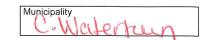
Form

AB-220

Temporary Alcohol Beverage License



License(s) Requested		Fees	
Temporary "Class B" Wine	Temporary Class "B" Beer	License Fees	\$ 10.
		Background Check	\$ 14, -
		Total Fees	\$241-Pd

Part A: Organization Information	ation				
1. Organization Name	25 1 10	- 1 - 1 - 0 - 1	10		
Luanel Tre	2) Jenool E	2005tel Clu			
2. Organization Permanent Address	0-01				
1500 h	Jestern Ave				
3. City Water to	wn	4. State	5. Zip Code		
6. Mailing Address (if different from pe	ermanent address)	1	,		
		3			
7. FEIN	8. Date of Organization/Inco	prporation 9. State of Orga	anization/Incorporation		
10. Phone	11. Email DOULG	858 @105, W	elsinet		
12. Organization type (check one)					
Bona Fide Club	Bona Fide Club Church Fair Association/Agricultural Society Veteran's Organization				
Lodge/Society					
,		3			
13. Is this organization required to	hold a Wisconsin Seller's permit?		Yes No		
14. Wisconsin Seller's Permit Number	(if applicable)				
Part B: Individual Information	on				
List the name, title, and phone nu (Form AB-100) for each person lis	umber for all officers, directors, and sted below. Attach additional sheets	agent of the organization. Include if necessary.	an Individual Questionnaire		
Corporations must also include A	Icohol Beverage Appointment of Age	ent (Form AB-101).			
Last Name	First Name	Title	Phone		
Bessert	Nicole	President	920-262-8106		
Boulden	Sue	Vice Preside	ut 920-262-810		
	101-254				

 $Continued \rightarrow$

Part C: Event Information				
Name of Event (if applicable)				
Lives PreDated-A Eift	of Tale MS			
2. Dates of Operation	3. Hours of Operation			
Sat March 29,2025 Spm-Midnight				
4. Premises Address 1.200 11) PART AIR CO	m Buldena			
5. City	6. State 7. Zip Code			
Watertown	WI 53094			
8. County 9. Governing Municipalit	y City Town Village 10. Aldermanic District			
11. Organizer of Event (if not the named applicant) 12.	Email and/or Phone Number for Organizer of Event			
Dom Wrobel	wrobeld@ips.wels.not			
	Event Website			
IAS, wels, net	IPS. WEIS. Not Japo Pages Hirespreparou			
15. Premises Description - Describe the building or buildings and	any outside areas where alcohol beverages and records are sold, all rooms within the building, including living quarters. Authorized			
alcohol beverage activities and storage of records may occur	only on the premises described in this application. Attach a man			
or diagram and additional sheets if necessary.	DUT GUM building, Initially			
HII Develages were we reprin	nour Gym building, Initially he day before event. At about on gym until event begins on			
stored in locked closets until t	The they Refer Ceverility and			
time they will be locked in out	- gymunu event regions on			
March 20 at spm.				
Part D: Attestation				
Who must sign this application?				
one officer or director of the nonprofit organization				
	v, I have answered each of the above questions completely and			
	ant organization and not on behalf of any other individual or entity ibilities conferred by the license(s), if granted, will not be assigned			
	he law, including but not limited to, purchasing alcohol beverages			
	access to any portion of a licensed premises during inspection will			
be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may				
	onnection with this application, and that any person who knowingly			
provides materially false information on this application may be	required to forfeit not more than \$1,000 if convicted.			
Last Name First	Name M.I.			
BESSERT	NICOLE			
Title Email	Phone MOND MORE			
President Boosters BES	SERNJ@LPS.WELS.NET 920-262-8101			
Signature Date				
	128/2025			
Part E: For Clerk Use Only				
Date Application Was Filed With Clerk	License Number			
11001	2025-00L			
Date License Granted	Date License Issued			
Signature of Clerk/Deputy Clerk				