



Change of Officers

(Agenda Item Number)

(Legistar file number)

1268-792

(License number)

(Alder District # and Name)

Office Use Only

City of Madison Clerk

210 MLK Jr Blvd, Room 103
Madison, WI 53703

Class A: Beer, Liquor, Cider

Class B: Beer, Liquor,
 Class C Wine

licensing@cityofmadison.com
608-266-4601

- 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: 456-1020100382-03

Business dba Name: Madison Labor Temple

Licensed Address: 1602 South Park street Madison WI 53715

Liquor/Beer Agent Name: Garnet Monthie Alder, District #: _____

Corporate Information

Business Legal Name (as on WI State Sellers Permit): Madison Labor Temple

Business Mailing Address: 1602 south Park street Madison WI 53715

Business Contact Name, Position: Dave Poklinski XP

Business Phone: 608 770 8896 Business Email: lbew2304@att.net

List New Officers/Members/Directors, if applicable (attach background check form for each):	
Name	Title
Jason Hoffman	member
Mike Killian	Member
Tom Lemens	President
Andrew Disch	member
Jim Wick	member
Pety Friedericks	member
Officers/Members/Directors who will no longer hold their positions:	
Name	Former Title
Jeff Leckwee	President
Mike Grassy	Director Member
Tim Brumby	Member
Sue Blue	Member

Scott Bantz
greg storkson
Jesse Buell

Treasurer
member
member

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?: 8

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.

David Poplawski 4-16-23
Authorized Signature Date

Form submitted by mail/e-mail
Office Use Only