



Change of Officers

City of Madison Clerk

210 MLK Jr Blvd, Room 103

Madison, WI 53703

licensing@cityofmadison.com

608-266-4601

Class A: ☒ Beer, ☒ Liquor, ☐ Cider

Class B: ☐ Beer, ☐ Liquor,

☐ Class C Wine

(Agenda Item Number)

(Legistar file number)

LICLIA-2011-00171

(License number)

9 Conklin

(Alder District # and Name)

Office Use Only

- o This application is to inform the city of any changes in corporate structure.
- o **The fee** for filing this application is \$25.00.
- o Please include a completed a **Background Investigation Form** and copy of a **picture ID** for each **new** officer/member/director with this application (not necessary for title changes).

Licensed Premises Information

This application modifies existing alcohol license number: LICLIA-2011-00171

Business dba Name: Walgreens #07536

Licensed Address: 8302 OLD SAUK RD MADISON, WI 53562

Liquor/Beer Agent Name: Melissa Welch

Alder, District #: 430

Corporate Information

Business Legal Name (as on WI State Sellers Permit): 456-0000455404-05

Business Mailing Address: PO Box 901, Deerfield, IL 60015

Business Contact Name, Position: Savannah Mansour, License Specialist

Business Phone: (847) 315-2297

Business Email: taxlicenser renewals@walgreens.com

List New Officers/Members/Directors, if applicable (attach background check form for each):

Name	Title
Jeffery Gruener	Senior Vice President and Chief Financial Officer, Treasurer & Director

Officers/Members/Directors who will no longer hold their positions:

Name	Former Title
Alan Troy Nielsen	Senior Vice President and Chief Financial Officer, Treasurer & Director

continued on page two -OVER

Do any of the officers/members/directors possess any interest or control in any other Class A, B or C license?

☒ No ☐ Yes, explain: _____

After this change, how many total officers/members/directors will be in the organization?: 4

Will this change alter your business plan? ☒ No ☐ Yes, please attach new business plan with application.

Penalty for materially false application information: Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.



Authorized Signature
Lisa Badgley, Senior Vice President

Date

☐ Form submitted by mail/e-mail
Office Use Only