

License
Administration

< CITY OF INDEPENDENCE

Local Authority Review

CITY OF INDEPENDENCE

1908377808

>

Owners

Business Information

Customer Type

BUS

Business Sub-Type

Corporation

Business Designation







Legal Business Name

CASEYS MARKETING COMPANY

Old Ownership Information

Owner Type	Owner	Single Line Address	Ownership Percentage
Owner	FABER, SCOTT	6749 CARDIFF COURT JOHN	0.00
Owner	LARSEN, ERIC	4407 NORTHWEST 5TH STR	0.00
Owner	BEECH, DOUGLAS	729 NORTHEAST BROOK H/	0.00
Company	42-0935283 CASEY'S GENEI	PO BOX 3001 ANKENY IA 51	100.00
Owner	JAMES, SAMUEL	2501 SOUTHEAST 19TH CO	0.00
Owner	JOHNSON, BRIAN	9129 NORTHWEST 73RD CI	0.00

Updated Ownership Information

Owner Type	Owner	Single Line Address	<u>Ownership Percentage</u>
 Officer	FABER, SCOTT	6749 CARDIFF CT JOHNSTC	0.00
 Officer	LARSEN, ERIC	4407 NW 5TH ST ANKENY I	0.00
 Officer	BEECH, DOUGLAS	729 NE BROOK HAVEN DR ,	0.00
 Company	CASEY'S GENERAL STORES,	1 SE CONVENIENCE BLVD A	100.00
 Officer	JAMES, SAMUEL	3204 NE AVERY DR ANKENY	0.00
 Officer	JOHNSON, BRIAN	9129 NW 73RD CIR JOHNS	0.00

Impacted Active Licenses

Jurisdiction Code	Permit Type	License Number	Address
City of Independence	Class "E" Retail Alcoh	LE0002833	
City of Independence	Class "E" Retail Alcoh	LE0003221	
City of Independence	Class "E" Retail Alcoh	LE0003249	

Criminal History






Has anyone listed on the Ownership page been charged or convicted of a felony offense in Iowa or any other state of the United States?

Yes

Has anyone listed on the Ownership page been convicted of any violation of any state, county, city, federal or foreign law? For traffic violations, only include those that are drug or alcohol related.

Yes

Criminal History Reported

Full Legal Name	ID Type	ID Number	Date of Birth
 ERIC LARSEN	SSN	<div></div>	<div></div>
 ERIC LARSEN	SSN	<div></div>	<div></div>
 ERIC LARSEN	SSN	<div></div>	<div></div>
 ERIC LARSEN	SSN	<div></div>	<div></div>
 SCOTT FABER	SSN	<div></div>	<div></div>

Local Authority Information

Local Authority Reviewing

City of Independence

▼

Local Authority Signature Date



Approved/Denied *

Required

▼

Local Authority Email *

Required

Local Authority Attestation Name *

Required

Local Authority Contact Phone Number *

Required

Comments



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