Submit to municipal clerk. For the license period beginning_			Rolley's Darmi	Number: 004-0006	113301
roi the license period beginning_	For the license period beginning september 2nd 20 08;			Federal Employer Identification 39-2044315	
	september 2nd	prember 2nd 20 08 ;		LICENSE REQUESTED	
ending		20 <u>09</u>		TYPE	FEE
	Town of			A beer	\$
TO THE GOVERNING BODY of th		dison	Z Class		\$
	☑ City of		Whole	sale baer	\$
A a dana	7-20-		U Class	2 wine	\$
County of dane	Aldermanic Dist. No	(If required by ordin	nance) Class	Allquor	\$
e un personal			Z Class		\$ 20
1 The named I INDIVIDUAL	PARTNERSHIP	LIMITED LIABILITY COMPA	NY Reserv	e Class B liquor	S
CORPORATION/I	NONPROFIT ORGANIZATIO	N		blication fee	\$
hereby makes application for the alco	ohol beverage license(s) chec	ked above	TOTAL	FEE	\$
Name (individual/partners give last no	ame, first, middle, corneration	salmitad liability companies si	ve realstered name):		<u> </u>
ATE A CHAIGH IS OWNED INC	HIDEL VIOVE SHIPE F	i Atimar/mamhar 🔿 /	~ D 	- T - TS	
An "Auxiliary Questionnaire," Form partnership, and by each officer, di liability company. List the name, the President/Member Owner/mem	le, and place of residence of N	each person Bins Vigy 615 bear clay	on, and by each mei Home Address V Way Midd	Post Office a lleton 5.3.57	nt of a limi Zip Code & 2
Vice President/Member OWNET/ IT Secretary/Member				deton 535	<u> 62</u>
Treasurer/Member •					
Agent CARINE L	NGY Lone	oc observed			
Directors/Managers	My will	as whose)			····
* * * * * * * * * * * * * * * * * * *					
3. I rade Name ▶ La Baguette 4. Address of Premises ▶ 7424 Min	manal maint and	8usin	ess Phone Number	<u>(608) 827-6775</u>	
Address of Premises P	neral point road	Post (Office & Zip Code 🕨	Madison, 53717	
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to mic abburging did elithicite of SORIII O	R. Of ACUNG ON Dehalf of Anvo	10 excent the named annicant	2	(– 1	
. Dogs and other archite behalder (509)	I INCUMSELL OF WOODGRADE PARTY	HOD house sou interest in a see	والمرابع المرابع المرابع المرابع		
8. (a) Corporate/limited (lability compa	ENV applicants only Incort	state WISCONSIN	l doso 2002		s 🔽 N
(b) Is applicant corporation/limited liab	Hilly company a subsidiary of	Start Differ corporation or iimke	d liability	or registration	<u></u>
(c) Does the corporation, or any office	r. director, stockholder or and	any ories corporately or minus	or south recent self	Yes	S Z N
		IN OF HIMITARI HANIBUL CAMBANI			, (177) 146
agent hold any interest in any othe	er alcohol beverage license or	nt of limited liability company,	or any membermana	ger or	ι —
eficur unit atta turciest iti atta otile	if alconol Deverage license or	permit in Wisconsin?		ger ar , Yes	ι —
(NOTE: All applicants explain fully on r	er alconol beverage license or reverse side of this form every	permit in Wisconsin? 'YES answer in sections 5, 6.	7 and 8 shave)	Yes	ι —
(NOTE: All applicants explain fully on r Premises description: Describe building all rooms including living quarters, if us	er alconol beverage license or reverse side of this form every g or buildings where alcohol b led. for the sales service, are	permit in Wisconsin? YES answer in sections 5, 6,	7 and 8 above.)	Yes	ι —
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