

Form
AB-220

Temporary Alcohol Beverage License

Municipality
C. Watertown

License(s) Requested	Fees	
<input checked="" type="checkbox"/> Temporary "Class B" Wine <input type="checkbox"/> Temporary Class "B" Beer	License Fees	\$ 10.00
	Background Check	\$ 10.00
	Total Fees	\$ 10.00

Part A: Organization Information

1. Organization Name Watertown Area Chamber of Commerce		
2. Organization Permanent Address 519 E Main St		
3. City Watertown	4. State WI	5. Zip Code 53094
6. Mailing Address (if different from permanent address)		
7. FEIN 39-0689225	8. Date of Organization/Incorporation 8/20/1920	9. State of Organization/Incorporation WI
10. Phone 920-261-6320	11. Email info@watertownchamber.com	
12. Organization type (check one)		
<input type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input type="checkbox"/> Lodge/Society <input checked="" type="checkbox"/> Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.		
13. Is this organization required to hold a Wisconsin Seller's permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
14. Wisconsin Seller's Permit Number (if applicable)		

Part B: Individual Information

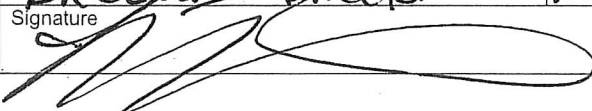
List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.

Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).

Last Name	First Name	Title	Phone
Wagner	Cassandra	Board Chair	920-988-7577
Larson	Allen	Vice Chair	262-434-0027
Van Ert	Bridget	Vice Chair	920-248-1155
Johnson	Jennifer	Secretary	608-852-5565
Reilly	Linden	Executive Director	414-303-2079

Continued →

Part C: Event Information			
1. Name of Event (if applicable) 9th Annual Wine Walk			
2. Dates of Operation 9/25/25		3. Hours of Operation 4:30 - 8pm	
4. Premises Address Ava's - 209 E Main St			
5. City Watertown		6. State WI	7. Zip Code 53094
8. County Jefferson	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: Watertown		10. Aldermanic District 7
11. Organizer of Event (if not the named applicant) Watertown Area Chamber		12. Email and/or Phone Number for Organizer of Event info@watertownchamber.com	
13. Organizer Website WatertownChamber.com		14. Event Website WatertownChamber.com/winewalk	
15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe 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 map or diagram and additional sheets if necessary. Retail Sales floor, first floor only inside			

Part D: Attestation			
Who must sign this application? • one officer or director of the nonprofit organization			
READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant organization and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate according to the law, including but not limited to, purchasing alcohol beverages from Wisconsin-permitted wholesalers. I understand that lack of 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 be prosecuted for submitting false statements and affidavits in connection 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 Deacy		First Name Linden	
Title Executive Director		M.I.	
Email linden@watertownchamber.com		Phone 926-261-6360	
Signature 		Date 6/24/25	

Part E: For Clerk Use Only	
Date Application Was Filed With Clerk 07-01-25	License Number 2025-033
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

Form

AB-220

Temporary Alcohol Beverage License

Municipality

C. Watertown

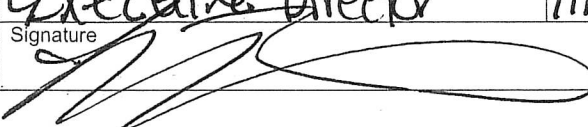
License(s) Requested	Fees	
<input checked="" type="checkbox"/> Temporary "Class B" Wine <input type="checkbox"/> Temporary Class "B" Beer	License Fees	\$ 10.00
	Background Check	\$ 10.00
	Total Fees	\$ 10.00

Part A: Organization Information		
1. Organization Name Watertown Area Chamber of Commerce		
2. Organization Permanent Address 519 E Main St		
3. City Watertown	4. State WI	5. Zip Code 53094
6. Mailing Address (if different from permanent address)		
7. FEIN 39-0689225	8. Date of Organization/Incorporation 8/20/1920	9. State of Organization/Incorporation WI
10. Phone 916-261-6320	11. Email info@watertownchamber.com	
12. Organization type (check one)		
<input type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input type="checkbox"/> Lodge/Society <input checked="" type="checkbox"/> Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.		
13. Is this organization required to hold a Wisconsin Seller's permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
14. Wisconsin Seller's Permit Number (if applicable)		

Part B: Individual Information			
List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.			
Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).			
Last Name	First Name	Title	Phone
Wagner	Cassandra	Board Chair	916-988-7577
Larson	Allen	Vice Chair	262-434-6027
Van Ert	Bridget	Vice Chair	920-248-1155
Johnson	Jennifer	Secretary	608-852-5565
Pecny	Linden	Executive Director	414-303-2079

Continued →

Part C: Event Information			
1. Name of Event (if applicable) 9th Annual Wine Walk			
2. Dates of Operation 9/25/25		3. Hours of Operation 4:30 - 8pm	
4. Premises Address Bladow Jewlers 217 E Main St			
5. City Watertown		6. State WI	7. Zip Code 53094
8. County Jefferson	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: Watertown		10. Aldermanic District 7
11. Organizer of Event (if not the named applicant) Watertown Area Chamber		12. Email and/or Phone Number for Organizer of Event info@watertownchamber.com	
13. Organizer Website WatertownChamber.com		14. Event Website WatertownChamber.com/winewalk	
15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe 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 map or diagram and additional sheets if necessary. Retail Sales floor, first floor only inside			

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Last Name Deacy		First Name Linden	
Title Executive Director		M.I.	
Email linden@watertownchamber.com		Phone 926-261-6360	
Signature 		Date 6/24/25	

Part E: For Clerk Use Only	
Date Application Was Filed With Clerk 07-01-25	License Number 2025-034
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

Form
AB-220

Temporary Alcohol Beverage License

Municipality
C. Watertown

License(s) Requested	Fees	
	License Fees	\$ 10.00
	Background Check	\$ 10.00
	Total Fees	\$ 10.00

☒ Temporary "Class B" Wine ☐ Temporary Class "B" Beer

Part A: Organization Information

1. Organization Name Watertown Area Chamber of Commerce		
2. Organization Permanent Address 519 E Main St		
3. City Watertown	4. State WI	5. Zip Code 53094
6. Mailing Address (if different from permanent address)		
7. FEIN 39-0689225	8. Date of Organization/Incorporation 8/20/1920	9. State of Organization/Incorporation WI
10. Phone 916-261-6320	11. Email info@watertownchamber.com	
12. Organization type (check one) <input type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input type="checkbox"/> Lodge/Society <input checked="" type="checkbox"/> Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.		
13. Is this organization required to hold a Wisconsin Seller's permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
14. Wisconsin Seller's Permit Number (if applicable)		

Part B: Individual Information

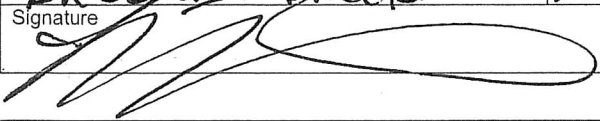
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Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).

Last Name	First Name	Title	Phone
Wagner	Cassandra	Board Chair	916-988-7517
Larsen	Allen	Vice Chair	262-434-0027
Van Ert	Bridget	Vice Chair	920-248-1155
Johnson	Jennifer	Secretary	608-852-5565
Reilly	Linden	Executive Director	414-303-2079

Continued →

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Part C: Event Information			
1. Name of Event (if applicable) 9th Annual Wine Walk			
2. Dates of Operation 9/25/25		3. Hours of Operation 4:30 - 8pm	
4. Premises Address Brown's Shoes - 212 E Main St			
5. City Watertown		6. State WI	7. Zip Code 53094
8. County Jefferson	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: Watertown		10. Aldermanic District 7
11. Organizer of Event (if not the named applicant) Watertown Area Chamber		12. Email and/or Phone Number for Organizer of Event info@watertownchamber.com	
13. Organizer Website WatertownChamber.com		14. Event Website WatertownChamber.com/winewalk	
15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe 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 map or diagram and additional sheets if necessary. Retail Sales floor, first floor only inside			

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Last Name Deacy	First Name Linden	M.I.
Title Executive Director	Email linden@watertownchamber.com	Phone 926-261-6360
Signature 		Date 6/24/25

Part E: For Clerk Use Only	
Date Application Was Filed With Clerk 07-01-25	License Number 2025-035
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

Form
AB-220

Temporary Alcohol Beverage License

Municipality
C. Watertown

License(s) Requested	Fees	
<input checked="" type="checkbox"/> Temporary "Class B" Wine <input type="checkbox"/> Temporary Class "B" Beer	License Fees	\$ 10.00
	Background Check	\$ 10.00
	Total Fees	\$ 10.00

Part A: Organization Information

1. Organization Name Watertown Area Chamber of Commerce		
2. Organization Permanent Address 519 E Main St		
3. City Watertown	4. State WI	5. Zip Code 53094
6. Mailing Address (if different from permanent address)		
7. FEIN 39-0689225	8. Date of Organization/Incorporation 8/20/1920	9. State of Organization/Incorporation WI
10. Phone 916-261-6320	11. Email info@watertownchamber.com	
12. Organization type (check one)		
<input type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input type="checkbox"/> Lodge/Society <input checked="" type="checkbox"/> Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.		
13. Is this organization required to hold a Wisconsin Seller's permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
14. Wisconsin Seller's Permit Number (if applicable)		

Part B: Individual Information

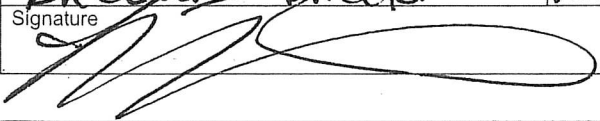
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Last Name	First Name	Title	Phone
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Larson	Allen	Vice Chair	262-434-0027
Van Ert	Bridget	Vice Chair	920-248-1155
Johnson	Jennifer	Secretary	608-852-5565
Reilly	Linden	Executive Director	414-303-2079

Continued → TO PD
NF

Part C: Event Information			
1. Name of Event (if applicable) 9th Annual Wine Walk			
2. Dates of Operation 9/25/25		3. Hours of Operation 4:30 - 8pm	
4. Premises Address Central Block - 300 E Main St			
5. City Watertown		6. State WI	7. Zip Code 53094
8. County Jefferson	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: Watertown		10. Aldermanic District 7
11. Organizer of Event (if not the named applicant) Watertown Area Chamber		12. Email and/or Phone Number for Organizer of Event info@watertownchamber.com	
13. Organizer Website WatertownChamber.com		14. Event Website WatertownChamber.com/winewalk	
15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe 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 map or diagram and additional sheets if necessary. Retail Sales floor, first floor only inside			

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Last Name Deacy		First Name Linden	
Title Executive Director		M.I.	
Email linden@watertownchamber.com		Phone 926-261-6360	
Signature 		Date 6/24/25	

Part E: For Clerk Use Only	
Date Application Was Filed With Clerk 07-01-25	License Number 2025-036
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

draeger's

Form
AB-220

Temporary Alcohol Beverage License

Municipality
C. Watertown

License(s) Requested	Fees	
	License Fees	\$ 10.00
	Background Check	\$ 10.00
	Total Fees	\$ 10.00
<input checked="" type="checkbox"/> Temporary "Class B" Wine <input type="checkbox"/> Temporary Class "B" Beer		

Part A: Organization Information

1. Organization Name
Watertown Area Chamber of Commerce

2. Organization Permanent Address
519 E Main St

3. City
Watertown

4. State
WI

5. Zip Code
53094

6. Mailing Address (if different from permanent address)

7. FEIN
39-0689225

8. Date of Organization/Incorporation
8/20/1920

9. State of Organization/Incorporation
WI

10. Phone
916-261-6320

11. Email
info@watertownchamber.com

12. Organization type (check one)

☐ Bona Fide Club ☐ Church ☐ Fair Association/Agricultural Society ☐ Veteran's Organization

☐ Lodge/Society ☒ Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

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

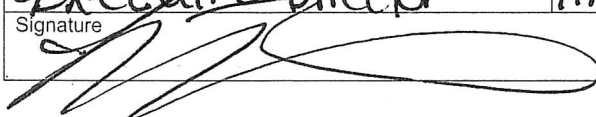
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Larson	Allen	Vice Chair	262-434-6027
Van Ert	Bridget	Vice Chair	920-248-1155
Johnson	Jennifer	Secretary	608-852-5565
Reilly	Linden	Executive Director	414-303-2079

Continued →
TO PD
NF

Part C: Event Information			
1. Name of Event (if applicable) 9th Annual Wine Walk			
2. Dates of Operation 9/25/25		3. Hours of Operation 4:30 - 8pm	
4. Premises Address Dragers floral City E Main St			
5. City Watertown		6. State WI	7. Zip Code 53094
8. County Jefferson	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: Watertown		10. Aldermanic District 4
11. Organizer of Event (if not the named applicant) Watertown Area Chamber		12. Email and/or Phone Number for Organizer of Event info@watertownchamber.com	
13. Organizer Website WatertownChamber.com		14. Event Website WatertownChamber.com/winewalk	
15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe 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 map or diagram and additional sheets if necessary. Retail Sales floor, first floor only inside			

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Last Name Deacy		First Name Linden	
Title Executive Director		M.I.	
Email linden@watertownchamber.com		Phone 926-261-6360	
Signature 		Date 6/24/25	

Part E: For Clerk Use Only	
Date Application Was Filed With Clerk 07-01-25	License Number 2025-037
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

OSwald - Konz

Form
AB-220

Temporary Alcohol Beverage License

Municipality
C. Watertown

License(s) Requested	Fees	
<input checked="" type="checkbox"/> Temporary "Class B" Wine <input type="checkbox"/> Temporary Class "B" Beer	License Fees	\$ 10.00
	Background Check	\$ 10.00
	Total Fees	\$ 10.00

Part A: Organization Information

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Part B: Individual Information

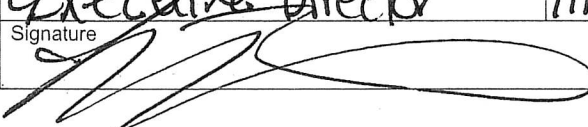
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Van Ert	Bridget	Vice Chair	920-248-1155
Johnson	Jennifer	Secretary	608-852-5565
Pecny	Linden	Executive Director	414-303-2079

Continued →

Part C: Event Information			
1. Name of Event (if applicable) 9th Annual Wine Walk			
2. Dates of Operation 9/25/25		3. Hours of Operation 4:30 - 8pm	
4. Premises Address OSwald-Kuntz Financial - 118 W. Main St			
5. City Watertown		6. State WI	7. Zip Code 53094
8. County Jefferson	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: Watertown		10. Aldermanic District 7
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Title Executive Director		M.I.	
Email linden@watertownchamber.com		Phone 926-261-6360	
Signature 		Date 6/24/25	

Part E: For Clerk Use Only	
Date Application Was Filed With Clerk 07-01-25	License Number 2025-038
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

Form
AB-220

Temporary Alcohol Beverage License

Municipality
C. Watertown

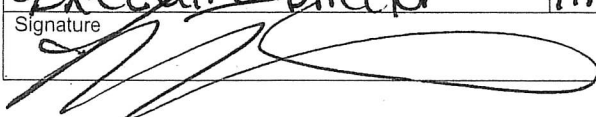
License(s) Requested	Fees	
<input checked="" type="checkbox"/> Temporary "Class B" Wine <input type="checkbox"/> Temporary Class "B" Beer	License Fees	\$ 10.00
	Background Check	\$ 10.00
	Total Fees	\$ 10.00

Part A: Organization Information				
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10. Phone 916-261-6320		11. Email info@watertownchamber.com		
12. Organization type (check one)				
<input type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input type="checkbox"/> Lodge/Society <input checked="" type="checkbox"/> Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.				
13. Is this organization required to hold a Wisconsin Seller's permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
14. Wisconsin Seller's Permit Number (if applicable)				

Part B: Individual Information			
List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.			
Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).			
Last Name	First Name	Title	Phone
Wagner	Cassandra	Board Chair	916-988-7577
Larson	Allen	Vice Chair	262-434-0027
Van Ert	Bridget	Vice Chair	920-248-1155
Johnson	Jennifer	Secretary	608-852-5565
Reilly	Linden	Executive Director	414-303-2079

Continued →

Part C: Event Information			
1. Name of Event (if applicable) 9th Annual Wine Walk			
2. Dates of Operation 9/25/25		3. Hours of Operation 4:30 - 8pm	
4. Premises Address Sassy Sweets - 902 N Water St. 116 W. Main St.			
5. City Watertown		6. State WI	7. Zip Code 53094
8. County Jefferson	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: Watertown		10. Aldermanic District
11. Organizer of Event (if not the named applicant) Watertown Area Chamber		12. Email and/or Phone Number for Organizer of Event info@watertownchamber.com	
13. Organizer Website WatertownChamber.com		14. Event Website WatertownChamber.com/winewalk	
15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe 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 map or diagram and additional sheets if necessary. Retail Sales floor, first floor only inside			

Part D: Attestation			
Who must sign this application? • one officer or director of the nonprofit organization			
<p>READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant organization and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate according to the law, including but not limited to, purchasing alcohol beverages from Wisconsin-permitted wholesalers. I understand that lack of 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 be prosecuted for submitting false statements and affidavits in connection 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.</p>			
Last Name Deacy		First Name Linden	
Title Executive Director		M.I.	
Email linden@watertownchamber.com		Phone 926-261-6360	
Signature 		Date 6/24/25	

Part E: For Clerk Use Only	
Date Application Was Filed With Clerk 07-01-25	License Number 2025-039
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

White oak Bldgs.

Form
AB-220

Temporary Alcohol Beverage License

Municipality
C. Watertown

License(s) Requested	Fees	
	License Fees	\$ 10.00
	Background Check	\$ 10.00
	Total Fees	\$ 10.00

☒ Temporary "Class B" Wine ☐ Temporary Class "B" Beer

Part A: Organization Information

1. Organization Name
Watertown Area Chamber of Commerce

2. Organization Permanent Address
519 E Main St

3. City
Watertown

4. State
WI

5. Zip Code
53094

6. Mailing Address (if different from permanent address)

7. FEIN
39-0689225

8. Date of Organization/Incorporation
8/20/1920

9. State of Organization/Incorporation
WI

10. Phone
916-261-6320

11. Email
info@watertownchamber.com

12. Organization type (check one)

☐ Bona Fide Club ☐ Church ☐ Fair Association/Agricultural Society ☐ Veteran's Organization

☐ Lodge/Society ☒ Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

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

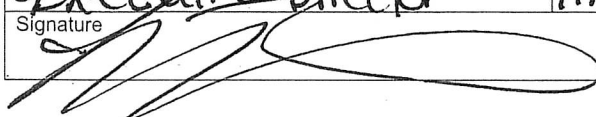
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Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).

Last Name	First Name	Title	Phone
Wagner	Cassandra	Board Chair	916-988-7577
Larson	Allen	Vice Chair	262-434-6027
Van Ert	Bridget	Vice Chair	920-248-1155
Johnson	Jennifer	Secretary	608-852-5565
Reilly	Linden	Executive Director	414-303-2079

Continued →
TO PD
NF

Part C: Event Information			
1. Name of Event (if applicable) 9th Annual Wine Walk			
2. Dates of Operation 9/25/25		3. Hours of Operation 4:30 - 8pm	
4. Premises Address White Oak Builders - 14 E Main St			
5. City Watertown		6. State WI	7. Zip Code 53094
8. County Jefferson	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: Watertown		10. Aldermanic District 7
11. Organizer of Event (if not the named applicant) Watertown Area Chamber		12. Email and/or Phone Number for Organizer of Event info@watertownchamber.com	
13. Organizer Website WatertownChamber.com		14. Event Website WatertownChamber.com/winewalk	
15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe 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 map or diagram and additional sheets if necessary. Retail Sales floor, first floor only inside			

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Last Name Deacy		First Name Linden	
Title Executive Director		M.I.	
Email linden@watertownchamber.com		Phone 926-261-6320	
Signature 		Date 6/24/25	

Part E: For Clerk Use Only	
Date Application Was Filed With Clerk 07-01-25	License Number 2025-040
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	