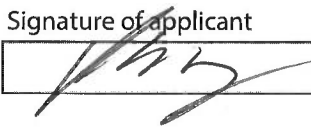




Minnesota Department of Public Safety  
ALCOHOL AND GAMBLING ENFORCEMENT DIVISION  
445 Minnesota Street, Suite 1600, St. Paul, MN 55101  
(651) 201-7504 TDD (651) 282-6555  
FAX (651) 297-5259

**APPLICATION FOR SMALL BREWER  
OFF SALE - 128 ounces per day**

**Must be a licensed brewer in order to apply for this license**

|                                                         |                                                                                     |                                   |
|---------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------|
| Minnesota Tax ID                                        | Federal Tax ID                                                                      | Number of Annual Barrels Produced |
| 2765361                                                 | 45-5278059                                                                          | 1600                              |
| Licensee Name (Business, partnership, LLC, corporation) | E-mail Address                                                                      |                                   |
| Jack Pine Brewery LLC                                   | patrick@jackpinebrewery.com                                                         |                                   |
| DBA or Trade Name                                       | Phone Number                                                                        |                                   |
| Jack Pine Brewery                                       | 218-270-8072                                                                        |                                   |
| Business Address                                        |                                                                                     |                                   |
| 15593 Edgewood Dr                                       |                                                                                     |                                   |
| City                                                    | State                                                                               | Zip Code                          |
| Baxter                                                  | MN                                                                                  | 56425                             |
| City or County Issuing License                          | License Period: From                                                                | To                                |
| Baxter                                                  |                                                                                     |                                   |
| Print name of applicant and title                       | Signature of applicant                                                              | Date                              |
| Patrick Sundberg, President                             |  | 5/31/22                           |
| Issuing Authority Name                                  | Signature of Issuing Authority                                                      | Date                              |
|                                                         |                                                                                     |                                   |