ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION	Applicant's Wisconsin Seller's Permit Number: 456-100		
	Federal Employer Idealification- Number (FEIN): 2.7-2.5407	01	
For the license period beginning $7-1-12$ 20 ; ending $6-30-12$ 20	LICENSE REQUESTED		
ending <u>6-30-12</u> 20	TYPE	FEE	
Town of All	Class A beer	\$	
TO THE GOVERNING BODY of the:	Class B beer	\$	
City of	Wholesale beer	\$	
	Class C wine	\$	
County of DEME Aldermanic Dist. No. 4 (if required by ordinance)		\$	
	🕱 Class B liquor	\$	
1. The named TINDIVIDUAL TPARTNERSHIP LIMITED LIABILITY COMPANY	Reserve Class B liquor	\$	
CORPORATION/NONPROFIT ORGANIZATION	Publication fee	\$	
hereby makes application for the alcohol beverage license(s) checked above.	TOTAL FEE	\$	
<ol> <li>Name (individual/partners give last name, first, middle; corporations/limited liability companies give registe ORPNEVN, OF MND/SON, INC.</li> </ol>	ered name):		
An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application b	w angh individual applicant by a	ach mombar of a	
partnership, and by each officer, director and agent of a corporation or nonprofit organization, an liability company. List the name, title, and place of residence of each person.	d by each member/manager and a	agent of a limited	
President/Member President Olesya Name Neuto 1542 V	Nild IRIS St, Sur	1/2012/00000000000000000000000000000000	
Secretary/Member		· · · · · · · · · · · · · · · · · · ·	
Treasurer/Member /)			
Agent Olesya Kuzmenko			
Directors/Managers			
3. Trade Name Dupheum Theoutre, Business Pt	none Number 255-87	55	
4. Address of Premises ) 26 State Street Post Office	& Zip Code > Madison	WI-53.703	
5. Is individual, partners or agent of corporation/limited liability company subject to completion of the respons training course for this license period?		Yes 🔀 No	
<ul><li>6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant?</li></ul>			
and the second			
<ol> <li>Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of tr</li> <li>(a) Corporate/limited liability company applicants only: Insert state and date</li> </ol>	1 2010 of registration		
<ul> <li>(a) Corporate/Imited liability company applicants only: Insert state and date</li> <li>(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability</li> </ul>	or registration.	Yes 🔀 No	
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any n		Yes No	
agent hold any interest in any other alcohol beverage license or permit in Wisconsin?			
(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8			
9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. T	he applicant must include	m ())	D
all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and may be sold and stored only on the premises described.)	Wa Ka ceurent ST	floor 41022 ba	ha
<ol> <li>Legal description (omit if street address is given above):</li> </ol>	The presence in , 13	under present u	ŰÝ,
44 (1) M(1) If the unit of the state of Keyley as been during the next Reence your?	N	Yes No	J
(b) If yes, under what name was license issued? <u>Crpheum</u> Theat ne Co	OF MADISON, INC		
<ul> <li>12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5)</li> </ul>			
before beginning business? [phone 1-800-937-8864]		ľYes □ No	
<ol> <li>Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same national sector of the same</li></ol>			
Section 2, above? [phone (608) 266-2776]		Yes 🗌 No	
<ol> <li>Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?</li> </ol>		Yes X No	
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above question	ns has been truthfully answered to the b	est of the knowledge	
of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred b	by the license(s), if granted, will not be a	assigned to another.	
(Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Li any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdem	eapor and grounds for revocation of this	license	
SUBSCRIBED AND SWORN TO BEFORE ME	id Mester		
	mber/Manager of Limited Lability Company	//Partner/Individual)	
Consider of Coliporation and Consider of Coliporation and	and a chinese contraction and the contraction		
(Officer of Corporation) (Officer of Corporation	on/Member/Manager of Limited Liability Con	npany/Partner)	
My commission expires IS PERMANENT	·		
	(s)/Member/Manager of Limited Liability Cor	npany if Any)	
Date received and filed 7 Date reported to council/board Date provisional license issued Sign	nature of Clerk / Deputy Clerk		
with multicipal clerk Date license granted Date license issued License.number issued			
HIN 2.0 2012			
AT-106 (R-4-09) UN- & V 4.016	A Solo A Wisconsin Di	epartment of Revenue	
	B-2012-00464		

MADISON CITY CLERK

10018-2012-00460 10-4 10-406

### **City of Madison Supplemental Class B License Application**

, <b>,</b>	• •	
<ul> <li>Seller's Permit Number</li> <li>Federal Employer Identification #</li> <li>Notarized Original Application Form</li> <li>Notarized Supplemental Form</li> <li>Orange Sign (Clerk's Office provides at time of application)</li> </ul>	<ul> <li>Written Description of Premise</li> <li>Background Investigation Form(s)</li> <li>Notarized Transfer of Ownership</li> <li>*Articles of Incorporation</li> <li>*Notarized Appointment of Agent</li> <li>* Corporation/LLC only</li> </ul>	<ul> <li>☑ Floor Plans</li> <li>☑ Lease</li> <li>☑ Sample Menu</li> <li>☑ Business Plan</li> </ul>
1. Name of Applicant/Partner/Corporati	on/LLC Onpheum of Man	dison INC
2. Address of Licensed Premise <u>Al</u>	5 Starte Street	
3. Telephone Number: ( <u>608)445-</u>	7250 4. Anticipated opening date:	06 20 2012
5. Mailing address if not opening immed	liately POBOK 1829, Made	son, WI-53.701
•	Police Department District Captain, Alcohntative for the area in which you intend to	
7. Are there any special conditions desired		
Explain. I am not son	te.	<b>A</b>
<ol> <li>8. Business Description, including hours         <u>concents</u> durning legat         Hours will vary deput</li> <li>9. Do you plan to have live entertainment</li> </ol>	of operation: <u>Catoning</u> , <u>special</u> <u>classesting</u> Gains under <u>cling</u> and event. t? DNO & Yes-What kind? <u>Conce</u>	<u>events restaurant</u> <u>Wisconsi'n la</u> w. ents, <u>live uur</u> sie
size and all areas where alcohol bever below shall not be expanded or cha	ng, including overall dimensions, seating a rages are to be sold and stored. The licens <b>nged without the approval of the Comm</b> <i>liceling basement</i> , 1st fa g covers, Capacity - 2000	sed premise described 10n Council.
	lirectly accessible and under control of the and stored only on the licensed premise, ne	
12. Describe existing parking and how pa	rking lot is to be monitored. <u>Noue</u>	
13. Describe your management experience Managed Orpheicus and durfies wary per	re, staffing levels, duties and employee tra Theoretic for the last year n evert.	ining. en Shaffi'ng

14. Identify the **registered agent** for your Corporation or LLC. This is your corporation's agent for service of process, notice or demand required or permitted by law to be served on the corporation.

Olesyer Kuzmenko Name </th <th>1542 Wild Izis St, Address</th> <th>Sun Prainie WI-53590 DEGEIVED JUN 20 2012</th>	1542 Wild Izis St, Address	Sun Prainie WI-53590 DEGEIVED JUN 20 2012
*****	······································	MADISON CITY CLERK

HIV perco	ous attending cour	conts and special e	vents.
JIN PERSO	<u>Ins writing conc</u>	ens enus specier -	
16. What age range wo	uld you hope to attract to your e	<u>consts and special c</u> establishment? <u>All ages</u>	4
		usiness. What products will you Facebook Twitte	
	under a lease or franchise agreer		] No
19. Owner of building v	where establishment is located:	216 State Street Rainie WI Phone Num 53590	,LLC
Address of Owner: <u>154</u>	he wild Inis St. Sun	<u>1 Mainie WI</u> Phone Num 53590	ber <u>(608)445-745</u>
20. Private organization to give offense) disc	s (clubs): Do your membership crimination in regard to race, cre	policies contain any requirement eed, color, or national origin?	tt of "Invidious" (likely □Yes ØNo
21. List the Directors o Olesiva Kuzn	f your Corporation/LLC 1euno 1542 Wild	Inis St Sun Prai	nie NI-5359
Name		,	
Name	Address	and the second	
Name 22. List the Stockholde	Address		
2. List the Stockholde	rs of your Corporation/LLC	I Inis St Sun Prainie	WZ-53590. 100 % of Ownership
22. List the Stockholde	rs of your Corporation/LLC	Juis St Sun Prainie	WZ-53590. 100 % of Ownership % of Ownership
22. List the Stockholde <u>Olegor Kuz</u> <sub>Name</sub>	rs of your Corporation/LLC MUKO 1542 Wilc Address	Juis St Sun Prainie	% of Ownership
22. List the Stockholde <u>Olegor Ku2</u> <u>Name</u> Name Name 23. What type of establi	Address Address Address Address	tt apply) □ Tavern ⊠ Nightclub	% of Ownership % of Ownership % of Ownership
22. List the Stockholde <u>Olegor Ku2</u> <u>Name</u> Name Name 23. What type of establi	Address Address Address Address	tt apply) □ Tavern ⊠ Nightclub	% of Ownership % of Ownership % of Ownership
<ul> <li>22. List the Stockholde <u>Olegyor Ku2</u> Name</li> <li>Name</li> <li>23. What type of establic Other Please Ex</li> <li>24 What type of food w</li> </ul>	rs of your Corporation/LLC <u>Address</u> Address Address Address Address Address Address Address Address	tt apply) □ Tavern ⊠ Nightclub	% of Ownership % of Ownership % of Ownership
22. List the Stockholde <u>Ole yor Ku2</u> Name Name 23. What type of establi Ø Other Please Ex 24 What type of food w Ø Breakfast Ø L	The set of	it apply) □ Tavern ¤ Nightclub <u>Veuue</u> epeuds on eveut	% of Ownership % of Ownership % of Ownership 0 □ Restaurant
<ul> <li>22. List the Stockholde <u>Olegyon Kurz</u> Name Name</li> <li>23. What type of establis Ø Other Please Ex</li> <li>24 What type of food w Ø Breakfast Ø L</li> <li>25. Please submit a sam</li> </ul>	The set of	nt apply) □Tavern XNightclub Veuue.	% of Ownership % of Ownership % of Ownership 0 □ Restaurant
<ul> <li>22. List the Stockholde <u>Olesyon Ku2</u> Name Name Name</li> <li>23. What type of establide X Other Please Ext 24 What type of food w I Breakfast X L 25. Please submit a same operational menu w X Desserts □ Pizz</li> </ul>	rs of your Corporation/LLC <u>Address</u> Address Addres Addres Address Address Address Address Address Address A	nt apply) □ Tavern ¤ Nightclub <u>Veuue</u> <u>epeuels on eveut</u> , if possible. What might eventu	% of Ownership          % of Ownership

.

27. What hours, if any, will food service not be available? Event hains will vany
27. What hours, if any, will food service <u>not</u> be available? <u>Event hains will varie</u> 28. Indicate any other product/service offered. <u>Catening</u> , <u>special</u> event.
29. Will your establishment have a kitchen manager? 🛛 Yes 🛛 🗆 No
30. Will you have a kitchen support staff? ¤Yes □ No
31. How many wait staff do you anticipate will be employed at your establishment?
32. Do you plan to have hosts or hostesses seating customers? $\Box$ Yes $\bigotimes$ No
<ul> <li>33. Do your plans call for a full-service bar? XYes □ No</li> <li>If yes, how many bar stools do you anticipate having at your bar? <u>10</u></li> <li>How many bartenders do you anticipate you would have working at one time on a busy night? <u>20-25</u></li> </ul>
34. Will there be a kitchen facility separate from the bar? $\Box$ Yes $\boxtimes$ No
35. Will there be a separate and specific area for eating only? $\Box$ Yes $\swarrow$ No
If yes, what will be the seating capacity for that area?
36. What type of cooking equipment will you have? 🛛 Stove 🖾 Oven 🖾 Fryers 🖾 Grill 🗆 Microwave
37. Will you have a walk-in cooler and/or freezer dedicated solely to the storage of food products? XYes 🗆 No
38. What percentage of your overall payroll do you anticipate will be devoted to food operation salaries? $50\%$
39. If your business plan includes an advertising budget, what percentage of your advertising budget do you anticipate will be related to food? $50\%$ What percentage of your advertising budget do you anticipate will be drink related? $0\%$
40. Are you currently, or do you plan to become, a member of the Madison-Dane County Tavern League or

- the Tavern League of Wisconsin? 🗆 Yes 🛛 🕅 No
- 41. Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? □ Yes Ø No

### 42. What is your estimated capacity? \_\_\_\_\_\_

43. Pursuant to Chapter 23 of the Madison General Ordinances, all restaurants and taverns serving alcohol beverages shall substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. For new establishments, the percentage will be an estimate.

Gross Receipts from Alcoholic Beverages	45 %
Gross Receipts from Food and Non-Alcoholic Beverages	40 %
Gross Receipts from Other	15 %
Total Gross Receipts	100%

44. Do you have written records to document the percentages shown? ☑ Yes □ No You may be required to submit documentation verifying the percentages you've indicated.

**Read carefully before signing:** Under penalty provided by law, the applicant states that the above information has been truthfully completed to the best of the knowledge of the signer. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted will not be assigned to another. Any lack of access to any portion of a licensed premise during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Subscribed and Sworn to before me:

(Officer of Corporation/Member of LLC/Fartner/Individual) day\_of this My commission expires IS PERMANEN

# Appointment of New Liquor/Beer Agent

To be completed by Corporate Officer or Member of LLC	
I, <u>Oles yer Kuzmeuno</u> , officer/member for <u>On pheum of Mardison</u> , (Corporation/LLC), doing business as <u>Onpheum Theatne</u> , authorize and appoint	IN
(Corporation/LLC), doing business as Orpheum Theatne, authorize and appoint	•
<u>Olesya Kuzmenno</u> (Name) as the liquor/beer agent for the premise located at <u>216 State Street LLC</u> .	•
located at 216 State Street LLC.	
Subscribed and sworn to before me this	
My Commission Expires_15 PERMANENT	
To be completed by appointed Liquor/Beer Agent	
I, <u>Wesya</u> <u>MIZMEURO</u> , appointed liquor/beer agent for	
I, <u>Nesyer huzueuro</u> , appointed liquor/beer agent for <u>Onpheum of Madison IM</u> name of Corporation or LLC), being first duly sworn	
I, <u>Mesger</u> , appointed liquor/beer agent for <u>Onpheum of Madison IM</u> (name of Corporation or LLC), being first duly sworn say I have vested in me, by properly authorized and executed written delegation, full authority	
say I have vested in me, by properly authorized and executed written delegation, full authority	
say I have vested in me, by properly authorized and executed written delegation, full authority and control of the premise described in the license of such corporation or limited liability	
say I have vested in me, by properly authorized and executed written delegation, full authority and control of the premise described in the license of such corporation or limited liability company, and I am involved in the actual conduct of the business as an employee, or have a	
say I have vested in me, by properly authorized and executed written delegation, full authority and control of the premise described in the license of such corporation or limited liability company, and I am involved in the actual conduct of the business as an employee, or have a direct financial interest in the business of the licensee, therein relating to the intoxicating liquor/fermented malt beverage. The interest I have in the business is <u>100</u> %. Subscribed and sworn to before me this Signature of A gent	
say I have vested in me, by properly authorized and executed written delegation, full authority and control of the premise described in the license of such corporation or limited liability company, and I am involved in the actual conduct of the business as an employee, or have a direct financial interest in the business of the licensee, therein relating to the intoxicating liquor/fermented malt beverage. The interest I have in the business is <u>100</u> %.	

The appointed Liquor/Beer Agent must complete the other side of this form.

	ERVER CERTIFICATION	School Name: Learn2Serve Certification #: WI		H WISCONSIN STATUTES 125.04, 125.17, 134.66	Corporate Headquarters 13801 N. Mopac, Suite 100 Austin, Texas 78727 P: 800-442-1149
MISCONSIN	SELLER / SERVER	<b>Trainee Name:</b> <b>Date of Completion:</b> <sup>06/20/2012 01:51 CST</sup>	I, M M Control of the second o	COMPLIES WITH WISCONSIN STATU	



Lower Level Exiting Plan



Ground Floor Exiting Plan



**Balcony Exiting Plan** 



# Wisconsin Department of Financial Institutions

Strengthening Wisconsin's Financial Future

Search for:

orpheum of madison, inc.

Search Records

Search Advanced Search Name Availability

**Corporate Records** 

Result of lookup for O026449 (at 6/19/2012 10:17 PM )

# **ORPHEUM OF MADISON, INC.**

You can: File an Annual Report - Request a Certificate of Status - File a Registered Agent/Office Update Form

Vital Statistics			
Entity ID	O026449		
Registered Effective Date	05/03/2010		
Period of Existence	PER		
Status	Incorporated/Qualified/Registered Request a Certificate of Status		
Status Date	05/03/2010		
Entity Type	Domestic Business		
Annual Report Requirements	Business Corporations are required to file an Annual Report under s.180.1622 WI Statutes.		
Addresses			
Registered Agent Office	OLESYA G KUZMENKO 1542 WILD IRIS SUN PRAIRIE , WI 53590		
	File a Registered Agent/Office Update Form		
Principal Office	1542 WILD IRIS SUN PRAIRIE , WI 53590 UNITED STATES OF AMERICA		
Historical Information	n		
Annual Reports	Year Reel Image Filed By Stored On		
	2011 000 0000 online database		

File an Annual Report - Order a Document Copy

Certificates of Newly-elected Officers/Directors None

**Old Names** 

None

### Chronology

Effective Date	Transaction	Filed Date	Description
05/03/2010	Incorporated/Qualified/Registered	05/03/2010	E-Form
11/24/2010	Change of Registered Agent	11/24/2010	FM13-E-Form
05/05/2011	Change of Registered Agent	05/10/2011	FM13-E-Form
10/18/2011	Change of Registered Agent	10/18/2011	FM16-E-Form

Order a Document Copy

Sec. 180.0202 Wis. Stats.



### State of Wisconsin Department of Financial Institutions

# ARTICLES OF INCORPORATION - STOCK FOR-PROFIT CORPORATION

Executed by the undersigned for the purpose of forming a Wisconsin Stock For-Profit Corporation under Chapter 180 of the Wisconsin Statutes:

Article 1.	Name of the corporation:		
	orpheum of madison, inc.		
Article 2.	The corporation is organized under Ch. 180 of the Wisconsin Statutes.		
Article 3.	Name of the initial registered agent:		
	Eric Fleming		
Article 4.	Street address of the initial registered office:		
	428 N. Livingston MADISON, WI 53703 United States of America		
Article 5.	Number of shares of stock the corporation shall be authorized to issue:		
	Number of Shares Authorized: 9,000 Class: Common		
Article 6.	Name and complete address of each incorporator:		
	Eric Fleming 428 N. Livingston MADISON, WI 53703 United States of America		
Other provisions (optional).	(No other provisions declared.)		
Other Information.	This document was drafted by:		
	Eric Fleming		

**Incorporator signature:** Eric Fleming

**Date & Time of Receipt:** 5/3/2010 10:04:22 AM

**Credit Card Transaction Number:** 2010532225504

# **ARTICLES OF INCORPORATION - Wisconsin Stock For-Profit** Corporation (Ch. 180)

Filing Fee: \$100.00 Expedite Fee: \$25.00 Total Fee: \$125.00

ENDORSEMENT

# State of Wisconsin Department of Financial Institutions

EFFECTIVE DATE

5/3/2010



Entity ID Number O026449



WSCONSIN DEPARTMENT OF REVENUE PO BOX 8902 MADISON, WI 53708-8902

### State of Wisconsin • DEPARTMENT OF REVENUE

REGISTRATION UNIT 2135 RIMROCK RD PO BOX 8902 MADISON, W 53708-8902 PHONE: 608-266-2776 FAX: 608-264-6884 EMAIL: dorbusinesstax@revenue.wi.gov WEBSITE: www.revenue.wi.gov

Letter ID: L0342340640

ORPHEUM OF MADISON INC PO BOX 1829 MADISON WI 53701-1829 State of Wisconsin •

State of Wisconsin 

DEPARTMENT OF REVENUE

Personal Wallet Copy

Seller's Permit: 456-1027176526-03 Expiration Date: May 31, 2014 Legal/Real Name: ORPHEUM OF MADISON INC

Signature

### Wisconsin Business Tax Registration Certificate

Expiration date: May 31, 2014

Legal/real name: ORPHEUM OF MADISON INC

- This certificate confirms that you are registered with the Wisconsin Department of Revenue and authorized to engage in business activities for the tax types shown below.
- You may not transfer this certificate to any other individual or business.
- If your business is not operated from a fixed location, you must bring the wallet copy to all events.

Тах Туре	Account Type	Number
Sales & Use Tax	Seller's Permit	456-1027176526-03
Withholding Tax	Withholding Tax	036-1027176526-04

Orpheum Theater

. Catering menu



Imported &	Domestic Cheese Board	\$175
5	added Meat	
Whole Smol	ked Salmon with field greens, eggs, onion, capers & crostini	\$150
Antipasto 2	Platter roasted garlic, olives, artichoke hearts, vegetables, roasted red peppers, imported cheeses & crostini Add imported salami & prosciutto	
Chilled Shri	mp with lemon, cocktail sauce & horseradish	\$175
Coconut Shi	rímp jumbo shrimp coated in a light batter & coconut shavings	\$200
	pineapple & apricot chutney	
Shrimp Sca	mpí broiled with garlic, butter & lemon.	\$200
Baked Brie.		\$125
Quíche Flor	entine with mushrooms, spinach , onions & cheese	\$135
Chilled Mus	ssels	\$100
Steamed M	ussels in tomato, garlic & shallot broth	\$135
Vegetable C	<b>Srudite</b> with herb sour cream & creamy blue cheese	\$100
Crah Cakes.		\$200
	jumbo lump crab with remoulade	
Oysters Roc	c <b>kefeller</b> Broiled with bacon & spinach	\$175
	On the half shell with cocktail sauce	\$150
Seared Scallops\$175		
	En cruet with bacon, brown sugar & brandy reduction	

 $\sim$  Appetizers prices are reflective of fifty pieces  $\sim$ 



Peppercorn Encrusted Chevre\$100 with roasted garlic, olive oil & crostini
Stuffed Mushroom Caps
French Loaf Crostíní\$85 chevre, garlic & red pepper or Mozzarella, tomato & basil
Stuffed Artichoke Hearts\$125 with chevre & bread crumbs
Bacon Wrapped Water chestnuts\$125 whole crisp chestnut wrapped in crisp bacon
Bacon Wrapped Scallop\$185 tender scallop wrapped in crisp bacon
Silver Dollar Sandwiches\$200 choice of gourmet sandwiches: honey glazed ham , roast turkey, chicken salad, served with condiments
Swedish Meatballs\$100 petit meatballs smothered in Swedish style sauce
Buffalo Wings\$125 spicy chicken wings with creamy blue cheese
Artichoke Dip\$95 served with crostini & french loaf baguette
Wild Mushroom Tartlets
Kabobs\$175 cheese tortellini, tomato & garlic tomato, mozzarella & pesto drizzle marinated chicken with grapes
Gourmet Canapes\$175 cured Salmon & dill yellow fin tuna with crème fraiche seared Duck breast & tart cherry relish glazed ham & pineapple
$\sim$ Appetizers prices are reflective of fifty pieces $\sim$



### All meats and Fish are based on a 60z portion Add a house salad to each option for an additional \$6 Bread service with butter for \$2

Beef Tenderloin\$32 served with horseradish crème fraiche , choice of potato & vegetable
Prime Rib\$32 topped with mushroom au jus with choice of potato & vegetable
Roasted Pork Tenderloin\$28 finished with a tart cherry reduction, choice of potato & vegetable
Wild Salmon\$27 served with cucumber dill sauce, choice of potato & vegetable
Walnut Encrusted Walleye\$27 with choice of potato & vegetable
Flank Steak\$25 tender marinated flank steak with mushroom au jus, choice of potato & vegetable
Stuffed Chicken Breast
Vegetable Gratin or Farfalle\$20 farm fresh vegetables used in a baked dish or pasta with cream sauce.

~ Choices of side dishes ~

Wild Rice, Marinated asparagus, Yukon gold potatoes, Oven roasted baby red potatoes,

Green beans almandine, Vegetable sauté, Garlic mashed potatoes, &

Mashed sweet potatoes

Beverages & Desserts

Whole Cakes	\$45			
New York style cheesecake.				
Flourless chocolate cake				
Berry & lemon tart				
Dessert Trays	\$3 each			
chocolate covered strawberries				
fruit tarts				
chocolate sheet cake mini cheesecake				
gourmet cookies				
chocolate truffles				
Coffee Station	Príces vary			
	-			
Soft				
Drínks	\$2/nerson			
Drunks				
Keg Beer (half barrel)				
Miller Lite or Bud Light	\$300			
Miller Lite or Bud Light\$300				
Leinenkugel Original\$300				
Amstel Light\$360				
Heineken\$360				
Capital Amber or Seasonal\$360				
New Glarus Seasonal & Spotted Cow\$360 Bell Seasonal\$380				
Seirra Nevada Pale Ale\$380				
New Castle Nut Brown Ale\$380				
Lake Louie\$390				
Furthermore\$390				
Stella Artois\$390				

## MARKET OVERVIEW & MARKETING STRATEGY

#### The Community

Madison is the center of government and university institutions in Wisconsin. The population of Madison and Dane county is approximately 490,000 and comprised of a large percentage of highly-educated and professional residents. Median household income is just over \$60,000.

We are seeking to create a music venue that greatly adds to an already vibrant arts culture in Madison. It is our combined commitment to develop an entertainment facility that is accessible to all member of the community.

#### **Market Need**

Other facilities in the area which are available for use include the Overture Center, Majestic Theatre and Barrymore Theatre. The Majestic (capacity 600) and Barrymore (capacity 900) are limited in the size of shows they can present. The Overture Center (capacity 2,200) has a similar capacity to the Orpheum Theatre, but due to its higher rent and fees, is not always economically attractive to many performers and promoters.

The Orpheum also has the following advantages over its competition:

- Landmark facility on a landmark street.
- Non-union house (lower production costs.)
- 2,100 seat capacity.
- General admission and ease of ticketing.
- Drinks available in auditorium during performance.
- Accessible to more types of musical acts from country to heavy metal.
- Proximity to campus and 40,000+ student population.
- Location in the heart of Madison's retail, restaurant and entertainment district.

4

- Proximity to Minneapolis and Milwaukee.
- Easy parking access.
- Historic atmosphere.
- In-house catering abilities.
- Film presentation capabilities.

#### **User Groups**

Consist of local and national promoters, arts groups, university organizations and groups who use the Orpheum for private functions.

#### **Target Markets**

The Orpheum Theatre caters to Dane County, Madison and the built-in student audience. The business is event-driven, being that if you present it, they will come. Each type of show has a specific audience set. Different types of shows attract different audiences (i.e. country, indie, college rock, hard rock, folk, bluegrass and comedians, etc.) Presenting broad programming will bring in more entertainment dollars.

#### **Marketing Strategy**

The Orpheum will seek out national promotion companies to increase its stable of users. With inhouse stage, sound and lights we can compete better on a national level, bringing in acts currently not coming to Madison. With the renovations we also expect to receive many more inquiries for community-based theatrical productions. We will aggressively promote the theater for use in corporate functions, galas, awards presentations, etc.

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## SWOT ANALYSIS

### Strengths

- Location in Madison in heart of entertainment district and proximity to university and downtown.
- Historical significance in community.
- Name recognition.
- Unique atmosphere (1920's Movie Palace.)
- Capacity of 2,100 which is desirable for most commercial touring acts.
- Licenses: Food and Liquor, Theater, Nightclub, All Ages.
- Expertise and dedication of professional management staff.
- Business relationships with promoters, film companies and vendors.
- Lower cost structure for bands and promoters.

### Weakness

- Upkeep of historic property.
- High cost of utilities.
- Multi-uses of theater can create confusion for general public's perception of venue.
- Off-season for certain areas of the business can create cash flow issues.

### **Opportunities**

- Low cost to do renovations that will result in high returns.
- Larger take of the market share for live events.
- Increase opportunity for weddings, banquets, meetings, etc.
- Opens door to hosting Broadway-style productions, ballet, opera and plays.
- Value added to business and building.

#### Threats

- Competitor with publicly-funded Overture Center.
- Economic climate.

### **Tangible Goals**

- To increase income and cash flow.
- To build relationship with national promotion companies.