



POLICE INVESTIGATION REPORT AND APPLICATION FOR PEDDLERS, CANVASSERS, SOLICITORS, AND TRANSIENT MERCHANTS LICENSE

Investigation Fee - \$15.00

Receipt No. _____

Sellers Permit No. _____

Date Paid _____

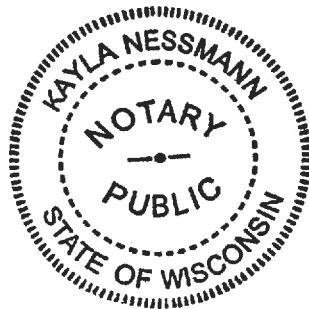
Name of Applicant: SYDNEY BOLLINGER	
Address: 2850 CARMAR WAY	
City, State, Zip: SAN DIEGO, CA, 92139	County of Residence: SAN DIEGO
If less than two years at the above address, please list all addresses in the last two-year period:	
Date of Birth (Month/Day/Year): 3/25/05	Place of Birth: SAN DIEGO
Male <input type="checkbox"/> Female <input checked="" type="checkbox"/>	Telephone Number: 619 962 9133
Driver's License Number: Y1800494	
Type of Merchandise or Service: (Please state specific product(s) or actual service provided) EDUCATIONAL RESOURCES	
Will you be selling products delivered at sale? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Will you be getting orders for products/services to be delivered in the future? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Location where selling in the City: KAUKAUNA,	
Home Company Name: SOUTHWESTERN ADVANTAGE	
Address: 2451 ATRIUM WAY #1868 NASHVILLE TN 37214	
Officer or Director of Company: DAVE CAUSEY	Principal Place of Business (State): TN

Reference	Name: DAVE CARSE MATT ROSS
	Address: 2451 ATRIUM WAY, NASHVILLE TN
	Telephone Number: 480 206 2560
Do you hold a similar license in any other community? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If yes, please state where.	

Sydney Palmer
Signature of Applicant

STATE OF WISCONSIN OUTAGAMIE COUNTY

The above signed applicant, being first duly sworn on oath deposes and says that he/she is the applicant named in the foregoing application; that he/she has read each of the questions in said application; that he/she had made complete true and correct answers to each question.



Subscribed and sworn to before me this

16 day of JUNE, 2025.

Kayla Nessmann
City Clerk or Notary Public

FOR OFFICE USE ONLY

Police Department Recommendation		Bond Required - Yes <input type="checkbox"/> No <input type="checkbox"/>
Recommend Approval <input checked="" type="checkbox"/> Recommend Denial <input type="checkbox"/>		
Signature: <u><i>Ky J. J.</i></u> Lt. Gary Krueger #823		
Explain, if denied:		
City Council Action:	Date granted/denied:	License No.