

Form
AB-220

Temporary Alcohol Beverage License

Municipality
CITY OF COLUMBUS

License(s) Requested	Fees	
	<input checked="" type="checkbox"/> Temporary "Class B" Wine <input checked="" type="checkbox"/> Temporary Class "B" Beer	License Fees
Background Check		\$
Total Fees		\$ 10.00

Part A: Organization Information

1. Organization Name Oddfellows Tri-County Lodge #40		
2. Organization Permanent Address 131 W. James St		
3. City Columbus	4. State WI	5. Zip Code 53925
6. Mailing Address (if different from permanent address)		
7. FEIN 26-1660831	8. Date of Organization/Incorporation 12/15/2007	9. State of Organization/Incorporation WI
10. Phone (920) 410-0246	11. Email gkwestlake@gmail.com	
12. Organization type (check one) <input type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input checked="" type="checkbox"/> Lodge/Society <input type="checkbox"/> Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.		
13. Is this organization required to hold a Wisconsin Seller's permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
14. Wisconsin Seller's Permit Number (if applicable)		

Part B: Individual Information

List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.

Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).

Last Name	First Name	Title	Phone
Westlake	Glenn	President	920-410-0246
Hanuszcak	Jesse	Vice President	608-609-6915
Lenz	Rick	Treasurer	608-520-4395
Hoeft	Casey	Secretary	920-350-2828
Lindsey	Adam	Financial Secretary	608-479-1346

Continued →

