

Minnesota Department of Public Safety Alcohol and Gambling Enforcement Division 445 Minnesota Street, Suite 222, St. Paul, MN 55101 651-201-7500 Fax 651-297-5259 TTY 651-282-6555

APPLICATION AND PERMIT FOR A 1 DAY TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE

Name of organization	tion Date organi		d	Tax exempt number	
MacRostie Art Center		11/1966		23-7105948	
Address	City		State	Zip Code	
405 NW 1st Ave	Grand Rap	Grand Rapids		55744	
Name of person making application	1//////////////////////////////////////	Business pho	ne	Home phone	
Katie Marshall	218-326-2		597 218-326-2046		
Date(s) of event	Type of org	anization			
Friday, September 2, 2022	[] Club	☐ Club ☐ Charitable ☐ Religious ☑ Oth			
Organization officer's name	City		State	Zip Code	
Heidi Holtan	The second second	Grand Rapids		55744	
Organization officer's name		City		Zip Code	
Erin Whight		Grand Rapids		55744	
				Zip Code	
Organization officer's name Aaron Olson-Reiners		City Grand Rapids		55744	
**************************************	//www.mananananananananananananananananananan			Zip Code	
Organization officer's name Bruce Bartos	City	Grand Rapids		rryaa	
Diuce datos	J Grano F	apios	Minnesota		
If the applicant will contract for intoxicating liquor service gind in the applicant will carry liquor liability insurance please pro	wide the carrier's n	ame and amou	nt of coverag	e.	
Employers Mutual Casua	alty Com	pany,	\$1,00	00,000	
	APPROVAL				
	INTY BEFORE SUBMITTI	RE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT June 13, 2022			
City of Grand Rapids City or County approving the license	(V)	Julie 13, 20.		Date Approved	
\$20		Septembe			
Fee Amount	- Approximate And Control (Control (Con			Permit Date	
June 2, 2022				apids.mn.us	
Date Fee Paid	City or County E-mail Address				
	218-326-7600 City or County Phone Number				
W: 1 1 2:1		City	or County Ph	one Number	
Kimberly Gibeau Signature City Clerk or County Official	Be son one when a	ad Diractor Ala	ohal and Ga	nhlina Enforcement	
Signature City Clerk of County Official	Approv	Approved Director Alcohol and Gambling Enforcement			

CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event.

ONE SLIBMISSION PER EMAIL, APPLICATION ONLY.

PLEASE PROVIDE A VALID E-MAIL ADDRESS FOR THE CITY/COUNTY AS ALL TEMPORARY PERMIT APPROVALS WILL BE SENT BACK VIA EMAIL. E-MAIL THE APPLICATION SIGNED BY CITY/COUNTY TO AGE. TEMPORARY APPLICATION ØSTATE.MN.U.S