

See Additional Information on reverse side. Contact the municipal clerk if you have questions.	
FEE \$ \D. 00	Application Date: 52829
☐ Town ☐ Village ☐ City ofKaukauna	County of Outagamie
The named organization applies for: (check appropriate box(es).)	
A Temporary Class "B" license to sell fermented malt beverage	s 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	9 2 2 24 and ending 9 2 24 and agrees
to comply with all laws, resolutions, ordinances and regulations (sta	ate, 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
	nization Fair Association or Agricultural Society
	ommerce or similar Civic or Trade Organization organized under
ch. 181, Wis. S	tats.
(a) Name Kunkanna Athletic Clu	0
(b) Address RO. Box 183 Kaukauna (Street)	WI 54136
	☐ Town ☐ Village ☒ City
(c) Date organized 1938	
(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 Mike Knott, 4/2 Wio?	THAT VIV INT FUIZE
President Mike Knoll, 4/2 WIO"	01. Mukaura, W- 04130
Vice President	
Secretary	
(g) Name and address of manager or person in charge of affair	·
Same	
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 100 - 200 Black of	W. Wisconsin Ave, Beer Irallel
(b) Lot	Block
(c) Do premises occupy all or part of building?	1
(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:	
O. Name of French	
3. Name of Event (a) List name of the event (b) Dates of event (c) Dates of event (d) Dates of event (e) Dates of event	
(b) Detection of event 5 at 21 2021	
(b) Dates of event Sqs1, a1; aca4	
DECLARATION	
An officer of the organization, declares under penalties of law that the	e information provided in this application is true and correct to the
best of his/her knowledge and belief. Any person who knowingly primay be required to forfeit not more than \$1,000.	Ovides materially raise information in an application for a license
Officer Walled note	V. V. Atlatia blik
Officer	Kaykuuna Athletic Club (Name of Organization)
(Signature / Date)	1 and the second
in an acall	
Date Filed with Clerk Muy 28, 2024	Date Reported to Council or Board
Date Granted by Council	License No.
	Wisconsin Department of Revenue

Pd. CS3492