Application for Temporary Class "B" / "Class B" Retailer's License

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$	Application Date: Three 6, 2023
Town Village K City of Kaukauna	County of Outagamie
The named organization applies for: <i>(check appropriate box(es).)</i> A Temporary Class "B" license to sell fermented malt beverages 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 $\underline{\mathcal{I}}_{UN} \subset \underline{\mathcal{I}}_{2} \subset \underline{\mathcal{I}}_{3}$ and ending $\underline{\mathcal{A}}_{U_{2}} : \underline{\mathcal{I}}_{2} \subset \underline{\mathcal{I}}_{3}$ and agrees to comply with all laws, resolutions, ordinances and regulations (state, 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 Chamber of C Veteran's Organization	ommerce or similar Civic or Trade Organization
(a) Name Kaukanna Lions	
(b) Address PO Box Kaukania WI (Street)	→ 130 Town Village ACity
 (c) Date organized <u>June 1936</u> (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 Tom Pieters	
Vice President Dale Antoine	
Secretary Dat Gose	
Treasurer Dennis Wittman	
(g) Name and address of manager or person in charge of affair: John P. Moore, 2357 Fairway Pr. Kaukauna, WI 54130	
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 Hydro Part	
(b) Lot	Block
(c) Do premises occupy all or part of building? N_D	
(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:	
3. Name of Event (a) List name of the event Hydro Live (b) Dates of event June 7, 14, 21, 28 July 5, 12, 19, 261 Aug 2, 9, 16, 2023	
DECLARATION	
The Officer(s) of the organization, individually and together, declare tion is true and correct to the best of their knowledge and belief.	
Officer Long Pieley	Officer(Signature/date)
Officer(Signature/date)	Officer(Signature/date)
Date Filed with Clerk 6 - 2023	Date Reported to Council or Board
Date Granted by Council	License No
AT-315 (R. 6-16)	Wisconsin Department of Revenue