

## Change of Officers

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

Class A: ☑ Beer, ☑ Liquor, ☑ Cider Madison, WI 53703

Class B: ☐ Beer, ☐ Liquor, ☐ Li

☐ Class C Wine

(Legistar file number)
81000-45273
(License number)

0	This application	is to infor	n the city	of any	changes in	corporate structure.
O	This application	15 to 111101	II tile city	y Of ally	changes in	corporate structure.

o **The fee** for filing this application is \$25.00.

 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							
his application modifies existing alcohol license number: 8600-45273							
susiness dba Name: METCALFE'S							
icensed Address: 726 N MIDVALE BLVD, MADISON WI 53705							
iquor/Beer Agent Name: Kelin METCAUFE Alder, District #:							
Corporate Information							
Business Legal Name (as on WI State Sellers Permit): METCALFE, INC.							
Business Mailing Address: 726 N MIDYALE BLVD MADISON WI 53705							
Business Contact Name, Position: Kerry Mercaufe							
Business Phone: 608-238-7612 Business Email: KANNIM @ SHOP METCALFES COM							
List New Officers/Members/Directors, if applicable (attach background check form for each):							
Name	Title						
KEVIN METCLIFE	PRESIDENT						
Officers/Members/Directors who will no longer hold their positions:							
Name	Former Title						
TIM METCAUFE	Prevoent						

Do any of the officers/members/directors possess any interest or collicense?	ontrol in any other class A, B or C
□ No X Yes, explain: METCALE FOODS-WOT, INC	
After this change, how many total officers/members/directors will be	oe in the organization?:
Will this change alter your business plan? ${\Bbb Z}$ No $\ \square$ Yes, please atta	ach new business plan with application.
Penalty for materially false application information: Any person who knowingly pro- application may be required to forfeit not more than \$1,000.	vides materially false information on this
Authorized Signature Date	☐ Form submitted by mail/e-mail Office Use Only