

Change of Officers

City of Madison Clerk 210 MLK Jr Blvd, Room 103 Madison, WI 53703

Class A: ☑ Beer, ☑ Liquor, ☑ Cider Madison, WI
Class B: ☐ Beer, ☐ Liquor, licensing@cityofn

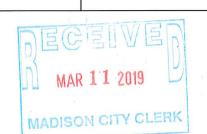
☐ Class C Wine

licensing@cityofmadison.com 608-266-4601

(Agenda	a Item Number)	
(Legista	r file number)	
(License	e number)	
(Alder L	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-2017-00699					
Business dba Name: Willy Street Co-op					
Licensed Address: 1221 Williamson Street, Madison, WI 53703					
Liquor/Beer Agent Name: Kristin Esselstrom Alder, District #: District 6					
Corporate Information					
Business Legal Name (as on WI State Sellers Permit): Williamson Street Grocery Cooperative					
Business Mailing Address:1457 E Washington Avenue, Madison, WI 53703					
Business Contact Name, Position: Ben Becker, Executive Assistant, Corporate Officer (Secretary)					
Business Phone: 608-284-7790 Business Email: b.becker@willystreet.coop					
List New Officers/Members/Directors, if applicable (attach background check form for each):					
Name Title					
Meghan Gauger Vice President					
Officers/Members/Directors who will no longer hold their positions:					
Name Former Title					
Holly Fearing Board President					



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license?	s possess any interest or control	in any other class A, B or C
☐ No ☑ Yes, explain: This is license is t	for one of multiple locations of	this business with alcohol licenses
After this change, how many total officers	s/members/directors will be in t	he organization?: <u>4 Officers</u>
Will this change alter your business plan? Penalty for materially false application information application may be required to forfeit not more that	: Any person who knowingly provides m	
Authorized Signature	3 - 4-2019 Date	☐ Form submitted by mail/e-mail Office Use Only