

Applicant

NAME OF LEGAL ENTITY NAME OF BUSINESS (DBA) BUSINESS

Leo's Italian Restaurant, Inc. Leo's Italian Restaurant (319) 283-1655

ADDRESS OF PREMISES PREMISES SUITE/APT NUMBER CITY COUNTY ZIP

29 S. Frederick Ave. Oelwein Fayette 50662

MAILING ADDRESS CITY STATE ZIP

PO Box 468 Oelwein Iowa 50662

Contact Person

NAME PHONE EMAIL

Michael Leo (319) 283-7020 leosfoods@gmail.com

License Information

LICENSE NUMBER LICENSE/PERMIT TYPE TERM STATUS

LC0036200 Class C Retail Alcohol License 12 Month Submitted

to Local Authority

TENTATIVE EFFECTIVE DATE TENTATIVE EXPIRATION DATE LAST DAY OF BUSINESS

June 1, 2023 May 31, 2024

SUB-PERMITS

Class C Retail Alcohol License



PRIVILEGES

Outdoor Service

Status of Business

BUSINESS TYPE

Corporation

Ownership

Individual Owners

| NAME | CITY | STATE | ZIP | POSITION | % OF OWNERSHIP | U.S. CITIZEN |
|-------------|---------|-------|-------|-----------|----------------|--------------|
| Michael Leo | Oelwein | lowa | 50662 | President | 100.00 | Yes |

Insurance Company Information

| INSURANCE COMPANY | POLICY EFFECTIVE DATE | POLICY EXPIRATION DATE |
|--|--------------------------------|---------------------------------|
| North Star Mutual Insurance Company | June 1, 2023 | June 1, 2024 |
| DRAM CANCEL DATE | OUTDOOR SERVICE EFFECTIVE DATE | OUTDOOR SERVICE EXPIRATION DATE |
| BOND EFFECTIVE DATE | TEMP TRANSFER EFFECTIVE DATE | TEMP TRANSFER EXPIRATION DATE |