKING PNT-TAG T	11-32-13-54300	TREE & BRUSH OPERATING SUPPLY	20.56
759540	05/22/2019	SQUAD KEYS #219-11	11-21-00-53610	PD EQUIP MAINT SERV COSTS	6.98
759881	05/25/2019	NUTS,BOLTS,BATTERIES	40-54-10-53520	BEACH MAINTENANCE SUPPLIES	17.99
760105	05/29/2019	BROOMS,PLUNGER-BEACH HO	40-54-10-53520	BEACH MAINTENANCE SUPPLIES	54.47
760124	05/29/2019	2-CYCLE OIL-TRIMMERS	11-32-10-53410	VEHICLE-FUEL & OIL	59.76
760220	05/29/2019	WHISK BROOM	11-32-10-53510	VEHICLE/EQUIPMENT MAINTENANCE	5.79
Total DUNN LUMBER & TRUE VALUE:					388.99
ELKHORN NAPA AUTO PARTS					
156380	05/17/2019	PUSH BUTTON FUSE-WAGON #	11-32-10-53510	VEHICLE/EQUIPMENT MAINTENANCE	3.63
Total ELKHORN NAPA AUTO PARTS:					3.63
EMERGENCY APPARATUS MAINT					
106169	05/13/2019	INSP/REPAIRS-SQUAD 2861	11-22-00-52400	EQUIPMENT REPAIRS-FIRE DEPT	152.82
Total EMERGENCY APPARATUS MAINT:					152.82
EMS MEDICAL BILLING ASSOCIATES					
APR 2019	05/01/2019	COMMISSIONS-APR	11-22-00-52140	OUTSIDE BILLING SERVICES	4,097.27
Total EMS MEDICAL BILLING ASSOCIATES:					4,097.27
EQUIPARTS					
114354	05/29/2019	PLUMBING PARTS-BEACH RR	40-54-10-53520	BEACH MAINTENANCE SUPPLIES	158.15
Total EQUIPARTS:					158.15
FHEG GATEWAY-RACINE CAMPUS					
718161	05/09/2019	EXAM PREP-BAUMANN	11-22-00-54120	TUITION REIMB PER CONTRACT	81.25
Total FHEG GATEWAY-RACINE CAMPUS:					81.25
FIRE SUPPRESSION CONSULTANTS LLC					
191086	05/07/2019	FIRE EXT-CAR#1	11-22-00-58000	FIRE EQUIPMENT/SUPPLIES	562.00
Total FIRE SUPPRESSION CONSULTANTS LLC:					562.00
FLOWER, JIM					
REIMB APR MI	04/30/2019	157 MILES-C/E	11-24-00-53300	BLDG INSPECTOR TRAVEL-MILEAGE	91.06
REIMB MAR M	03/31/2019	397 MILES-C/E	11-24-00-53300	BLDG INSPECTOR TRAVEL-MILEAGE	230.26
Total FLOWER, JIM:					321.32
FORD OF LAKE GENEVA					
68157	05/21/2019	AC,STEERING,BRAKES/FIX-CS	11-21-00-53610	PD EQUIP MAINT SERV COSTS	2,337.12
68215	04/26/2019	OIL CHANGE,TIRE REPAIR-#20	11-21-00-53610	PD EQUIP MAINT SERV COSTS	144.00
68241	04/30/2019	OIL CHANGE-#204	11-22-00-53610	FD-EQUIP MAINT SERV COST	31.79

Invoice Number	Invoice Date	Description	GL Account and Title		Net Invoice Amount
68243	04/30/2019	OIL CHANGE-#211	11-21-00-53610	PD EQUIP MAINT SERV COSTS	41.80
68361	05/09/2019	TIRE REPAIR-#204	11-21-00-53610	PD EQUIP MAINT SERV COSTS	30.95
68362	05/09/2019	OIL CHANGE-#201	11-21-00-53610	PD EQUIP MAINT SERV COSTS	30.09
Total FORD OF LAKE GENEVA:					2,615.75
FUN EXPRESS, LLC					
696304229-01	05/13/2019	YOUTH PRGM SUPPLIES	99-00-00-54150	LIBRARY PROGRAMS	88.23
696304229-02	05/13/2019	YOUTH PRGM SUPPLIES	99-00-00-54150	LIBRARY PROGRAMS	54.77
Total FUN EXPRESS, LLC:					143.00
GAGE MARINE CORP					
164772	05/28/2019	DINGHY RAMP REPAIR-WEST E	40-52-10-52640	BUOYS & BOAT STALLS-REPAIRS	106.50
Total GAGE MARINE CORP:					106.50
GALLS LLC					
012607014	04/30/2019	GOORSKEY-SHIRT	11-22-00-51380	FIRE DEPT UNIFORMS	63.37
012607019	04/30/2019	STELTENPOHL-SHIRT	11-22-00-51380	FIRE DEPT UNIFORMS	47.99
012618722	05/01/2019	UNIFORM-BOULAND	11-21-00-51380	PD UNIFORM ALLOWANCE	12.99
012678135	05/08/2019	UNIFORM PATCHES	11-22-00-51380	FIRE DEPT UNIFORMS	460.00
287596	05/01/2019	UNIFORM-WISNIEWSKI	11-21-00-51380	PD UNIFORM ALLOWANCE	44.95
287630	05/02/2019	INITIAL ISSUE-SPRINGHORN	11-21-00-51380	PD UNIFORM ALLOWANCE	18.95
Total GALLS LLC:					648.25
GAPPA SECURITY SOLUTIONS LLC					
18466	05/17/2019	KEYS-DOORS,VEHICLES/SUMM	11-32-10-53500	BLDG MAINT SUPPLIES-STR DEPT	76.25
Total GAPPA SECURITY SOLUTIONS LLC:					76.25
GATEWAY TECHNICAL COLLEGE					
24534	04/30/2019	TRAINING-KOSTMAN	11-21-00-54150	TUITION & BOOKS PER CONTRACT	948.48
24616	05/21/2019	TUITION/FEES	11-22-00-54100	FIRE TRAINING PAY	161.25
24616	05/21/2019	TUITION/FEES	11-22-00-55100	EMS TRAINING PAY	4,475.33
24678	05/29/2019	CREDIT TO #24616	11-22-00-55100	EMS TRAINING PAY	268.40-
Total GATEWAY TECHNICAL COLLEGE:					5,316.66
GENERAL COMMUNICATIONS INC					
269212	05/09/2019	RADIO PARTS-CAR #1	50-22-00-58000	FIRE EQUIPMENT PURCHASES	97.95
Total GENERAL COMMUNICATIONS INC:					97.95
GENERAL FIRE EQUIPMENT CO					
140731	03/28/2019	SQUAD #204-19 EQUIPMENT	50-21-00-58000	POLICE EQUIPMENT PURCHASES	6,514.90
Total GENERAL FIRE EQUIPMENT CO:					6,514.90
GENEVA ONLINE INC					
1081244	05/01/2019	EMAIL SVC-MAY	11-12-00-52210	MUNICIPAL CT TELEPHONE	2.00
Total GENEVA ONLINE INC:					2.00
GOVOFFICE LLC					
44661	03/11/2019	EXTEND STORAGE-CITY WEBS	11-14-30-53820	LICENSE/SUPPORT EXPENSE	250.00

Invoice Number	Invoice Date	Description	GL Account and Title		Net Invoice Amount
Total GOVOFFICE LLC:					250.00
HALVERSON OVERHEAD DOOR CO					
7032	05/13/2019	BAY DOOR REPAIR-ST1	11-22-00-53500	BLDG MAINT SUPPLIES-FIREHOUSE	178.00
Total HALVERSON OVERHEAD DOOR CO:					178.00
HE STARK AGENCY INC					
6089CRTPRK-	04/30/2019	COLLECTION FEES-APR	11-12-00-52140	COLLECTION FEES	2.50
6089PARK-4/3	05/29/2019	COLLECTION FEES-APR	42-34-50-52160	LUKE CC AND COLLECTION FEES	2,154.23
Total HE STARK AGENCY INC:					2,156.73
HENRY SCHEIN INC					
63678684	04/19/2019	PULSE OXIMETER	11-22-00-58100	EMS EQUIPMENT/SUPPLIES	85.99
Total HENRY SCHEIN INC:					85.99
ITU ABSORB TECH INC					
7243259	05/17/2019	MATS,MOPS,FRAGRANCE	40-55-20-53600	RIV MAINTENANCE SERVICE COSTS	92.81
7252264	05/31/2019	MATS	11-16-10-53600	CITY HALL MAINT SERVICE COSTS	81.22
Total ITU ABSORB TECH INC:					174.03
JAMES IMAGING SYSTEMS INC					
906511	05/15/2019	TOSH ES3555C-MAY	11-21-00-55310	COPY MACHINE & SHREDDING SVC	236.01
906512	05/15/2019	TOSH ES357-MAY	11-21-00-55310	COPY MACHINE & SHREDDING SVC	35.87
Total JAMES IMAGING SYSTEMS INC:					271.88
JOHNS DISPOSAL SERVICE INC					
288367	05/15/2019	2 YD DUMPSTER	48-00-00-53990	CEM MISC EXP	144.00
Total JOHNS DISPOSAL SERVICE INC:					144.00
JOHNSON CONTROLS					
20935537	02/06/2019	ALARM INSPECTIONS	11-51-10-52400	MUSEUM-MAINTENANCE & REPAIRS	1,222.96
Total JOHNSON CONTROLS:					1,222.96
KUNES COUNTRY FORD					
69784	05/09/2019	OIL CHANGE-A2	11-22-00-52400	EQUIPMENT REPAIRS-FIRE DEPT	110.25
Total KUNES COUNTRY FORD:					110.25
LAFORCE					
1097035	04/30/2019	KEYS	11-21-00-53420	PD SPECIAL EQUIPMENT	110.50
Total LAFORCE:					110.50
LAKE GENEVA UTILITY					
13668	05/20/2019	RECONNECT-SEASONAL	11-52-00-52260	PARKS WATER & SEWER EXP	350.00
Total LAKE GENEVA UTILITY:					350.00

Invoice Number	Invoice Date	Description	GL Account and Title		Net Invoice Amount
LAKESHORES LIBRARY SYSTEM					
2138	05/17/2019	PC DEPLOYMENT	99-00-00-55160	LIBRARY IT CONSULTING SERVICES	322.42
Total LAKESHORES LIBRARY SYSTEM:					322.42
LASER ELECTRIC SUPPLY					
1469520-00	05/09/2019	BULBS,"EXIT" SIGN	40-55-20-53500	BLDG MAINT SUPPLIES-LOWER RIV	129.79
1469520-01	05/16/2019	BULBS	40-55-20-52400	LOWER RIVIERA REPAIRS	177.00
1469715-00	05/16/2019	BULBS	40-55-20-52400	LOWER RIVIERA REPAIRS	29.67
Total LASER ELECTRIC SUPPLY:					336.46
LASER WORKS UNLIMITED LLC					
1510	05/10/2019	AWARD PLAQUES	11-21-00-53990	PD MISCELLANEOUS EXP	482.42
1510	05/10/2019	PFC PLAQUE-CONDOS	11-21-00-51900	PFC COMMISSION EXPENSES	12.07
1511	05/10/2019	AWARD PLAQUES	11-21-00-53990	PD MISCELLANEOUS EXP	168.50
1514	05/23/2019	NAMEPLATE-CATLIN	11-11-00-53990	COUNCIL MISCELLANEOUS EXPENSE	13.70
Total LASER WORKS UNLIMITED LLC:					676.69
LONZE, SHAWN					
RESTITUTION	04/30/2019	RESTITUTION-CN80FXHJT4	11-12-00-45100	COURT PENALTIES & FINES	250.00
Total LONZE, SHAWN:					250.00
MALEK & ASSOCIATES CONSULTANTS					
5982	04/30/2019	PLAN REVIEW-CUTE NAILS	11-22-00-57500	SPRINKLER SYSTEMS EXPENSES	235.00
5988	05/09/2019	PLAN REVIEW-FAIRFIELD INN	11-22-00-57500	SPRINKLER SYSTEMS EXPENSES	1,830.00
5989	05/10/2019	FA REVIEW-FAIRFIELD INN	11-22-00-57500	SPRINKLER SYSTEMS EXPENSES	2,497.50
Total MALEK & ASSOCIATES CONSULTANTS:					4,562.50
MARED MECHANICAL					
113418	05/17/2019	LEAK REPAIR-DISPATCH	11-16-10-52400	CITY HALL BUILDING REPAIRS	730.73
Total MARED MECHANICAL:					730.73
MARTIN GROUP					
1250066	05/20/2019	KONICA 20-MAY	11-21-00-55310	COPY MACHINE & SHREDDING SVC	16.30
Total MARTIN GROUP:					16.30
McBRIEN, CHRIS					
5/9/2019	05/09/2019	HANDWRITING-ADULT PRG 5/7/	99-00-00-54150	LIBRARY PROGRAMS	350.00
Total McBRIEN, CHRIS:					350.00
MIDWEST TAPE					
5/1/19 YOUTH	05/01/2019	YOUTH DVDS	99-00-00-54110	LIBRARY YOUTH MATERIALS	136.44
Total MIDWEST TAPE:					136.44
MILLENIUM					
19-88671-1	05/22/2019	HAND HOLE-GENEVA/BROAD L	11-34-10-52610	STREET LIGHTS REPAIRS	463.31
19-88671-2	05/22/2019	PUTTY	11-34-10-52610	STREET LIGHTS REPAIRS	8.20

Invoice Number	Invoice Date	Description	GL Account and Title		Net Invoice Amount
Total MILLENIUM:					471.51
OFFICE DEPOT					
307943426001	04/19/2019	WALL FILE,PEN HOLDER	11-22-00-53100	OFFICE SUPPLIES	38.21
308993450001	04/30/2019	KEYBOARD-BAUMEISTER	11-22-00-53100	OFFICE SUPPLIES	33.99
312193625001	05/08/2019	FILE FOLDERS	11-15-10-53100	ACCTG OFFICE SUPPLIES	7.00
312193625001	05/08/2019	FILE FOLDERS	11-16-10-53100	CITY HALL OFFICE SUPPLIES	16.63
312250104001	05/07/2019	TONER-RECORDS	11-21-00-53100	PD OFFICE SUPPLIES	1,176.96
312287895001	05/07/2019	USB DRIVES	11-22-00-53100	OFFICE SUPPLIES	44.99
315845333001	05/15/2019	COPY PAPER	11-16-10-53100	CITY HALL OFFICE SUPPLIES	139.95
315845333001	05/15/2019	COPY PAPER	42-34-50-53100	OFFICE SUPPLIES	27.99
Total OFFICE DEPOT:					1,485.72
OTIS ELEVATOR COMPANY					
CMM04054619	05/20/2019	ANNUAL ELEV MAINT	11-16-10-53600	CITY HALL MAINT SERVICE COSTS	3,671.40
Total OTIS ELEVATOR COMPANY:					3,671.40
OTTO JACOBS					
118410	05/20/2019	GRAVEL SLURRY	43-32-10-17010	2018/2019 STREET IMP PROGRAM	787.50
Total OTTO JACOBS:					787.50
PEARCE, MICHELLE					
REFUND 5/23/	05/24/2019	PEARCE-SEC DEP 5/23/19	40-55-10-23530	SECURITY DEPOSITS-UPPER RIV	1,000.00
REFUND 5/23/	05/24/2019	PEARCE-SEC GRD,SETUP 5/23/	40-55-10-46740	UPPER RIVIERA REVENUE	400.38-
Total PEARCE, MICHELLE:					599.62
PETE'S TIRE ELKHORN LLC					
54571	05/16/2019	TIRE REPAIR-TORO	11-52-00-52500	EQUIPMENT REPAIR SERVICES	40.00
Total PETE'S TIRE ELKHORN LLC:					40.00
PLEASANT PRAIRIE MUNICIPAL CRT					
WARRANT-SP	05/28/2019	SPATAFORA-#BB462705-5	11-12-00-24280	COURT FINES-OTHER	313.00
Total PLEASANT PRAIRIE MUNICIPAL CRT:					313.00
REINDERS INC					
2912136-00	05/21/2019	WEED KILLER-30 GAL	11-52-00-53620	GROUNDS FERTILIZER/WEED CONTR	679.00
Total REINDERS INC:					679.00
RHYME BUSINESS PRODUCTS					
24807872	05/16/2019	SHARP-MX-3070N-MAY	99-00-00-55320	LIBRARY EQUIP LEASES & MAINT	354.13
AR299149	04/30/2019	M3550IDN-MAY	11-12-00-53610	EQUIPMENT MAINT SERVICE COSTS	22.00
Total RHYME BUSINESS PRODUCTS:					376.13
RIVERPORT CHORUS					
2496	04/26/2019	RIVERPORT CHORUS-4/26/19	99-00-00-54150	LIBRARY PROGRAMS	100.00
Total RIVERPORT CHORUS:					100.00

Invoice Number	Invoice Date	Description	GL Account and Title		Net Invoice Amount
RODRIGUEZ, JILL					
REIMB 4/7/19	05/20/2019	PURPLE MARTIN HOUSE MAIN	11-70-00-57800	AVIAN COMMITTEE EXPENSES	71.84
Total RODRIGUEZ, JILL:					71.84
ROLYAN BUOYS					
3671074	05/20/2019	REPLACEMENT BUOYS	40-52-10-53990	BUOY/STALL MISC. EXPENSES	946.00
Total ROLYAN BUOYS:					946.00
ROTE OIL COMPANY					
1913700817	05/17/2019	237.6 GALS CLEAR DIESEL	11-32-10-53410	VEHICLE-FUEL & OIL	631.78
1913700818	05/17/2019	192.2 GALS DYED DIESEL	11-32-10-53410	VEHICLE-FUEL & OIL	451.47
1914300212	05/23/2019	334.7 GALS DYED DIESEL	11-32-10-53410	VEHICLE-FUEL & OIL	786.20
1914300213	05/23/2019	120 GALS CLEAR DIESEL	11-32-10-53410	VEHICLE-FUEL & OIL	319.08
Total ROTE OIL COMPANY:					2,188.53
SHRED-IT					
8127347627	05/22/2019	SHREDDING SVC-MAY	11-16-10-53600	CITY HALL MAINT SERVICE COSTS	16.05
Total SHRED-IT:					16.05
SIGNATURE SIGNS LLC					
5350	05/20/2019	LETTERING-#204	11-21-00-53610	PD EQUIP MAINT SERV COSTS	330.00
5352	05/20/2019	ENFORCEMENT/INFO STICKER	42-34-50-52500	KIOSK REPAIRS/SUPPLIES	482.48
Total SIGNATURE SIGNS LLC:					812.48
SOMAR TEK LLC/SOMAR ENTERPRISE					
101348	02/14/2019	UNIFORM-GREETHAM	11-21-00-51380	PD UNIFORM ALLOWANCE	31.20
101448	05/02/2019	UNIFORM-WARD	11-21-00-51380	PD UNIFORM ALLOWANCE	127.93
Total SOMAR TEK LLC/SOMAR ENTERPRISE:					159.13
SOMMERS, CHRISTOPHER					
REFUND 5/25/	05/25/2019	SOMMERS-SEC DEP 5/25/19	40-55-10-23530	SECURITY DEPOSITS-UPPER RIV	1,000.00
REFUND 5/25/	05/25/2019	SOMMERS-SEC GRD,SETUP 5/	40-55-10-46740	UPPER RIVIERA REVENUE	404.00-
Total SOMMERS, CHRISTOPHER:					596.00
STREICHERS					
1367686	05/13/2019	UNIFORM-BOULAND	11-21-00-51380	PD UNIFORM ALLOWANCE	38.99
I1365850	05/01/2019	UNIFORM-BOULAND	11-21-00-51380	PD UNIFORM ALLOWANCE	76.97
I1366014	05/02/2019	UNIFORM-BOULAND	11-21-00-51380	PD UNIFORM ALLOWANCE	25.99
I1366994	05/08/2019	UNIFORM-WARD	11-21-00-51380	PD UNIFORM ALLOWANCE	149.98
Total STREICHERS:					291.93
T2 SYSTEMS CANADA INC					
IRIS000005535	05/21/2019	IRIS FEES-JUN	42-34-50-54500	SUPPORT CONTRACTS	2,544.00
IRIS000005535	05/21/2019	IRIS FEES-JUN	40-54-10-53400	LUKE OPERATING AND CC EXP	119.25
Total T2 SYSTEMS CANADA INC:					2,663.25
TIM'S TAP LINE CLEANING INC					
18695	05/16/2019	SANITIZE TAP LINE	40-55-10-53600	UPPER RIVIERA MAINTENANCE	30.00

Invoice Number	Invoice Date	Description	GL Account and Title		Net Invoice Amount
Total TIM'S TAP LINE CLEANING INC:					30.00
TODD, KARI					
5/23/19	05/23/2019	SIGN LANGUAGE ADULT PROG	99-00-00-54150	LIBRARY PROGRAMS	300.00
Total TODD, KARI:					300.00
TOWN OF BURLINGTON					
WARRANT-LOI	05/28/2019	LOIBL,ALBERT#18-1009	11-12-00-24280	COURT FINES-OTHER	504.80
Total TOWN OF BURLINGTON:					504.80
TRANS UNION LLC					
04918321	04/28/2019	BACKGROUND CHECKS	11-21-00-54110	PD APPLICATION PROCESS	93.96
Total TRANS UNION LLC:					93.96
UNIQUE MANAGEMENT SERVICES INC					
553114	05/01/2019	COLLECTION FEES-APR	99-00-00-55100	LIBRARY SIRSI	35.80
Total UNIQUE MANAGEMENT SERVICES INC:					35.80
VP PLUS, INC					
9294	04/23/2019	EXTERIOR LIGHTING	11-22-00-52410	FIREHOUSE REPAIRS	395.59
9365	05/16/2019	BREAKER REPAIR-HOST DRIVE	11-22-00-52410	FIREHOUSE REPAIRS	125.48
Total VP PLUS, INC:					521.07
WALMART COMMUNITY					
6085-5/19	05/10/2019	BATTERY	48-00-00-53510	CEM VEHICLE MAINT/REPAIR	42.06
Total WALMART COMMUNITY:					42.06
WI STATE FIREFIGHTER'S ASSOC					
1143	05/28/2019	ANNUAL DUES-6	11-22-00-53200	MEMBERSHIP DUES & FEES	150.00
Total WI STATE FIREFIGHTER'S ASSOC:					150.00
ZARNOTH BRUSH WORKS INC					
0175373-IN	05/09/2019	SWEEPER BROOMS	11-32-10-52500	ST DEPT EQUIPMENT REPAIRS	3,106.00
Total ZARNOTH BRUSH WORKS INC:					3,106.00
ZIMMERMANN, CAROL					
REIMB 3/12/19	03/12/2019	MIGRATION GAME-MATERIALS	11-70-00-57800	AVIAN COMMITTEE EXPENSES	20.85
REIMB 3/14/19	03/14/2019	MIGRATION GAME-CARDS	11-70-00-57800	AVIAN COMMITTEE EXPENSES	17.30
REIMB 4/10/19	04/10/2019	MIG BIRD DAY-DISPLAY BOAR	11-70-00-57800	AVIAN COMMITTEE EXPENSES	18.99
REIMB 4/18/19	05/20/2019	PURPLE MARTIN HOUSE-KEYS	11-70-00-57800	AVIAN COMMITTEE EXPENSES	12.60
REIMB 4/26/19	04/26/2019	MIG BIRD DAY-MEDIA	11-70-00-57800	AVIAN COMMITTEE EXPENSES	11.11
REIMB 4/4/19	04/04/2019	MIG BIRD DAY-RACK CARDS	11-70-00-57800	AVIAN COMMITTEE EXPENSES	33.23
REIMB 5/1/19	05/01/2019	MIG BIRD DAY-CERTS	11-70-00-57800	AVIAN COMMITTEE EXPENSES	8.74
REIMB 5/3/19	05/03/2019	RACK CARDS/MAY-SEPT	11-70-00-57800	AVIAN COMMITTEE EXPENSES	46.42
REIMB 5/9/19	05/09/2019	EVENT CALENDAR	11-70-00-57800	AVIAN COMMITTEE EXPENSES	25.85
Total ZIMMERMANN, CAROL:					195.09

Invoice Number	Invoice Date	Description	GL Account and Title	Net Invoice Amount
Grand Totals:				110,228.30

Dated: _____

Mayor: _____

City Council: _____

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City Recorder: _____

Report Criteria:
Detail report.
Invoices with totals above $0.00 included.
Only unpaid invoices included.
Invoice.Batch = "190610","190611","F90610","F90611","P90610","P90611","L90610","L90611"
Invoice Detail.GL account (2 Characters) = {<>} "61"
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