



Common Council Regular Meeting Agenda

Tuesday, May 19, 2026 at 7:30 PM

Council Chambers and Virtual

In-Person Attendance:
City Hall Council Chambers
2nd Floor City Hall
335 S Broadway

Electronic Meeting Access:
<https://www.gotomeet.me/DePere>

Telephonic Meeting Access:
(866) 899-4679 -or- (312) 757-3117
Access Code: 154-883-28

1. Call to Order

2. Roll Call

3. Pledge of Allegiance

4. Approval of the Agenda

5. Presentations/Awards/Recognition

A. Oath of office for Municipal Court Judge Kristen Johnson.

6. Public Comments

Comments made during the public comment period shall pertain only to matters under the jurisdiction of the Common Council. §6-3(f) DPMC

7. Consent Agenda

Consent Agenda items are those items of a routine administrative nature that are voted on by the Council in a single roll call vote. Staff recommends approval of all items. Common Council may request that an item be removed from the Consent Agenda for discussion.

A. Approval of the minutes of the May 19, 2026 Common Council meeting.

B. Appointments to the Sustainability Commission by Mayor Boyd: Kevin Gerwing and Olive Pantzlaff; terms to expire June 30, 2027.

8. New Business

A. Recommendation from the License Committee on renewal applications for the licensing period of July 1, 2026 through June 30, 2027.

i. Class "A" Fermented Malt Beverage/"Class A" Intoxicating Liquor Licenses.

ii. Class "B" Fermented Malt Beverage License.

- iii. Class "B" Fermented Malt Beverage/"Class B" Intoxicating Liquor Licenses.
- iv. Reserve Class "B" Fermented Malt Beverage/"Class B" Intoxicating Liquor License.
- B. Recommendation from the Finance/Personnel Committee to approve the 2026 Non-Benefit Eligible Employees Wage Scale.
- C. Recommendation from the Finance/Personnel Committee on revisions to the criteria and structure of the Community Service Grant Program.
- D. Recommendation of the Finance/Personnel Committee to retain Stafford Rosenbaum LLP as outside counsel for representation before the Public Service Commission for the extension of utilities to the southeast area of De Pere.

The Common Council may convene in closed session pursuant to Section 19.85(1) (g), Wis. Stats., for the purpose of conferring with legal counsel for the governmental body who is rendering oral or written advice concerning strategy to be adopted by the body with respect to litigation in which it is or is likely to become involved. The Common Council will thereafter reconvene in open session pursuant to Section 19.85(2), Wis. Stats., to take action on items discussed in closed session, if appropriate, and to consider the remainder of the agenda.

9. Resolutions

- A. Resolution #26-37 Awarding Official City Newspaper Contract.
- B. Resolution #26-38 Authorizing Digital Solutions Agreement with Govstack for website provider services, with transfer of \$15,204 from Unassigned Reserves.
- C. Resolution #26-39 Authorizing Utility Easement for Wisconsin Public Service (925 South Sixth Street; Parcel WD-142).
- D. Resolution #26-40 Easement 711-815 S Sixth Street (Parcel #: WD-141-1) - Project 26-01.
- E. Resolution #26-41 2027 Gap Sidewalk Orders and Special Charges.
- F. Resolution #26-42 Authorizing intergovernmental agreement with the Town of Ledgeview for the Old Plank Road street resurfacing.
- G. Resolution #26-43 Authorizing Agreement for Professional Services with Berry, Dunn, McNeil & Parker, LLC, with transfer of \$56,000 from Unassigned Reserves (Enterprise Resource Planning).
- H. Resolution #26-44 Authorizing donation of abandoned bicycles to Counting Stars, Inc.
- I. Resolution #26-45 Approving intergovernmental agreement terms with the Town of Ledgeview for the provision of interim fire chief support services.
- J. Resolution #22-46 Approving Letter of Retainer for professional services with Stafford Rosenbaum LLP (public service utility infrastructure expansion).

10. Informational

- A. 2026 Aquatic report - informational presentation.

11. Future Agenda Items

12. Adjournment

Any person wishing to attend this meeting who, because of disability, requires special accommodations should contact the Clerk's office at 920-339-4050 by noon on the previous day so that arrangements can be made.

The Public or Members of the Common Council, which may count toward an official quorum, may attend the meeting either in person in the Council Chambers or telephonically or electronically via video conferencing or other appropriate technological means.

This meeting may also be rebroadcast on TV throughout the week and is available on demand at <https://deperewi.portal.civicclerk.com/>.



City of De Pere, Wisconsin

5.A

Request for Common Council Action

Meeting Date: May 19, 2026
Department: City Clerk
From: Carey Danen, City Clerk
Subject: Oath of office for Municipal Court Judge Kristen Johnson.
Recommendation:

Attachments:
None



City of De Pere, Wisconsin

7.A

Request for Common Council Action

Meeting Date: May 19, 2026
Department: City Clerk
From: Carey Danen, City Clerk
Subject: Approval of the minutes of the May 19, 2026 Common Council meeting.
Recommendation: Motion to approve.

Attachments:
5-5-26 Common Council minutes_draft



Common Council

Regular Meeting

Draft Minutes

335 South Broadway
De Pere, WI 54115
www.deperewi.gov

Tuesday, May 5, 2026

7:30 PM

Council Chambers/Virtual

1. CALL TO ORDER

The meeting was called to order at 7:30 PM by Mayor James Boyd.

2. ROLL CALL

Present: Pamela Gantz, Jonathon Hansen, Amy Kundinger, Shana Ledvina, Casey Nelson, Devin Perock, James Boyd, Dustin Thill

Excused: Mike Eserkahn

3. PLEDGE OF ALLEGIANCE

4. ALDERPERSON OATH OF OFFICE

5. APPROVAL OF THE AGENDA

RESULT:	APPROVED [UNANIMOUS]
MOVER:	James Boyd
SECONDER:	Shana Ledvina
AYES:	Pamela Gantz, Jonathon Hansen, Amy Kundinger, Shana Ledvina, Casey Nelson, Devin Perock, Dustin Thill, James Boyd

6. PUBLIC COMMENTS

Comments made during the public comment period shall pertain only to matters under the jurisdiction of the Common Council. §6-3(f) DPMC

Resident Mike Bragelman expressed concern regarding the lack of sidewalks connecting the downtown area to Voyageur Park, noting potential safety issues for pedestrians. Staff will follow up with Mr. Bragelman on this matter.

7. CONSENT AGENDA

RESULT:	APPROVED [UNANIMOUS]
MOVER:	James Boyd
SECONDER:	Casey Nelson
AYES:	Pamela Gantz, Jonathon Hansen, Amy Kundinger, Shana Ledvina, Casey Nelson, Devin Perock, Dustin Thill, James Boyd

A. Approval of the minutes of the April 21, 2026 Common Council meeting.

- B. Recommendation from Plan Commission to approve a 3-lot extraterritorial certified survey map at 3852-3890 Creamery RD in Ledgeview (Parcel D-376, D-376-2).
- C. Recommendation from Plan Commission to approve a 3-lot extraterritorial certified survey map at 3223 Lost Dauphin RD in Lawrence (Parcel L-552).
- D. Recommendation from Plan Commission to approve a 3-lot extraterritorial certified survey map at 2315 Lawrence PKWY in Lawrence (Parcel L-2111).

8. NEW BUSINESS

A. Appointments to the Youth Commission by Mayor Boyd.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Jonathon Hansen
SECONDER:	Amy Kunding
AYES:	Pamela Gantz, Jonathon Hansen, Amy Kunding, Shana Ledvina, Casey Nelson, Devin Perock, Dustin Thill, James Boyd

B. Appointments and reappointments to boards and commissions by Mayor Boyd.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Shana Ledvina
SECONDER:	Casey Nelson
AYES:	Pamela Gantz, Jonathon Hansen, Amy Kunding, Shana Ledvina, Casey Nelson, Devin Perock, Dustin Thill, James Boyd

C. Recommendation from the Board of Park Commissioners to accept a \$2,500 donation from Ameriprise Financial on behalf of Greta Johnson to the Recreation Scholarship Fund.

RESULT:	ACCEPTED [UNANIMOUS]
MOVER:	Amy Kunding
SECONDER:	Shana Ledvina
AYES:	Pamela Gantz, Jonathon Hansen, Amy Kunding, Shana Ledvina, Casey Nelson, Devin Perock, James Boyd, Dustin Thill

D. Recommendation from the License Committee on applications for Special Permits allowing consumption of alcohol beverages on public ways, submitted by Definitely De Pere for the following events:

i. Tour De Pere on Monday, June 22 from 11:00 am - 9:00 pm.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Pamela Gantz
SECONDER:	Devin Perock
AYES:	Pamela Gantz, Jonathon Hansen, Amy Kunding, Shana Ledvina, Casey Nelson, Devin Perock, Dustin Thill, James Boyd

ii. Alley Nights on Friday, June 19, July 17, and August 21 from 5:00 pm - 10:00 pm.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Pamela Gantz
SECONDER:	Dustin Thill

AYES:	Pamela Gantz, Jonathon Hansen, Amy Kunding, Shana Ledvina, Casey Nelson, Devin Perock, Dustin Thill, James Boyd
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iii. Music on the Plaza on Friday, June 26, July 24, and August 28 from 5:00 pm - 9:00 pm.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Devin Perock
SECONDER:	Pamela Gantz
AYES:	Pamela Gantz, Jonathon Hansen, Amy Kunding, Shana Ledvina, Casey Nelson, Devin Perock, Dustin Thill, James Boyd

- E. Consideration and possible action on proposed development agreement terms with New Land Enterprises LLC for a proposed redevelopment for the west side of the 100 S Broadway Block in Downtown De Pere, Tax Increment District No. 18.

Development Services Director Dan Lindstrom introduced the proposed development and outlined the challenges associated with the project. He explained that the item before the Council addresses the proposed terms of a development agreement, with the full agreement to be presented at a future meeting.

Tim Gokhman, Managing Director for New Land Enterprises, provided an overview of the company’s history and reputation. He highlighted several projects the firm has completed throughout Wisconsin, including one currently under construction in Green Bay. Senior Development Coordinator Joey Wisniewski presented details of the proposed “Lockside” project, which includes approximately 200 residential units - apartments, condos & townhomes - as well as 11,900 square feet of retail space. Planned amenities include a 24-hour fitness center, pool, and club room. The development features an enhanced pedestrian experience, articulated brick accents at building corners, metal balconies, and outdoor dining space. The team is also exploring the potential for boat slips.

Lindstrom then summarized the concept, noting an estimated total value of approximately \$70 million upon completion. As part of the project, George Street would be extended to Front Street and on-street parking would be added. A public art component and a publicly accessible, pedestrian-friendly plaza are also included in the proposal. He further addressed anticipated impacts to the downtown area, including parking, traffic, and affordable housing considerations. The project is expected to improve stormwater management and facilitate the removal of contaminated soils from historic fill on the site.

Lindstrom reviewed the financial incentives under consideration, including TID financing, a potential brownfield cleanup grant, and a PAYGO project grant. He also outlined upcoming steps such as the development agreement, neighborhood information meeting, street vacation process, grant submittals, and infrastructure design.

Lindstrom, Gokhman, and Wisniewski then responded to questions regarding maintenance of the public art installations; control of the public spaces and the City’s perpetual easement; the timeline for repayment of the City's financial assistance; and the location of building-specific amenities and the leasing office on Broadway.

Mayor Boyd moved, seconded by Alderperson Kunding to open the meeting. Upon vote, motion carried unanimously.

Resident Maureen VandenHogen asked questions regarding parking and expressed concern about the building height. Lindstrom explained that maximum building-story requirements had been removed from the zoning code due to the realization that shorter buildings were not economically feasible.

Resident Gerry Schoenfeld expressed concern about increased traffic and its effect on road conditions, and asked how far the proposed vacation of Front Street would extend. Staff noted the vacation would end at the old bridge approach on George Street.

Resident Mike Bragelman asked how the closure of Front Street would affect emergency vehicle access. Lindstrom responded that the plaza would be designed to accommodate emergency services.

Resident Mike Walsh spoke in favor of the proposed building height, noting that vertical growth is necessary in a landlocked community. He expressed concern about the extension of George Street to Front Street and whether it would necessitate another traffic light on Broadway.

Mayor Boyd moved, seconded by Alderperson Nelson to close the meeting. Upon vote, motion carried unanimously. Mayor Boyd then moved, seconded by Alderperson Kunding, to approve the proposed development agreement terms with New Land Enterprises LLC.

RESULT:	APPROVED BY ROLL CALL VOTE [UNANIMOUS]
MOVER:	James Boyd
SECONDER:	Amy Kunding
AYES:	Pamela Gantz, Jonathon Hansen, Amy Kunding, Shana Ledvina, Casey Nelson, Devin Perock, Dustin Thill, James Boyd

9. RESOLUTIONS

Mayor Boyd moved, seconded by Alderperson Gantz to suspend the rules and approve Items 9C & D together. Upon vote, motion carried unanimously.

- A. Resolution #26-33 Authorizing Development Agreement with Ninth Street Development, LLC (Parcel WD-D0200-4).

Development Services Director Dan Lindstrom reported that there are no conflicts related to the driveway connection from Ninth Street to the Festival Foods parking lot, as the properties involved are under the same ownership group. He noted that the anticipated TID financing structure would likely involve a 10-year bond with a seven-year call date.

RESULT:	ADOPTED BY ROLL CALL VOTE [UNANIMOUS]
MOVER:	James Boyd
SECONDER:	Casey Nelson
AYES:	Pamela Gantz, Jonathon Hansen, Amy Kunding, Shana Ledvina, Casey Nelson, Devin Perock, Dustin Thill, James Boyd

- B. Resolution #26-34 Authorizing Fourth Amendment to Lease Agreement with Brown County Ice Management, Inc. (De Pere Ice Recreation Center).

Parks Director Marty Kosobucki answered questions regarding open skate times, and

explained that St. Norbert College Hockey had been removed from the Board of Advisors because they no longer utilize the facility. He also noted that the revenue/financial gain provision in the agreement was revised to allow the City to take the lead on the sponsorship and advertising plan.

RESULT:	ADOPTED BY ROLL CALL VOTE [UNANIMOUS]
MOVER:	James Boyd
SECONDER:	Pamela Gantz
AYES:	Pamela Gantz, Jonathon Hansen, Amy Kunding, Shana Ledvina, Casey Nelson, Devin Perock, Dustin Thill, James Boyd

C. Resolution #26-35 Authorizing street name change for Southbrige Road, Red Maple Road and Rockland Road to Generations Boulevard (Southern Bridge Bypass).

D. Resolution #26-36 Authorizing Memorandum of Understanding Between the City of De Pere and William Street Investment Partners LLC - Parking Lease Agreement.

RESULT:	ADOPTED BY ROLL CALL VOTE [UNANIMOUS]
MOVER:	James Boyd
SECONDER:	Pamela Gantz
AYES:	Pamela Gantz, Jonathon Hansen, Amy Kunding, Shana Ledvina, Casey Nelson, Devin Perock, Dustin Thill, James Boyd

10. FUTURE AGENDA ITEMS

None.

11. ADJOURNMENT

Mayor Boyd moved, seconded by Alderperson Kunding to adjourn the meeting at 9:45 PM. Upon vote, motion carried unanimously.

Respectfully submitted,
Carey Danen, City Clerk



Request for Common Council Action

Meeting Date: May 19, 2026
Department: Administration
From: James Boyd, Mayor
Subject: Appointments to the Sustainability Commission by Mayor Boyd: Kevin Gerwing and Olive Pantzlaff; terms to expire June 30, 2027.
Recommendation: Motion to approve.

Kevin Gerwing

My name is Kevin Gerwing, and I am a Freshman at De Pere High School. I want to join the City of De Pere Sustainability Commission because I believe in keeping my world clean. Sustainability is really important to me, because I know that the people of my generation are the ones that are going to live on this planet for the rest of our lives, and a beautiful Earth full of life is a lot better than a dark and polluted one. One positive attribute about myself is my ability to work hard and persevere. An example of how I used this ability of hard work and perseverance is how I earned my black belt in karate – I pushed myself to keep working through difficult training and tests. This attribute of mine would benefit the Sustainability Commission by bringing the skills of someone who can push past obstacles to the table. Another positive attribute about myself is that I am invested in my community. I volunteer around De Pere and the surrounding area a lot, such as when I volunteered as a Junior Parkee for the De Pere Park Playground Program, supervising children and doing activities with them at playgrounds in De Pere.

Olive Pantzlaff

Olive Pantzlaff will be a freshman at West De Pere High School next year. She has been involved in Junior National Honor Society, Student Council, Leadership Club, and Junior Parade (Patriot Park), and she enjoys playing soccer. She has a strong interest in sustainability and has completed research projects focused on environmental issues. Olive looks forward to learning more about the City’s sustainability initiatives and hopes to help raise awareness and support efforts that strengthen our community’s long-term environmental stewardship.

Attachments:
None



City of De Pere, Wisconsin

8.A

Request for Common Council Action

Meeting Date: May 19, 2026
Department: City Clerk
From: Carey Danen, City Clerk
Subject: Recommendation from the License Committee on renewal applications for the licensing period of July 1, 2026 through June 30, 2027.

Recommendation:

The Police Department conducts background checks twice a month for all applications received during the previous two weeks. Due to the timing of this practice, results have not been received as of the agenda publication deadline. If approved, the Clerk's office will not renew the licenses until the background check results have been confirmed.

Attachments:
None



Request for Common Council Action

Meeting Date: May 19, 2026
Department: City Clerk
From: Carey Danen, City Clerk
Subject: Class "A" Fermented Malt Beverage/"Class A" Intoxicating Liquor Licenses.
Recommendation: Motion to approve.

1. Aldi, Inc. Wisconsin (DBA Aldi #53), 1100 Main Av. Agent: Michael Haasch, De Pere WI.
2. Country Visions Cooperative (DBA De Pere Country Store), 1221 Grant St. Agent: Steven Zutz, Brillion WI.
3. RSL Petroleum LLC (DBA Lawrence Food Mart), 1017 4th St. Agent: Lok Raj Bhatta, De Pere WI.
4. True North Energy LLC (DBA True North #811), 841 Main Av. Agent: Michelle Knox, Brillion WI.
5. True North Energy LLC (DBA True North #812), 1511 Lawrence Dr. Agent: Michelle Knox, Brillion WI.
6. True North Energy LLC (DBA True North #813), 1010 S Broadway. Agent: Michelle Knox, Brillion WI.
7. True North Energy LLC (DBA True North #814), 1063 N Broadway. Agent: Michelle Knox, Brillion WI.
8. WI Foodliner, Inc. (DBA Festival Foods), 1001 Main Av. Agent: William Chizek, Black Creek WI.
9. Wisconsin CVS Pharmacy LLC (DBA CVS #2214), 800 Main Av. Agent: Kendra Charlier, De Pere WI.

Attachments:

Aldi, De Pere Country Store, Lawrence Food Mart, True North 811, True North 812, True North 813, True North 814, Festival Foods, CVS Pharmacy #2214

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only
Municipality City of De Pere
License Period 7/1/2026 - 6/30/2027

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)	Fees	
<input checked="" type="checkbox"/> Class "A" Beer \$ _____	<input type="checkbox"/> Class "B" Beer \$ _____	License Fee(s) \$ 549
<input checked="" type="checkbox"/> "Class A" Liquor \$ _____	<input type="checkbox"/> Regular "Class B" Liquor \$ _____	Background Check Fee \$ _____
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____	<input type="checkbox"/> Reserve "Class B" Liquor \$ _____	Publication Fee \$ 30
<input type="checkbox"/> "Class C" Liquor (wine only) \$ _____	<input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____	Total Fees \$ 579

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship) ALDI, Inc. (Wisconsin)		
2. Business Trade Name or DBA ALDI #53		
3. FEIN 36-3498392	4. Wisconsin Seller's Permit Number 456-0000089014-04	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization		
6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.		
7. State of Organization WI	8. Date of Organization 12/02/1986	9. Wisconsin DFI Registration Number A025780
10. Premises Address 1100 N Main Ave		
11. City De Pere	12. State WI	13. Zip Code 54115
14. County Brown	15. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: De Pere	16. Aldermanic District
17. Premises Phone [REDACTED]	18. Premises Email [REDACTED]	19. Website [REDACTED]
20. Premises Description Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same. <input checked="" type="checkbox"/>		
21. Mailing Address (if different from premises address) 317 East Carson Street, Suite 333		
22. City Pittsburgh	23. State PA	24. Zip Code 15219

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list the details of violation below. Attach additional sheets if necessary.		
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.

I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.

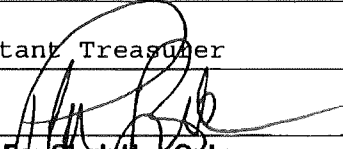
(For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.

I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:
 • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Beattie	First Name Philip	M.I. J
Title Assistant Treasurer	Email [REDACTED]	Phone [REDACTED]
Signature 	Date 03/24/26	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date 4/6/26

Agent Type (check one)

- Original (no fee) Successor (\$10 fee for municipal licensees only)

Part A: Business Information

1. Legal Business Name (Individual name if sole proprietor) ALDI, Inc. (Wisconsin)	
2. Business Trade Name or DBA ALDI #53	
3. Entity Type (check one) <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number n/a
6. Describe the reason for appointing a successor agent. If successor is checked above. n/a	

Part B: Agent Information

1. Last Name Haasch	2. First Name Michael	3. M.I. J
4. Email [REDACTED]	5. Phone [REDACTED]	
6. Home Address 311 North 6th Street		
7. City De Pere	8. State WI	9. Zip Code 54115
11. Driver's License/State ID Number [REDACTED]	10. Date of Birth	
12. Driver's License/State ID State of Issuance WI		

Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, Alcohol Beverage Individual Questionnaire (licensee) or Form AB-300, Alcohol Beverage Personal Questionnaire (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

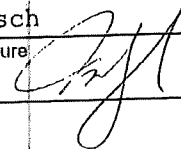
Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Beattie	First Name Phillip	M.I. J
Title Assistant Treasurer	Email [REDACTED]	Phone [REDACTED]
Signature	Date	


Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Haasch	First Name Michael	M.I. J
Signature 	Date 4/6/26	

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Beattie	First Name Phillip	M.I. J
Title Assistant Treasurer	Email [REDACTED]	Phone [REDACTED]
Signature 	Date 4/6/2026	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Haasch	First Name Michael	M.I. J
Signature	Date	

Alcohol Beverage License Application

For Municipal Use Only
Municipality
License Period

Application Type (check one)		
<input type="checkbox"/> Initial (New)	<input type="checkbox"/> Renewal	
License(s) Requested: (up to two boxes may be checked) <input checked="" type="checkbox"/> Class "A" Beer \$ <u>549</u> <input type="checkbox"/> Class "B" Beer \$ _____ <input checked="" type="checkbox"/> "Class A" Liquor \$ _____ <input type="checkbox"/> Regular "Class B" Liquor \$ _____ <input type="checkbox"/> "Class A" Liquor (cider only) \$ _____ <input type="checkbox"/> Reserve "Class B" Liquor \$ _____ <input type="checkbox"/> "Class C" Liquor (wine only) \$ _____ <input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____	Fees	
	License Fee(s)	\$ 549
	Background Check Fee	\$
	Publication Fee	\$ 30
	Total Fees	\$ 579

Part A: Premises/Business Information			
1. Legal Business Name (individual name if sole proprietorship) COUNTRY VISIONS COOPERATIVE			
2. Business Trade Name or DBA DEPERE COUNTRY STORE			
3. FEIN 39-0562160		4. Wisconsin Seller's Permit Number 456-0000251631-02	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization			
6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.			
7. State of Organization WI		8. Date of Organization 04/23/1923	
9. Wisconsin DFI Registration Number R001797			
10. Premises Address 1221 GRANT STREET			
11. City DEPERE		12. State WI	13. Zip Code 54115
14. County Brown <input checked="" type="checkbox"/>		15. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: DEPERE	16. Aldermanic District DISTRICT 3/WARD 1
17. Premises Phone [REDACTED]		18. Premises Email [REDACTED]	19. Website [REDACTED]
20. Premises Description Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same. <input checked="" type="checkbox"/>			
21. Mailing Address (if different from premises address) 1010 W RYAN STREET			
22. City BRILLION		23. State WI	24. Zip Code 54110

Part B: Questions		
1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list the details of violation below. Attach additional sheets if necessary.		
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? . . Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No
 5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No
 6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.

I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.

(For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.

I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:
 • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name ZUTZ		First Name STEVEN		M.I. R
Title CEO	Email [REDACTED]		Phone [REDACTED]	
Signature <i>Steven R. Zutz</i>			Date 4-28-26	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk			Date Provisional License Issued (if applicable)

Alcohol Beverage Appointment of Agent

Date

Agent Type (check one)	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor) COUNTRY VISIONS COOPERATIVE	
2. Business Trade Name or DBA DEPERE COUNTRY STORE	
3. Entity Type (check one) <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above.	

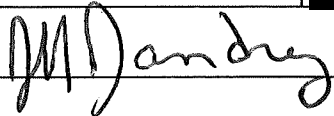
Part B: Agent Information			
1. Last Name ZUTZ	2. First Name STEVEN	3. M.I. R	
4. Email [REDACTED]		5. Phone [REDACTED]	
6. Home Address 3311 WHITETAIL RUN			
7. City BRILLION	8. State WI	9. Zip Code 54110	10. Date of Birth 63
11. Driver's License/State ID Number [REDACTED]		12. Driver's License/State ID State of Issuance WI	

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
See instructions for exceptions.	

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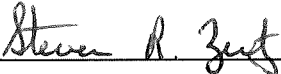
Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name JANDREY		First Name JEFFREY	M.I.
Title CFO	Email [REDACTED]	Phone [REDACTED]	
Signature 		Date 4-29-26	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name ZUTZ		First Name STEVEN	M.I. R
Signature 		Date 4-28-26	

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	City of De Pere
License Period	2026-27

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)	Fees
<input checked="" type="checkbox"/> Class "A" Beer \$ _____	License Fee(s) \$ _____
<input type="checkbox"/> Class "B" Beer \$ _____	Background Check Fee \$ _____
<input checked="" type="checkbox"/> "Class A" Liquor \$ _____	Publication Fee \$ 30.00
<input type="checkbox"/> Regular "Class B" Liquor \$ _____	Total Fees \$ 30
<input type="checkbox"/> Reserve "Class B" Liquor \$ _____	
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____	
<input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____	
<input type="checkbox"/> "Class C" Liquor (wine only) \$ _____	

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship) *
RSL petroleum LLC

2. Business Trade Name or DBA *
Lawrence food mart

3. FEIN * 4. Wisconsin Seller's Permit Number *
93-3624309 456-1031495694-04

5. Entity Type (check one)

Sole Proprietor Partnership Limited Liability Company Corporation Nonprofit Organization

6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? *
 Yes No
 If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.

7. State of Organization * 8. Date of Organization * 9. Wisconsin DFI Registration Number *
Wisconsin 09-27-2023 R087947

10. Premises Address *
1017 4th street

11. City * 12. State * 13. Zip Code *
De Pere WI 54115

14. County * 15. Governing Municipality: City Town Village * 16. Aldermanic District *
Brown of: De Pere

17. Premises Phone * 18. Premises Email * 19. Website *
[Redacted] [Redacted]

20. Premises Description *

Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same.

21. Mailing Address (if different from premises address) *

22. City * 23. State * 24. Zip Code *

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. *
 Yes No
 If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No
 5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No
 6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.

I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.


For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.

I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:
 • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Bhatta *		First Name Lok Raj *		M.I.
Title Owner *	Email		Phone	
Signature 	Date 04/13/2026			

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (If applicable)	

Alcohol Beverage Appointment of Agent

Date

Agent Type (check one)

- Original (no fee) Successor (\$10 fee for municipal licensees only)

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor) <i>RSL Petroleum LLC</i>	
2. Business Trade Name or DBA <i>Lawrence Food Mart</i>	
3. Entity Type (check one) <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above.	

Part B: Agent Information

1. Last Name <i>Bhatta</i>	2. First Name <i>LOK Raj</i>	3. M.I.
4. Email [REDACTED]	5. Phone [REDACTED]	
6. Home Address <i>1863 Misty Moon Way</i>		
7. City <i>De Pere</i>	8. State <i>WI</i>	9. Zip Code <i>54115</i>
10. Date of Birth [REDACTED]	11. Drivers License/State ID Number [REDACTED]	
12. Drivers License/State ID State of Issuance <i>WI</i>		

Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name <i>Bhatta</i>		First Name <i>Lok Raj</i>		M.I.
Title <i>owner</i>	Email [REDACTED]	Phone [REDACTED]		
Signature <i>L. Bhatta</i>			Date <i>4/30/2026</i>	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name <i>Bhatta</i>		First Name <i>Lok Raj</i>		M.I.
Signature <i>L. Bhatta</i>			Date <i>04/30/2026</i>	

Alcohol Beverage License Application

For Municipal Use Only
Municipality City of De Pere
License Period 7/1/2026 - 6/30/2027

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)

<input checked="" type="checkbox"/> Class "A" Beer \$ _____	<input type="checkbox"/> Class "B" Beer \$ _____
<input checked="" type="checkbox"/> "Class A" Liquor \$ _____	<input type="checkbox"/> Regular "Class B" Liquor \$ _____
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____	<input type="checkbox"/> Reserve "Class B" Liquor \$ _____
<input type="checkbox"/> "Class C" Liquor (wine only) \$ _____	<input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____

Fees	
License Fee(s)	\$ 549
Background Check Fee	\$
Publication Fee	\$ 30
Total Fees	\$ 579

Part A: Premises/Business Information

1. Legal Business Name (Individual name if sole proprietorship) True North Energy, LLC		
2. Business Trade Name or DBA True North #811		
3. FEIN 34-1902035	4. Wisconsin Seller's Permit Number 456-1030806825-02	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization		
6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.		
7. State of Organization DE	8. Date of Organization 08/13/1999	9. Wisconsin DFI Registration Number T-093593
10. Premises Address 841 Main Ave.		
11. City De Pere	12. State WI	13. Zip Code 54115
14. County	15. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: De Pere	16. Aldermanic District
17. Premises Phone [REDACTED]	18. Premises Email [REDACTED]	19. Website [REDACTED]
20. Premises Description Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same. <input checked="" type="checkbox"/>		
21. Mailing Address (if different from premises address) 10346 Brecksville Rd.		
22. City Brecksville	23. State OH	24. Zip Code 44141

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list the details of violation below. Attach additional sheets if necessary.		
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No
 5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No
 6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

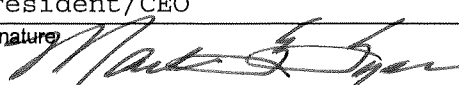
- I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.
- I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.
- (For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.
- I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:

- sole proprietor
- one general partner of a partnership
- one corporate officer
- one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Lyden	First Name Mark	M.I. E.
Title President/CEO	Email [REDACTED]	Phone [REDACTED]
Signature 		Date 4/21/20

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date 4/21/26

Agent Type (check one)	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor) True North Energy, LLC	
2. Business Trade Name or DBA True North # <u>811</u>	
3. Entity Type (check one) <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above.	

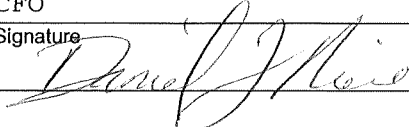
Part B: Agent Information			
1. Last Name Knox	2. First Name Michelle	3. M.I. A.	
4. Email [REDACTED]		5. Phone [REDACTED]	
6. Home Address W1224 Harvestore Rd.			
7. City Brillion	8. State WI	9. Zip Code 54110	10. Date of Birth [REDACTED]
11. Driver's License/State ID Number [REDACTED]		12. Driver's License/State ID State of Issuance WI	

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

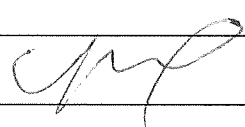
Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Niese		First Name Daniel		M.I. J.
Title CFO		Email [REDACTED]		Phone [REDACTED]
Signature 			Date 4/21/26	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Knox		First Name Michelle		M.I. A.
Signature 			Date 4/21/26	

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only
Municipality City of De Pere
License Period 7/1/2026 - 6/30/2027

Application Type (check one)		
<input type="checkbox"/> Initial (New)	<input checked="" type="checkbox"/> Renewal	
License(s) Requested: (up to two boxes may be checked) <input checked="" type="checkbox"/> Class "A" Beer \$ _____ <input type="checkbox"/> Class "B" Beer \$ _____ <input checked="" type="checkbox"/> "Class A" Liquor \$ _____ <input type="checkbox"/> Regular "Class B" Liquor \$ _____ <input type="checkbox"/> "Class A" Liquor (cider only) \$ _____ <input type="checkbox"/> Reserve "Class B" Liquor \$ _____ <input type="checkbox"/> "Class C" Liquor (wine only) \$ _____ <input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____	Fees	
	License Fee(s)	\$ 549
	Background Check Fee	\$
	Publication Fee	\$ 30
	Total Fees	\$ 579

Part A: Premises/Business Information		
1. Legal Business Name (individual name if sole proprietorship) True North Energy, LLC		
2. Business Trade Name or DBA True North #812		
3. FEIN 34-1902035	4. Wisconsin Seller's Permit Number 456-1030806825-02	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization		
6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.		
7. State of Organization DE	8. Date of Organization 08/13/1999	9. Wisconsin DFI Registration Number T-093593
10. Premises Address 1511 Lawrence Dr.		
11. City De Pere	12. State WI	13. Zip Code 54115
14. County	15. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: De Pere	16. Aldermanic District
17. Premises Phone [REDACTED]	18. Premises Email [REDACTED]	19. Website [REDACTED]
20. Premises Description Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same. <input checked="" type="checkbox"/>		
21. Mailing Address (if different from premises address) 10346 Brecksville Rd.		
22. City Brecksville	23. State OH	24. Zip Code 44141

Part B: Questions		
1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list the details of violation below. Attach additional sheets if necessary.		
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No
 5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No
 6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

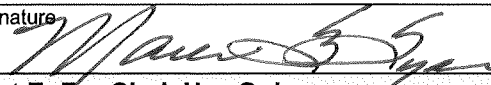
- I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.
- I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.
- (For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.
- I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:

- sole proprietor
- one general partner of a partnership
- one corporate officer
- one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Lyden	First Name Mark	M.I. E.
Title President/CEO	Email [REDACTED]	Phone [REDACTED]
Signature 		Date 4/21/26

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date 4/21/26

Agent Type <i>(check one)</i>	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor) True North Energy, LLC	
2. Business Trade Name or DBA True North # <u>812</u>	
3. Entity Type <i>(check one)</i> <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization <i>(check one)</i> <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above.	

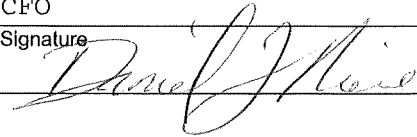
Part B: Agent Information			
1. Last Name Knox	2. First Name Michelle	3. M.I. A.	
4. Email [REDACTED]		5. Phone [REDACTED]	
6. Home Address W1224 Harvestore Rd.			
7. City Brillion	8. State WI	9. Zip Code 54110	10. Date of Birth [REDACTED]
11. Driver's License/State ID Number [REDACTED]		12. Driver's License/State ID State of Issuance WI	

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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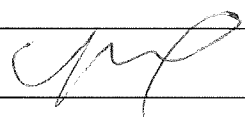
Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Niese	First Name Daniel	M.I. J.
Title CFO	Email [REDACTED]	Phone [REDACTED]
Signature 		Date 4/21/26

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Knox	First Name Michelle	M.I. A.
Signature 		Date 4/21/26

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only
Municipality City of De Pere
License Period 7/1/2026 - 6/30/2027

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)	Fees	
<input checked="" type="checkbox"/> Class "A" Beer \$ _____	<input type="checkbox"/> Class "B" Beer \$ _____	License Fee(s) \$ 549
<input checked="" type="checkbox"/> "Class A" Liquor \$ _____	<input type="checkbox"/> Regular "Class B" Liquor \$ _____	Background Check Fee \$
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____	<input type="checkbox"/> Reserve "Class B" Liquor \$ _____	Publication Fee \$ 30
<input type="checkbox"/> "Class C" Liquor (wine only) \$ _____	<input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____	Total Fees \$ 579

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)
True North Energy, LLC

2. Business Trade Name or DBA
True North #813

3. FEIN
34-1902035

4. Wisconsin Seller's Permit Number
456-1030806825-02

5. Entity Type (check one)
 Sole Proprietor Partnership Limited Liability Company Corporation Nonprofit Organization

6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? Yes No
If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.

7. State of Organization
DE

8. Date of Organization
08/13/1999

9. Wisconsin DFI Registration Number
T-093593

10. Premises Address
1010 S. Broadway

11. City
De Pere

12. State
WI

13. Zip Code
54115

14. County

15. Governing Municipality: City Town Village
of: De Pere

16. Aldermanic District

17. Premises Phone
[REDACTED]

18. Premises Email
[REDACTED]

19. Website
[REDACTED]

20. Premises Description
Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.
Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same.

21. Mailing Address (if different from premises address)
10346 Brecksville Rd.

22. City
Brecksville

23. State
OH

24. Zip Code
44141

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. Yes No
If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No
 5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No
 6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

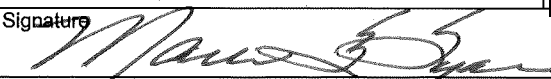
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- I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:

- sole proprietor
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Last Name Lyden	First Name Mark	M.I. E.
Title President/CEO	Email [REDACTED]	Phone [REDACTED]
Signature 		Date 4/21/20

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date 4/21/26

Agent Type <i>(check one)</i>	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor) True North Energy, LLC	
2. Business Trade Name or DBA True North # <u>813</u>	
3. Entity Type <i>(check one)</i> <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization <i>(check one)</i> <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above.	


Part B: Agent Information			
1. Last Name Knox	2. First Name Michelle	3. M.I. A.	
4. Email [REDACTED]		5. Phone [REDACTED]	
6. Home Address W1224 Harvestore Rd.			
7. City Brillion	8. State WI	9. Zip Code 54110	10. Date of Birth [REDACTED]
11. Driver's License/State ID Number [REDACTED]		12. Driver's License/State ID State of Issuance WI	

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days?..... See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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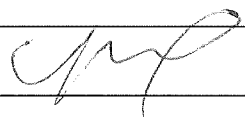
Part D: Business Attestation

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Last Name Niese	First Name Daniel	M.I. J.
Title CFO	Email [REDACTED]	Phone [REDACTED]
Signature 		Date 4/21/26

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READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Knox	First Name Michelle	M.I. A.
Signature 		Date 4/21/26

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	City of De Pere
License Period	7/1/2026 - 6/30/2027

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)

Class "A" Beer \$ _____ Class "B" Beer \$ _____
 "Class A" Liquor \$ _____ Regular "Class B" Liquor \$ _____
 "Class A" Liquor (cider only) \$ _____ Reserve "Class B" Liquor \$ _____
 "Class C" Liquor (wine only) \$ _____ Above-Quota "Class B"
Liquor \$ _____

Fees	
License Fee(s)	\$ 549
Background Check Fee	\$
Publication Fee	\$ 30
Total Fees	\$ 579

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)

True North Energy, LLC

2. Business Trade Name or DBA

True North #814

3. FEIN

34-1902035

4. Wisconsin Seller's Permit Number

456-1030806825-02

5. Entity Type (check one)

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6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? Yes No

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7. State of Organization

DE

8. Date of Organization

08/13/1999

9. Wisconsin DFI Registration Number

T-093593

10. Premises Address

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11. City

De Pere

12. State

WI

13. Zip Code

54115

14. County

15. Governing Municipality: City Town Village
of: De Pere

16. Aldermanic District

17. Premises Phone

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20. Premises Description

Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

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4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No
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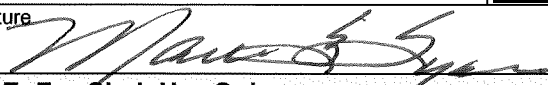
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Last Name Lyden	First Name Mark	M.I. E.
Title President/CEO	Email [REDACTED]	Phone [REDACTED]
Signature 		Date 9/21/26

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date 4/21/26

Agent Type (check one)	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

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2. Business Trade Name or DBA True North # <u>814</u>	
3. Entity Type (check one) <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
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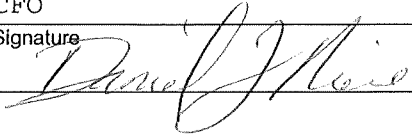
Part B: Agent Information			
1. Last Name Knox	2. First Name Michelle	3. M.I. A.	
4. Email [REDACTED]		5. Phone [REDACTED]	
6. Home Address W1224 Harvestore Rd.			
7. City Brillion	8. State WI	9. Zip Code 54110	10. Date of Birth [REDACTED]
11. Driver's License/State ID Number [REDACTED]		12. Driver's License/State ID State of Issuance WI	

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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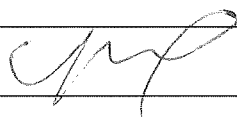
Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Niese		First Name Daniel		M.I. J.
Title CFO	Email [REDACTED]		Phone [REDACTED]	
Signature 			Date 4/21/26	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Knox		First Name Michelle		M.I. A.
Signature 			Date 4/21/26	

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only
Municipality City of De Pere
License Period 07/01/2026-06/30/2027

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)	Fees								
<input checked="" type="checkbox"/> Class "A" Beer \$ _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">License Fee(s)</td> <td style="width: 30%;">\$ 549</td> </tr> <tr> <td>Background Check Fee</td> <td>\$</td> </tr> <tr> <td>Publication Fee</td> <td>\$ 30</td> </tr> <tr> <td>Total Fees</td> <td>\$ 579</td> </tr> </table>	License Fee(s)	\$ 549	Background Check Fee	\$	Publication Fee	\$ 30	Total Fees	\$ 579
License Fee(s)		\$ 549							
Background Check Fee		\$							
Publication Fee		\$ 30							
Total Fees		\$ 579							
<input type="checkbox"/> Class "B" Beer \$ _____									
<input checked="" type="checkbox"/> "Class A" Liquor \$ _____									
<input type="checkbox"/> Regular "Class B" Liquor \$ _____									
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____									
<input type="checkbox"/> Reserve "Class B" Liquor \$ _____									
<input type="checkbox"/> "Class C" Liquor (wine only) \$ _____									
<input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____									

Part A: Premises/Business Information

1. Legal Business Name (Individual name if sole proprietorship)
WI Foodliner, Inc.

2. Business Trade Name or DBA
Festival Foods

3. FEIN
39-1086421

4. Wisconsin Seller's Permit Number
456-0000127664-03

5. Entity Type (check one)
 Sole Proprietor Partnership Limited Liability Company Corporation Nonprofit Organization

6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? Yes No
If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.

7. State of Organization
WI

8. Date of Organization
12/07/1966

9. Wisconsin DFI Registration Number
1S13044

10. Premises Address
1001 Main Avenue

11. City
De Pere

12. State
WI

13. Zip Code
54115

14. County
Brown

15. Governing Municipality: City Town Village
of De Pere

16. Aldermanic District

17. Premises Phone

18. Premises Email

19. Website

20. Premises Description
Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.
Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same.

21. Mailing Address (if different from premises address)
3800 Emerald Drive East

22. City
Onalaska

23. State
WI

24. Zip Code
54650

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. Yes No
If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.

I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.

(For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.


I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:

- sole proprietor
- one general partner of a partnership
- one corporate officer
- one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Bauman	First Name Brian	M.I. W
Title VP and Secretary	Email [REDACTED]	Phone [REDACTED]
Signature 		Date 4-14-20

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (If applicable)	

Alcohol Beverage Appointment of Agent

Date
04/13/2026

Agent Type <i>(check one)</i>	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor) WI Foodliner, Inc.	
2. Business Trade Name or DBA Festival Foods	
3. Entity Type <i>(check one)</i> <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization <i>(check one)</i> <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above. N/A	


Part B: Agent Information			
1. Last Name Chizek	2. First Name William	3. M.I. J	
4. Email [REDACTED]		5. Phone [REDACTED]	
6. Home Address W5491 Stingle Road			
7. City Black Creek	8. State WI	9. Zip Code 54106	10. Date of Birth [REDACTED]
11. Driver's License/State ID Number [REDACTED]		12. Driver's License/State ID State of Issuance WI	

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
See Instructions for exceptions.	

Continued →


Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Bauman		First Name Brian	M.I. W
Title VP and Secretary	Email [REDACTED]		Phone [REDACTED]
Signature 		Date 4/14/26	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Chizek		First Name William	M.I. J
Signature 		Date 4/13/26	

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	
License Period	

License(s) Requested: (up to two boxes may be checked).

- Class "A" Beer \$ _____
 Class "B" Beer \$ _____
 "Class A" Liquor \$ _____
 "Class B" Liquor \$ _____
 "Class A" Liquor (cider only) \$ _____
 Reserve "Class B" Liquor \$ _____
 "Class C" Liquor (wine only) \$ _____

Fees	
License Fees	\$
Background Check Fee	\$
Publication Fee	\$ 30
Total Fees	\$ 30

Part A: Premises/Business Information			
1. Legal Business Name (individual name if sole proprietorship) WISCONSIN CVS PHARMACY, L.L.C.			
2. Business Trade Name or DBA CVS/pharmacy # 2214			
3. FEIN 20-4281269		4. Wisconsin Seller's Permit Number 456102003938304	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization			
6. State of Organization WI		7. Date of Organization 02/07/2006	8. Wisconsin DFI Registration Number W 049598
9. Premises Address 800 Main Avenue			
10. City DePere		11. State WI	12. Zip Code 54115
13. County Wood	14. Governing Municipality: <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: _____		15. Aldermanic District
16. Premises Phone [REDACTED]	17. Premises Email [REDACTED]		18. Website N/A
19. Premises Description - Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. sales floor and storage room			
20. Mailing Address (if different from premises address) One CVS Drive MC 1160			
21. City Woonsocket		22. State RI	23. Zip Code 02895
Part B: Questions			
1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list the details of violation below. Attach additional sheets if necessary.			
Law/Ordinance Violated	Location		Trial Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location		Trial Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol . . . Yes No beverages.
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or distributor? . . . Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Is the applicant business owned by another business entity? Yes No
 If yes, provide the name(s) and FEIN(s) of the business entity owners below. Attach additional sheets as needed.

4a. Name of Business Entity CVS Pharmacy, Inc.	4b. Business Entity FEIN 05-0340626
---	--

5. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

6. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

7. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

List the name, title, and phone number for each person or entity holding the following positions in the applicant business or businesses listed in Part B, Question 4: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all members, managers, and agent of a limited liability company. Attach additional sheets if necessary.


Include Form AB-100 for each person listed below. Corporations and LLCs must appoint an agent by including Form AB-101.

Last Name	First Name	Title	Phone
See attached list			

Part D: Attestation

One of the following must sign and attest to this application:
 • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Smith	First Name Joshua	M.I. J.
Title Assistant Secretary	Email [REDACTED]	Phone [REDACTED]
Signature 		Date 2-18-20

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Form
AB-101

Alcohol Beverage Appointment of Agent

Date 3/2/26

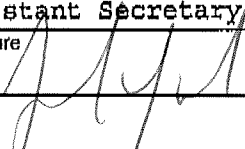
Agent Type (check one):	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

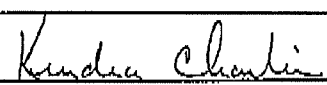
Part A: Business Information	
1. Legal Business Name (Individual name if sole proprietor) WISCONSIN CVS PHARMACY, L.L.C.	
2. Business Trade Name or DBA CVS pharmacy # 2214	
3. Entity Type (check one) <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above.	

Part B: Agent Information			
1. Last Name Charlier	2. First Name Kendra	3. M.I. L	
4. Email	5. Phone		
6. Home Address 4282 Packerland Dr			
7. City De Pere	8. State WI	9. Zip Code 54115	10. Age 48
11. Drivers License/State ID Number	12. Drivers License/State ID State of Issuance Wisconsin		

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, Alcohol Beverage Individual Questionnaire? Submit a completed Form AB-100 with this form.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

Part D: Business Attestation		
<p>READ CAREFULLY BEFORE SIGNING: I, the Undersigned, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.</p>		
Last Name Smith	First Name Joshua	M.I. J
Title Assistant Secretary	Email [REDACTED]	Phone [REDACTED]
Signature 		Date 3-11-26

Part E: Agent Attestation		
<p>READ CAREFULLY BEFORE SIGNING: I, the Agent, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.</p>		
Last Name Charlier	First Name Kendra	M.I. L
Signature 		Date 3/2/26



City of De Pere, Wisconsin

8.A.ii

Request for Common Council Action

Meeting Date: May 19, 2026
Department: City Clerk
From: Carey Danen, City Clerk
Subject: Class "B" Fermented Malt Beverage License.
Recommendation: Motion to approve.

1. Radue Cinemas Inc (DBA De Pere Cinema), 417 George St. Agent: Vicki Radue, Green Bay WI.

Attachments:
De Pere Cinema

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	City of De Pere
License Period	2026-27

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)

Class "A" Beer \$ _____ Class "B" Beer \$ _____
 "Class A" Liquor \$ _____ Regular "Class B" Liquor \$ _____
 "Class A" Liquor (cider only) \$ _____ Reserve "Class B" Liquor \$ _____
 "Class C" Liquor (wine only) \$ _____ Above-Quota "Class B" Liquor \$ _____

Fees	
License Fee(s)	\$
Background Check Fee	\$
Publication Fee	\$30.00
Total Fees	\$30

A#208389

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship) Radue Cinemas Inc		
2. Business Trade Name or DBA De Pere Cinema		
3. FEIN 81-0893692	4. Wisconsin Seller's Permit Number 456-1028920695-02	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization		
6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.		
7. State of Organization WI	8. Date of Organization 02/2000	9. Wisconsin DFI Registration Number R064315
10. Premises Address 417 George St		
11. City De Pere	12. State WI	13. Zip Code 54115
14. County Brown	15. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: De Pere	16. Aldermanic District
17. Premises Phone [REDACTED]	18. Premises Email [REDACTED]	19. Website [REDACTED]
20. Premises Description Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same. <input checked="" type="checkbox"/>		
21. Mailing Address (if different from premises address) 905 George St #191		
22. City De Pere	23. State WI	24. Zip Code 54115

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. Yes No

If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.

I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.

(For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.

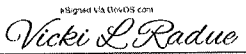
I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:

- sole proprietor
- one general partner of a partnership
- one corporate officer
- one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Radue	First Name Vicki	M.I. L
Title Secretary/Treasurer	Email [REDACTED]	Phone [REDACTED]
Signature 	Date 04-09-2026	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date

Agent Type (check one)	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only) If box is checked, we will invoice separately.

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor) Radue Cinemas Inc	
2. Business Trade Name or DBA De Pere Cinema	
3. Entity Type (check one) <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number WI
6. Describe the reason for appointing a successor agent, if successor is checked above.	

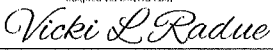
Part B: Agent Information			
1. Last Name Radue	2. First Name Vicki	3. M.I. L	
4. Email [REDACTED]		5. Phone [REDACTED]	
6. Home Address 2364 Bluestone Pl			
7. City GREEN BAY	8. State WI	9. Zip Code 54311	10. Age 64
11. Drivers License/State ID Number [REDACTED]		12. Drivers License/State ID State of Issuance WI	

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the Undersigned, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Radue		First Name Vicki	M.I. L
Title Owner/Secretary Treasurer	Email [REDACTED]	Phone [REDACTED]	
Signature 	Date 04/09/2026		

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the Agent, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Radue		First Name Vicki	M.I. L
Signature VLR	Date		



Request for Common Council Action

Meeting Date: May 19, 2026
Department: City Clerk
From: Carey Danen, City Clerk
Subject: Class "B" Fermented Malt Beverage/"Class B" Intoxicating Liquor Licenses.
Recommendation: Motion to approve.

1. Bryan Vander Bloomen (DBA Replay), 1731 Fort Howard Av. Agent: Bryan Vander Bloomen, De Pere WI.
2. De Pere Hotel Group LLC (DBA Cobblestone Hotel & Suites/Wissota Chophouse), 499 Main Av. Agent: Stephanie Brooks, Oshkosh WI.
3. Gallaghers Pizza LLC (DBA Gallaghers Pizza), 330 Reid St. Agent: Vanessa Miller, Green Bay WI.
4. HC Gemini, Inc. (DBA The Abbey), 303 Reid St. Agent: Kerry Counard, De Pere WI.
5. Hoffman Investments (DBA Old No. 7), 121 N 10th St. Agent: Raymond Hoffman, De Pere WI.
6. Nightlife, Inc. (DBA The Woodpecker), 302 Main Av. Agent: Tye Hartwell, De Pere WI.
7. Orsa Hospitality LLC (DBA Orsetta Craft Kitchen & Bar), 109 N Broadway. Agent: Kelly Qualley, De Pere WI.
8. Pasquales Café, Inc. (DBA Pasquales International Café), 305 Main Av. Agent: Tye Hartwell, De Pere WI.
9. Smeckett Adventures LLC (DBA Cycling Brews Taproom), 1109 Honey Ct Ste B. Agent: Joshua Smits, Wrightstown WI.

Attachments:

Replay Sports Bar & Grill, Cobblestone Hotel & Suites, Wissota Chophouse, Gallaghers Pizza, The Abbey, Old #7, The Woodpecker, Orsetta Craft Kitchen & Bar, Pasquales

International Cafe, Cycling Brews Taproom

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	City of De Pere
License Period	2026-27

Application Type (check one)	
<input type="checkbox"/> Initial (New)	<input checked="" type="checkbox"/> Renewal
License(s) Requested: (up to two boxes may be checked)	
<input type="checkbox"/> Class "A" Beer	<input checked="" type="checkbox"/> Class "B" Beer
<input type="checkbox"/> "Class A" Liquor	<input checked="" type="checkbox"/> Regular "Class B" Liquor
<input type="checkbox"/> "Class A" Liquor (cider only)	<input type="checkbox"/> Reserve "Class B" Liquor
<input type="checkbox"/> "Class C" Liquor (wine only)	<input type="checkbox"/> Above-Quota "Class B" Liquor

Fees	
License Fee(s)	\$
Background Check Fee	\$
Publication Fee	\$30.00
Total Fees	\$30

Att# 208354

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)
Bryan Vander Bloomen

2. Business Trade Name or DBA
Replay Sports Bar & Grill

3. FEIN
46-4196883

4. Wisconsin Seller's Permit Number
456-1024036650-03

5. Entity Type (check one)
 Sole Proprietor Partnership Limited Liability Company Corporation Nonprofit Organization

6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? Yes No
If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.

7. State of Organization
Wisconsin

8. Date of Organization
12/1/2013

9. Wisconsin DFI Registration Number

10. Premises Address
1731 Fort Howard Ave.

11. City
De Pere

12. State
WI

13. Zip Code
54115

14. County
Brown

15. Governing Municipality: City Town Village
of: De Pere

16. Aldermanic District

17. Premises Phone
[REDACTED]

18. Premises Email
[REDACTED]

19. Website
NA

20. Premises Description
Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.
Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same.

21. Mailing Address (if different from premises address)

22. City

23. State

24. Zip Code

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. Yes No
If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

- I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.
- I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.
- (For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.
- I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:
 • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Vander Bloomen	First Name Bryan	M.I.
Title Owner	Email [REDACTED]	Phone [REDACTED]
Signature <i>Bryan Vander Bloomen</i>	Date 04-08-2026	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Agent Type *(check one)*

Original (no fee) Successor (\$10 fee for municipal licensees only) If box is checked, we will invoice separately.

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor) Bryan Vander Bloomen	
2. Business Trade Name or DBA REPLAY SPORTS BAR AND GRILL	
3. Entity Type <i>(check one)</i> <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization <i>(check one)</i> <input type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number WI
6. Describe the reason for appointing a successor agent, if successor is checked above. sole proprietor	

Part B: Agent Information

1. Last Name Vander Bloomen		2. First Name Bryan		3. M.I.
4. Email [REDACTED]			5. Phone [REDACTED]	
6. Home Address 1326 Sand Acres Dr				
7. City De Pere		8. State WI	9. Zip Code 54115	10. Age 41
11. Drivers License/State ID Number [REDACTED]			12. Drivers License/State ID State of Issuance WI	

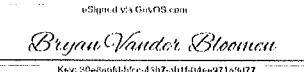
Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Vander Bloomen		First Name Bryan		M.I. M
Title owner	Email [REDACTED]		Phone [REDACTED]	
Signature	 <small>eSigned via Go4FS.com Key: 20e6a0d0-5cc-43b7-ab1f-04ee971a5b77</small>		Date 4/8/26	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Vander Bloomen		First Name Bryan		M.I. M
Signature	BVB		Date	

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	City of De Pere
License Period	2026-27

Application Type (check one)									
<input type="checkbox"/> Initial (New)	<input checked="" type="checkbox"/> Renewal								
License(s) Requested: (up to two boxes may be checked)	Fees								
<input type="checkbox"/> Class "A" Beer \$ _____	<input checked="" type="checkbox"/> Class "B" Beer \$ <u>90</u>								
<input type="checkbox"/> "Class A" Liquor \$ _____	<input checked="" type="checkbox"/> Regular "Class B" Liquor \$ <u>90</u>								
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____	<input type="checkbox"/> Reserve "Class B" Liquor \$ _____								
<input type="checkbox"/> "Class C" Liquor (wine only) \$ _____	<input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">License Fee(s)</td> <td style="width: 50%;">\$ <u>630⁰⁰</u></td> </tr> <tr> <td>Background Check Fee</td> <td>\$ <u>0⁰⁰</u></td> </tr> <tr> <td>Publication Fee</td> <td>\$30.00</td> </tr> <tr> <td>Total Fees</td> <td>\$ <u>30630⁰⁰</u></td> </tr> </table>		License Fee(s)	\$ <u>630⁰⁰</u>	Background Check Fee	\$ <u>0⁰⁰</u>	Publication Fee	\$30.00	Total Fees	\$ <u>30630⁰⁰</u>
License Fee(s)	\$ <u>630⁰⁰</u>								
Background Check Fee	\$ <u>0⁰⁰</u>								
Publication Fee	\$30.00								
Total Fees	\$ <u>30630⁰⁰</u>								

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship) <u>De Pere Hotel Group, LLC</u>		
2. Business Trade Name or DBA <u>Copperstone Hotel + Suites + Wisconsin Chophouse</u>		
3. FEIN <u>W1-19899520</u>	4. Wisconsin Seller's Permit Number <u>490-1030928267-05</u>	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization		
6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <small>If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.</small>		
7. State of Organization <u>WI</u>	8. Date of Organization <u>1/18/2021</u>	9. Wisconsin DFI Registration Number <u>D088498</u>
10. Premises Address <u>499 Main Ave</u>		
11. City <u>De Pere</u>	12. State <u>WI</u>	13. Zip Code <u>54115</u>
14. County <u>Brown</u>	15. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: <u>De Pere</u>	
17. Premises Phone [REDACTED]	18. Premises Email [REDACTED]	19. Website [REDACTED]
20. [REDACTED]		

Initial (New Applicants Only): Describe the building, including living quarters, authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same.

21. Mailing Address (if different from premises address) <u>980 Amerland Dr</u>		
22. City <u>Neenah</u>	23. State <u>WI</u>	24. Zip Code <u>54956</u>

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. Yes No
If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.

I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.


(For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.

I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:
 • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Wogemase	First Name Kim	M.I. E
Title Member	Email 	
Signature Kim E. Wogemase	Date 4/20/24	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date
4/11/24

Agent Type (check one)

Original (no fee) Successor (\$10 fee for municipal licensees only) If box is checked, we will invoice separately.

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)

DePore Hotel Group LLC

2. Business Trade Name or DBA

Coronavirus Hotel & Suites & Wisconsin Chophouse

3. Entity Type (check one)

Limited Liability Company Corporation Nonprofit Organization

4. Alcohol Beverage Business Authorization (check one)

Municipal Retail License State Permit

5. If successor agent, provide State Permit or Municipal Retail License Number

NA

6. Describe the reason for appointing a successor agent, if successor is checked above.

NA

Part B: Agent Information

1. Last Name

Bruce

2. First Name

Stephanie

3. M.I.

L

4. E [Redacted] 5. Phone [Redacted]

6. Home Address

1738 Crown Dr

7. City

Cashush

8. State

WI

9. Zip Code

54904

10. Age

43

11. Driver License/State ID Number

[Redacted]

12. Drivers License/State ID State of Issuance

WI

Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement? Yes No
Submit proof of completion.

2. Have you completed Form AB-100, Alcohol Beverage Individual Questionnaire (licensee) or Form AB-300, Alcohol Beverage Personal Questionnaire (permittee)? Yes No

3. Have you been a Wisconsin resident for at least 90 continuous days? Yes No
See instructions for exceptions.

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Wagemese	First Name Kim	M.I. E
Title Managing member	Email [REDACTED]	Phone [REDACTED]
Signature Kim C. Wagemese	Date 4/20/20	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Bredas	First Name Stephanie	M.I. L
Signature Stephanie Bredas	Date 4/17/20	

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality City of De Pere	
License Period	2026-27

Application Type (check one)	
<input type="checkbox"/> Initial (New)	<input checked="" type="checkbox"/> Renewal
License(s) Requested: (up to two boxes may be checked)	Fees
Class "A" Beer \$ _____	<input checked="" type="checkbox"/> Class "B" Beer \$ _____
<input type="checkbox"/> "Class A" Liquor \$ _____	<input checked="" type="checkbox"/> Regular "Class B" Liquor \$ _____
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____	<input type="checkbox"/> Reserve "Class B" Liquor \$ _____
<input type="checkbox"/> "Class C" Liquor (wine only) \$ _____	<input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____
	License Fee(s) \$ _____
	Background Check Fee \$ _____
	Publication Fee \$30.00
	Total Fees \$30

Part A: Premises/Business Information			
1. Legal Business Name (Individual name if sole proprietorship) Gallaghers Pizza LLC			
2. Business Trade Name or DBA Gallaghers Pizza			
3. FEIN 871612060		4. Wisconsin Seller's Permit Number 456-103078437204	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization			
6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.			
7. State of Organization WI		8. Date of Organization 10-8-21	9. Wisconsin DFI Registration Number G064424
10. Premises Address 330 Reid St			
11. City DE PERE		12. State WI	13. Zip Code 54313
14. County Brown	15. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: De Pere		16. Aldermanic District
17. Premises Phone [REDACTED]	18. Premises Email [REDACTED]	19. Website [REDACTED]	
20. Premises Description Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same. <input checked="" type="checkbox"/>			
21. Mailing Address (if different from premises address)			
22. City		23. State	24. Zip Code

Part B: Questions			
1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list the details of violation below. Attach additional sheets if necessary.			
Law/Ordinance Violated	Location	Trial Date	
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date	
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.

I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.

(For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.

I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:
 • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name miller		First Name chad		M.I. nmi
Title owner		Email [REDACTED]	Phone [REDACTED]	
Signature <i>chad miller</i>			Date 04-23-2026	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Agent Type (check one)

- Original (no fee) Successor (\$10 fee for municipal licensees only) If box is checked, we will invoice separately.

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor) Gallaghers Pizza LLC	
2. Business Trade Name or DBA Gallaghers Pizza	
3. Entity Type (check one) <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number WI
6. Describe the reason for appointing a successor agent, if successor is checked above.	

Part B: Agent Information

1. Last Name Miller		2. First Name Vanessa		3. M.I. L
4. Email [REDACTED]			5. Phone [REDACTED]	
6. Home Address 1820 noblemen ct				
7. City green bay		8. State WI	9. Zip Code 54313	10. Age 39
11. Drivers License/State ID Number [REDACTED]			12. Drivers License/State ID State of Issuance WI	

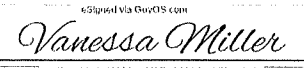
Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Miller		First Name Vanessa	M.I. L
Title owner	Email [REDACTED]		Phone [REDACTED]
Signature	 <small>Key: 32e8c6d-6cc-4367-eb2f-9fe971e0377</small>		Date 4-23-86

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name miller		First Name vanessa	M.I. L
Signature	VM		Date

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality City of De Pere	
License Period	2026-27

Application Type (check one)

Initial (New) Renewal

<p>License(s) Requested: (up to two boxes may be checked)</p> <p>Class "A" Beer \$ _____ <input checked="" type="checkbox"/> Class "B" Beer \$ _____</p> <p><input type="checkbox"/> "Class A" Liquor \$ _____ <input checked="" type="checkbox"/> Regular "Class B" Liquor \$ _____</p> <p><input type="checkbox"/> "Class A" Liquor (cider only) \$ _____ <input type="checkbox"/> Reserve "Class B" Liquor \$ _____</p> <p><input type="checkbox"/> "Class C" Liquor (wine only) \$ _____ <input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center; font-size: small;">Fees</th> </tr> <tr> <td style="font-size: x-small;">License Fee(s)</td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="font-size: x-small;">Background Check Fee</td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="font-size: x-small;">Publication Fee</td> <td style="text-align: right;">\$30.00</td> </tr> <tr> <td style="font-size: x-small;">Total Fees</td> <td style="text-align: right;">\$30</td> </tr> </table>	Fees		License Fee(s)	\$	Background Check Fee	\$	Publication Fee	\$30.00	Total Fees	\$30
Fees											
License Fee(s)	\$										
Background Check Fee	\$										
Publication Fee	\$30.00										
Total Fees	\$30										

R# 208446

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship) HC Gemini, Inc.		
2. Business Trade Name or DBA The Abbey		
3. FEIN 39-1208119	4. Wisconsin Seller's Permit Number 600-0000016586-05	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization		
6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.		
7. State of Organization Wisconsin	8. Date of Organization 7/1974	9. Wisconsin DFI Registration Number
10. Premises Address 303 Reid Street		
11. City De Pere	12. State WI	13. Zip Code 54115
14. County Brown	15. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: De Pere	
16. Aldermanic District	17. Premises Phone [REDACTED]	18. Premises Email [REDACTED]
19. Website [REDACTED]		
20. Premises Description Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same. <input checked="" type="checkbox"/>		
21. Mailing Address (if different from premises address)		
22. City	23. State	24. Zip Code

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list the details of violation below. Attach additional sheets if necessary.		
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.

I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.

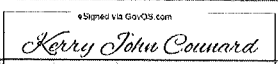
(For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.

I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:
 • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Counard		First Name Kerry		M.I. J
Title Owner	Email [REDACTED]		Phone [REDACTED]	
Signature 			Date 04-12-2026	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date

Agent Type (check one)	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor) HC Gemini, Inc.	
2. Business Trade Name or DBA The Abbey Bar	
3. Entity Type (check one) <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above.	

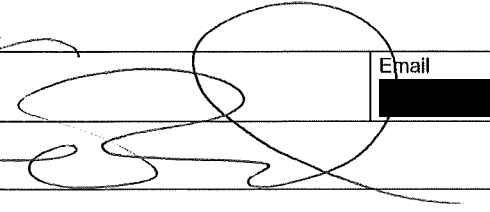
Part B: Agent Information			
1. Last Name Counard	2. First Name Kerry	3. M.I. J	
4. Email [REDACTED]		5. Phone [REDACTED]	
6. Home Address 332 Grandeur Oaks Ct.			
7. City De Pere	8. State WI	9. Zip Code 54115	10. Date of Birth [REDACTED]
11. Drivers License/State ID Number [REDACTED]		12. Drivers License/State ID State of Issuance WI	

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Submit proof of completion.
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No See instructions for exceptions.

Continued →

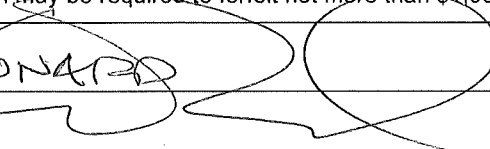
Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Counard		First Name Kerry	M.I. J
Title Owner	Email [REDACTED]		Phone [REDACTED]
Signature 		Date 04/12/26	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name COUNARD		First Name KERRY	M.I. J
Signature 		Date 4.13.26	

Alcohol Beverage License Application

For Municipal Use Only
Municipality
License Period

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)	Fees
<input type="checkbox"/> Class "A" Beer \$ _____	License Fee(s) \$
<input checked="" type="checkbox"/> Class "B" Beer \$ _____	Background Check Fee \$
<input type="checkbox"/> "Class A" Liquor \$ _____	Publication Fee \$ <u>30.00 B# 20869</u>
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____	Total Fees \$
<input type="checkbox"/> "Class C" Liquor (wine only) \$ _____	
<input type="checkbox"/> Reserve "Class B" Liquor \$ _____	
<input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____	

Part A: Premises/Business Information

1. Legal Business Name (Individual name if sole proprietorship)
Hoffman Investments

2. Business Trade Name or DBA
Old # 7

3. FEIN 391384255 4. Wisconsin Seller's Permit Number 4SL-0000509612-03

5. Entity Type (check one)
 Sole Proprietor Partnership Limited Liability Company Corporation Nonprofit Organization

6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? Yes No
If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.

7. State of Organization WI 8. Date of Organization 12/13/1989 9. Wisconsin DFI Registration Number # 1410894

10. Premises Address
121 N 10th St

11. City De Pere 12. State WI 13. Zip Code 54115

14. County Brown 15. Governing Municipality: City Town Village
of: De Pere 16. Aldermanic District

17. Premises Phone [REDACTED] 18. Premises Email 19. Website

20. Premises Description
Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.
Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same.
Bar Room 30x40, 26x30, Patio 10x10, Easement 40x84, 32x40

21. Mailing Address (if different from premises address)

22. City 23. State 24. Zip Code

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. Yes No
If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No

If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No

If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.

I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.

(For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.

I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:

- sole proprietor
- one general partner of a partnership
- one corporate officer
- one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name <i>Hoffman</i>	First Name <i>Raymond</i>	M.I. <i>J</i>
Title <i>Owner</i>	Email	Phone
Signature <i>Ray H Hoffman</i>		Date

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Agent Type (check one)	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

Part A: Business Information	
1. Legal Business Name (Individual name if sole proprietor) <i>Hoffman Investment</i>	
2. Business Trade Name or DBA <i>Old # 7</i>	
3. Entity Type (check one) <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number <i>456-008509612-03</i>
6. Describe the reason for appointing a successor agent, if successor is checked above.	


Part B: Agent Information			
1. Last Name <i>Hoffman</i>	2. First Name <i>Raymond</i>	3. M.I. <i>J</i>	
4. Email		5. Phone	
6. Home Address <i>1140 Aldrin St</i>			
7. City <i>De Pere</i>	8. State <i>WI</i>	9. Zip Code <i>54115</i>	10. Date of Birth
11. Driver's License/State ID Number		12. Driver's License/State ID State of Issuance <i>WI</i>	

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name <i>Hoffman</i>		First Name <i>Raymond</i>		M.I. <i>J</i>
Title <i>Owner</i>	Email		Phone 	
Signature <i>Raymond Hoffman</i>			Date <i>4/23/2020</i>	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name		First Name		M.I.
Signature			Date	

Alcohol Beverage License Application

For Municipal Use Only
Municipality
License Period

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)	Fees
<input type="checkbox"/> Class "A" Beer \$ _____	License Fee(s) \$ _____
<input checked="" type="checkbox"/> Class "B" Beer \$ _____	Background Check Fee \$ _____
<input type="checkbox"/> "Class A" Liquor \$ _____	Publication Fee \$ <u>30</u> <i># 208420</i>
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____	Total Fees \$ _____
<input type="checkbox"/> "Class A" Liquor (wine only) \$ _____	
<input type="checkbox"/> Reserve "Class B" Liquor \$ _____	
<input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____	

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)
Nightlife Inc

2. Business Trade Name or DBA
Prospectus International Sales The Woodpecker

3. FEIN *93-3988613* 4. Wisconsin Seller's Permit Number *456-1031516894-04*

5. Entity Type (check one)
 Sole Proprietor Partnership Limited Liability Company Corporation Nonprofit Organization

6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? Yes No
If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.

7. State of Organization *WI* 8. Date of Organization *9-13-23* 9. Wisconsin DFI Registration Number *N060336*

10. Premises Address
302 Main Ave

11. City *Dixie* 12. State *WI* 13. Zip Code *54115*

14. County *Brown* 15. Governing Municipality: City Town Village 16. Aldermanic District

17. Premises Phone [Redacted] 19. Website _____

20. Premises Description
Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.
Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same.
Bar, & Basement

21. Mailing Address (if different from premises address)

22. City _____ 23. State _____ 24. Zip Code _____

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. Yes No
If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.
3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.
4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No
5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No
6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

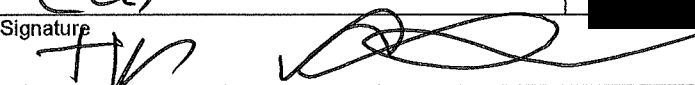
- I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.
- I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.
- (For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.
- I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:

- sole proprietor
- one general partner of a partnership
- one corporate officer
- one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Hartwell	First Name TYL	M.I. D
Title Ceo	E [REDACTED]	Phone [REDACTED]
Signature 		Date 4-10-20

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Agent Type (check one)	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor) Nightlike inc	
2. Business Trade Name or DBA The Woodpecker	
3. Entity Type (check one) <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above.	

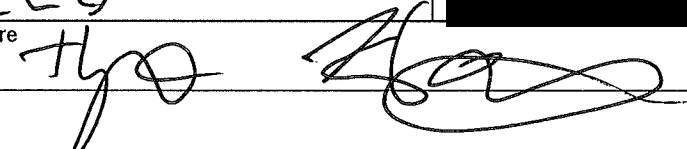
Part B: Agent Information			
1. Last Name Hurrell	2. First Name Tyc	3. M.I. D	
4. Email	[Redacted]		[Redacted]
6. Home Address 2099 River Point Ct			
7. City De Pere	8. State WI	9. Zip Code 54115	10. Date of Birth [Redacted]
11. Driver's License/State ID Number [Redacted]	12. Driver's License/State ID State of Issuance WI		

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, Alcohol Beverage Individual Questionnaire (licensee) or Form AB-300, Alcohol Beverage Personal Questionnaire (permittee)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

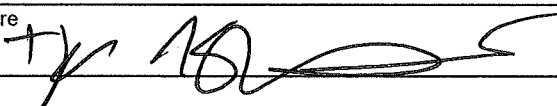
Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name	Herrwell	First Name	TJC	M.I.	D
Title	CEO				
Signature				Date	4-10-26

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name	Herrwell	First Name	TJC	M.I.	D
Signature				Date	4-10-26

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality City of De Pere	
License Period	2026-27

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)	Fees
Class "A" Beer \$ _____ <input checked="" type="checkbox"/> Class "B" Beer \$ _____	License Fee(s) \$ _____
<input type="checkbox"/> "Class A" Liquor \$ _____ <input checked="" type="checkbox"/> Regular "Class B" Liquor \$ _____	Background Check Fee \$ _____
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____ <input type="checkbox"/> Reserve "Class B" Liquor \$ _____	Publication Fee \$30.00
<input type="checkbox"/> "Class C" Liquor (wine only) \$ _____ <input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____	Total Fees \$30

Part A: Premises/Business Information

1. Legal Business Name (Individual name if sole proprietorship) Orsa Hospitality LLC			
2. Business Trade Name or DBA Orsetta Craft Kitchen & Bar			
3. FEIN 93-3973523		4. Wisconsin Seller's Permit Number 456-1031546342-02	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization			
6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.			
7. State of Organization Wisconsin		8. Date of Organization	9. Wisconsin DFI Registration Number
10. Premises Address 109 N Broadway			
11. City De Pere		12. State WI	13. Zip Code 54115
14. County Brown	15. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: De Pere		16. Aldermanic District
17. Premises Phone [REDACTED]	18. Premises Email [REDACTED]	19. Website [REDACTED]	
20. Premises Description Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same. <input checked="" type="checkbox"/>			
21. Mailing Address (if different from premises address)			
22. City		23. State	24. Zip Code

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. Yes No
If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

- I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.
- I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.
- (For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.
- I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:
 • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Qualley		First Name Kelly		M.I.
Title Owner	Email [REDACTED]	Phone [REDACTED]		
Signature <i>Kelly Qualley</i>		Date		

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date

Agent Type (check one)

- Original (no fee) Successor (\$10 fee for municipal licensees only)

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)	
Orsa Hospitality LLC	
2. Business Trade Name or DBA	
Orsetta Craft Kitchen + Bar	
3. Entity Type (check one)	
<input type="checkbox"/> Limited Liability Company	<input checked="" type="checkbox"/> Corporation
<input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one)	5. If successor agent, provide State Permit or Municipal Retail License Number
<input type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	456-1031 546342-02
6. Describe the reason for appointing a successor agent, if successor is checked above.	

Part B: Agent Information

1. Last Name		2. First Name		3. M.I.
Qualley		Kelly		P
4. Email			5. Phone	
6. Home Address				
1329 S. 10th Summer Range Rd				
7. City	8. State	9. Zip Code	10. Date of Birth	
De Pere	WI	54115		
11. Driver's License/State ID Number			12. Driver's License/State ID State of Issuance	
			wisconsin	

Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Submit proof of completion.	
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
See instructions for exceptions.	

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name <i>Qualley</i>	First Name <i>Kelly</i>	M.I. <i>P</i>
Title <i>owner</i>	Email [REDACTED]	Phone [REDACTED]
Signature <i>Kelly Qualley</i>		

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name <i>Qualley</i>	First Name <i>Kelly</i>	M.I. <i>P</i>
Signature <i>Kelly Qualley</i>	Date	

Alcohol Beverage License Application

For Municipal Use Only
Municipality
License Period

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)	Fees
<input type="checkbox"/> Class "A" Beer \$ _____	License Fee(s) \$ _____
<input checked="" type="checkbox"/> Class "B" Beer \$ _____	Background Check Fee \$ _____
<input type="checkbox"/> "Class A" Liquor \$ _____	Publication Fee \$ <u>30 h# 20849</u>
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____	Total Fees \$ _____
<input type="checkbox"/> "Class A" Liquor (wine only) \$ _____	
<input type="checkbox"/> Reserve "Class B" Liquor \$ _____	
<input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____	

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)
Pasquales Cafe inc

2. Business Trade Name or DBA
Pasquales International Cafe

3. FEIN 99-1933824 4. Wisconsin Seller's Permit Number 456-1031806579-04

5. Entity Type (check one)
 Sole Proprietor Partnership Limited Liability Company Corporation Nonprofit Organization

6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? Yes No
If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.

7. State of Organization WI 8. Date of Organization 3-14-24 9. Wisconsin DFI Registration Number P091110

10. Premises Address 305 main Ave

11. City Dipire 12. State WI 13. Zip Code 54115

14. County BRAUN 15. Governing Municipality: City Town Village 16. Aldermanic District _____
of: _____

17. Premises Phone [REDACTED] 18. [REDACTED] 19. Website _____

20. **Initial (New Applicants Only):** Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.
Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same.
Bar, Basement & Patio

21. Mailing Address (if different from premises address)

22. City _____ 23. State _____ 24. Zip Code _____

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. Yes No
If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No

If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No
5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No
6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.


- I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.
- I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.
- (For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.
- I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:

- sole proprietor
- one general partner of a partnership
- one corporate officer
- one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Herrick	First Name TJC	M.I. O
Title CEO	Email [REDACTED]	Phone [REDACTED]
Signature 		Date 4-10-26

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date 4-10-26

Agent Type (check one)	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor) <u>Pasquales Cafe Inc</u>	
2. Business Trade Name or DBA <u>Pasquales international cafe</u>	
3. Entity Type (check one) <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above.	

Part B: Agent Information			
1. Last Name <u>Hartwell</u>	2. First Name <u>Tye</u>	3. M/N <u>D</u>	
4. Email [REDACTED]		5. Phone [REDACTED]	
6. Home Address <u>2099 River Point Ct</u>			
7. City <u>Dane</u>	8. State <u>WI</u>	9. Zip Code <u>54115</u>	10. Date of Birth [REDACTED]
11. Driver's License/State ID Number [REDACTED]		12. Driver's License/State ID State of Issuance <u>WI</u>	

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, Alcohol Beverage Individual Questionnaire (licensee) or Form AB-300, Alcohol Beverage Personal Questionnaire (permittee)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name	Hartwell	First Name	TYL	M.I.	0
Title	CEO	Email	[REDACTED]	Phone	[REDACTED]
Signature	[Handwritten Signature]			Date	4-10-26

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name	Hartwell	First Name	TYL	M.I.	0
Signature	[Handwritten Signature]			Date	4-10-26

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality City of De Pere	
License Period	2026-27

Application Type (check one)	
<input type="checkbox"/> Initial (New)	<input checked="" type="checkbox"/> Renewal
License(s) Requested: (up to two boxes may be checked)	
Class "A" Beer \$ _____	<input checked="" type="checkbox"/> Class "B" Beer \$ _____
<input type="checkbox"/> "Class A" Liquor \$ _____	<input checked="" type="checkbox"/> Regular "Class B" Liquor \$ _____
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____	<input type="checkbox"/> Reserve "Class B" Liquor \$ _____
<input type="checkbox"/> "Class C" Liquor (wine only) \$ _____	<input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____
Fees	
License Fee(s)	\$ _____
Background Check Fee	\$ _____
Publication Fee	\$30.00
Total Fees	\$30

PH# 209203

Part A: Premises/Business Information		
1. Legal Business Name (individual name if sole proprietorship) Smeckett Adventures LLC		
2. Business Trade Name or DBA Cycling Brews Taproom		
3. FEIN 88-1425670	4. Wisconsin Seller's Permit Number 456-1031302598-04	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization		
6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.		
7. State of Organization	8. Date of Organization	9. Wisconsin DFI Registration Number
10. Premises Address 1109 Honey Court Ste B		
11. City De Pere	12. State WI	13. Zip Code 54115
14. County Brown	15. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: De Pere	16. Aldermanic District
17. Premises Phone [REDACTED]	18. Premises Email [REDACTED]	19. Website [REDACTED]
20. Premises Description Initial (New Applicants Only): Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. Renewal Applicants Only: I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same. <input checked="" type="checkbox"/> Retail space just off S. Broadway, running adjacent to Fox River Trail. Main area with 36 taps and bar area. "Conference room" for sitting and open area with stage for additional sitting space.		
21. Mailing Address (if different from premises address)		
22. City	23. State	24. Zip Code

Part B: Questions		
1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list the details of violation below. Attach additional sheets if necessary.		
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.

I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.

(For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.

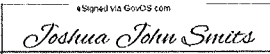
I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

Part D: Attestation

One of the following must sign and attest to this application:

- sole proprietor
- one general partner of a partnership
- one corporate officer
- one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Smits	First Name Joshua	M.I.
Title Owner	Email [REDACTED]	Phone [REDACTED]
Signature 	Date 05-06-2026	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Agent Type *(check one)*

- Original (no fee) Successor (\$10 fee for municipal licensees only) If box is checked, we will invoice separately.

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor) Smekett Adventures LLC	
2. Business Trade Name or DBA Cycling Brews Taproom	
3. Entity Type <i>(check one)</i> <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization <i>(check one)</i> <input type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above.	

Part B: Agent Information

1. Last Name Smits	2. First Name Joshua	3. M.I. J
4. Email [REDACTED]		5. Phone [REDACTED]
6. Home Address 548 Emerald Isle Ct		
7. City Wrightstown	8. State WI	9. Zip Code 54180
		10. Age 51
11. Drivers License/State ID Number [REDACTED]		12. Drivers License/State ID State of Issuance WI


Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

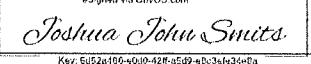
Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the Undersigned, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Smits		First Name Joshua	M.I. J
Title Owner	Email [REDACTED]	Phone [REDACTED]	
Signature 	Date 5/13/2025		

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the Agent, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Smits		First Name Joshua	M.I. J
Signature 	Date 5/13/2025		



City of De Pere, Wisconsin

8.A.iv

Request for Common Council Action

Meeting Date: May 19, 2026
Department: City Clerk
From: Carey Danen, City Clerk
Subject: Reserve Class "B" Fermented Malt Beverage/"Class B"
Intoxicating Liquor License.
Recommendation: Motion to approve.

1. Birder Studio of Performing Arts, Inc. (DBA Birder on Broadway), 123 S Broadway. Agent: Alicia Birder Bakken, De Pere WI.

Attachments:
Birder on Broadway

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	
License Period	

License(s) Requested: (up to two boxes may be checked)

- Class "A" Beer \$ _____
 Class "B" Beer \$ _____
 "Class A" Liquor \$ _____
 "Class B" Liquor \$ _____
 "Class A" Liquor (cider only) \$ _____
 Reserve "Class B" Liquor \$ _____
 "Class C" Liquor (wine only) \$ _____

Fees	
License Fees	\$ 600.00
Background Check Fee	\$
Publication Fee	\$ 300.00 # 328925
Total Fees	\$

Part A: Premises/Business Information			
1. Legal Business Name (individual name if sole proprietorship) <i>Birder Studio of Performing Arts, Inc.</i>			
2. Business Trade Name or DBA <i>Birder on Broadway</i>			
3. FEIN <i>27-1785643</i>		4. Wisconsin Seller's Permit Number <i>456-102740 3965-05</i>	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Nonprofit Organization			
6. State of Organization <i>WI</i>		7. Date of Organization	8. Wisconsin DFI Registration Number <i>B066084</i>
9. Premises Address <i>123 S. Broadway</i>			
10. City <i>De Pere</i>		11. State <i>WI</i>	12. Zip Code <i>54115</i>
13. County <i>Brown</i>	14. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: <i>De Pere</i>		15. Aldermanic District
16. Premises Phone	17. Premises Email		18. Website
19. Premises Description - Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. <i>123 S. Broadway, De Pere, WI 54115 1st Floor bar area, theatre space, utility room, bathrooms, studio, and shop. 2nd floor Greenroom spaces (no alcohol stored or consumed on 2nd floor)</i>			
20. Mailing Address (if different from premises address) <i>Also, cafe sidewalk service.</i>			
21. City		22. State	23. Zip Code

Part B: Questions			
1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list the details of violation below. Attach additional sheets if necessary.			
Law/Ordinance Violated	Location		Trial Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location		Trial Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. Yes No
 If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or distributor? Yes No
 If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Is the applicant business owned by another business entity? Yes No
 If yes, provide the name(s) and FEIN(s) of the business entity owners below. Attach additional sheets as needed.

4a. Name of Business Entity	4b. Business Entity FEIN
-----------------------------	--------------------------

5. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. Yes No

6. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? Yes No

7. Does the applicant business owe past due municipal property taxes, assessments, or other fees? Yes No

Part C: Individual Information

List the name, title, and phone number for each person or entity holding the following positions in the applicant business or businesses listed in Part B, Question 4: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all members, managers, and agent of a limited liability company. Attach additional sheets if necessary.

Include Form AB-100 for each person listed below. Corporations and LLCs must appoint an agent by including Form AB-101.

Last Name	First Name	Title	Phone

Part D: Attestation

One of the following must sign and attest to this application:
 • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name <i>Bustin</i>	First Name <i>Alvin</i>	M.I.
Title <i>Executive Director</i>	Email	Phon
Signature <i>Alvin Bustin</i>		<i>4. 8. 26</i>

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date

Agent Type (check one)

- Original (no fee) Successor (\$10 fee for municipal licensees only)

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)	
Birder Studio of Performing Arts, Inc.	
2. Business Trade Name or DBA	
Birder on Broadway	
3. Entity Type (check one)	
<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation
<input checked="" type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one)	5. If successor agent, provide State Permit or Municipal Retail License Number
<input type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	
6. Describe the reason for appointing a successor agent, if successor is checked above.	

Part B: Agent Information

1. Last Name	2. First Name	3. M.I.
Bakken	Alicia	Birder
4. Email		5. Phone
6. Home Address		
2521 W. Crais Ct		
7. City	8. State	9. Zip Code
De Pere WI	WI	54115
10. Date of Birth	11. Drivers License/State ID Number	
	WI	
	12. Drivers License/State ID State of Issuance	
	WI	

Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, Alcohol Beverage Individual Questionnaire (licensee) or Form AB-300, Alcohol Beverage Personal Questionnaire (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name <i>BAKKER</i>		First Name <i>Alicia</i>		M.I. <i>Binder</i>
Title <i>Executive Director</i>	Email		Phone	
Signature <i>Alicia Binder</i>				

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name <i>Bakker</i>		First Name <i>Alicia</i>		M.I. <i>Binder</i>
Signature <i>Alicia Bakker</i>			Date <i>4-30-26</i>	



Request for Common Council Action

Meeting Date: May 19, 2026
Department: Human Resources
From: Tracy Hood, Human Resources Generalist
Subject: Recommendation from the Finance/Personnel Committee to approve the 2026 Non-Benefit Eligible Employees Wage Scale.
Recommendation: Motion to approve.

This item was unanimously approved by the Finance/Personnel Committee at its May 12, 2026, meeting.

Attachments:
Finance-Personnel Committee Memo - 5.2026, 2026 Seasonal Part-time-Non-Benefit Eligible- Employee Wage Schedule-DRAFT 5.2026

CITY OF DE PERE MEMO



To: Finance/Personnel Committee
From: Tracy Hood, Human Resources Generalist
Date: May 12, 2026

RE: Consideration and Possible Action on 2026 Non-Benefit Eligible Employees Wage Scale*

We recommend adding a Flag Football Site Supervisor position to the Non-Benefit Eligible Employees Wage Scale. The position would provide oversight for officials (who are primarily high school students), ensure coverage when staff are absent due to illness – reducing the risk of solo officiated games – and alleviate weekend scheduling demands for full-time staff.

Because the responsibilities align closely with the existing Basketball Supervisor role, we recommend placing the position at Level 6 on the wage scale.

The anticipated additional staff cost is \$46 for the season and has been budgeted for.

Attached please find the 2026 pay recommendations for the Seasonal/Part Time (Non-Benefit Eligible) Employee Wage Scale with Flag Football Supervisor added.

Please feel free to contact me at 339-4045 if you have questions prior to the meeting.

Thank you.

2026 Seasonal/Part Time (Non-Benefit Eligible) Employee Wage Scale

Effective: May 20, 2026

Updated 05/20/2026

Position	Step 1 (Starting Wage)	Step 2	Step 3	Step 4	Employment Period
Level 1 - Event Server^^ - Assistant Instructor	\$14.00	\$15.00	\$15.50	\$16.00	Summer Year Round
Level 2 - Pool Facility Attendant - Election Inspector	\$15.00	\$16.00	\$16.50	\$17.00	Summer As needed
Level 3 - Playground Leader - Community Center Facility Attendant - Community Service Officer - Environmental Health Intern	\$16.00	\$17.00	\$17.50	\$18.00	Summer Year Round Year Round Summer
Level 4 - Camp Counselors - Kidz Zone - Community Center Maintenance - Fitness Instructor - Event Manager^^ - Lifeguard/Swim Instructor*** - Tennis Instructor - Art/Theatre Instructor - Sport Site Supervisor - Park, Street & Water Maintenance Laborer - Tae Kwon Do Instructor/Tai Chi Instructor - Youth Activity Instructor - Election Specialist - Tax Collection Assistant	\$17.00	\$18.00	\$18.50	\$19.00	Summer Fall-Spring Year Round Year Round Summer Summer Summer Summer Year Round Summer Year Round Year Round As Needed Winter
Level 5 - Assistant Pool Manager ^^ - Water Fitness Instructor - Parent Child Aquatics Instructor - Dance, Pom, Twirling & Tumbling Instructor - Enrichment Instructor - Sign Maintenance Aide - Water Department Intern - Development Services Intern - Chief Election Inspector	\$18.00	\$19.00	\$19.50	\$20.00	Summer Year Round Year Round Year Round Year Round Summer As Needed As Needed As Needed
Level 6 - Basketball Supervisor - Crossing Guard***** - Flag Football Supervisor - Paid On Call Firefighter**** - Paid On Premise Firefighter**** / *****	\$19.00	\$20.00	\$20.50	\$21.00	Fall-Winter Year Round Fall Year Round Year Round
Level 7 - Recreation Office Assistant - Pool Manager^^ - Band Director - Video Production Assistant^	\$20.00	\$21.00	\$21.50	\$22.00	Year Round Summer Spring-Summer Year Round
Level 8 - Yoga/Pilates/Zumba with basic certification * - Engineering Aide - Spring/Fall Maintenance - Rubbish Site Attendant	\$21.00	\$22.00	\$22.50	\$23.00	Year Round Summer Spring/Fall Year Round
Level 9	\$22.00	\$23.00	\$23.50	\$24.00	
Level 10	\$23.00	\$24.00	\$24.50	\$25.00	

Position	Step 1 (Starting Wage)	Step 2	Step 3	Step 4	Employment Period
Level 11 - Training & Safety Officer (Fire)**** / ***** - Senior Pool Manager*** - Yoga/Pilates/Zumba with advance certification after 1yr. employment unless approved by Mgr. (ACE, AFAA, E-RYT 500 hrs) * - Snow Plow Driver - Seasonal Maintenance Worker (CDL Req'd)	\$24.00	\$25.00	\$25.50	\$26.00	Year Round Summer Year Round Winter Spring & Fall
Level 12	\$36.00	\$37.00	\$37.50	\$38.00	
Non-Classified Wage Rates - Scorekeeper - Court Monitor - Kickball Official** - Flag Football Official - Slow/Co-ed Softball Umpire** - Basketball Official** - WIAA Certified Basketball Official**	\$15.00/ga \$17.00/ga \$21.00/ga \$21.00/ga \$41.00/ga \$41.00/ga \$46.00/ga	\$16.00/ga \$18.00/ga \$22.00/ga \$22.00/ga \$42.00/ga \$42.00/ga \$47.00/ga	\$16.50/ga \$18.50/ga \$22.50/ga \$22.50/ga \$42.50/ga \$42.50/ga \$47.50/ga	\$17.00/ga \$19.00/ga \$23.00/ga \$23.00/ga \$43.00/ga \$43.00/ga \$48.00/ga	Fall-Winter Fall-Winter Summer Fall Summer-Fall Fall-Winter Fall-Winter

The step scale is designed to reward employees for good work performance and continual years of service. Employees are given a step increase with supervisor approval, for each year they return to same employment or each January 1st with satisfactory work performance. (New hires hired after June 30th will receive an increase the second January 1st after start date or when returning for a second season, whichever happens first)

Note: When a position is reclassified or the entire wage schedule is adjusted (excluding any across the board cost of living increase), current/returning employees in affected positions would start at Step 1 regardless of how many years they have been employed with the City. The exception to this is if placing a returning employee at Step 1 would either reduce their wage or not give them an increase, those employees should be placed at the step closest to their current wage that would provide an increase.

If an employee retires from the City and returns to work seasonally in a similar position to the one they retired from, the employee may be brought back at the wage they were at when they retired. These employees would be eligible for the annual across the board increase if they return from one season to the next.

- First year employees in any classified level shall start at Step 1, unless approved otherwise approved by the department head.

* Eligible to earn incentive pay based upon number of participants enrolled. Incentive pay ranges an additional .25 hours to 1.25 hours per class.

** Umpires or officials that are scheduled with a partner and work a game alone will be paid at 1.5 times the game rate.

*** The City of will reimburse employees the cost of certification or recertification, up to the average cost of certification or recertification for the area, for positions that require lifeguard certification. The City will reimburse the cost for the Lifeguard Instructor certification for the Senior Pool Manager employee.

**** Receives \$50/month on-call pay if meet minimum response requirements for emergency incidents and duty crew. Responses will be reviewed annually by department.

***** Receives \$20/month gas stipend for regular assigned guards. This benefit is discontinued for guards assigned to a regular position on or after April 1, 2019.

***** Receives \$0.25/hour for each of the following certifications: Firefighter II, Fire Inspector, Driver Operator Pumper, Driver Operator Aerial, Emergency Services Instructor, Fire Officer I, Fire Officer II; Receives \$1.00/hour for EMT-P Licensure

^ Paid at least a minimum of 2 hours each day worked

^^ Bartenders License required and shall be reimbursed by the City upon successful attendance of at least three events.

^^^ When an employee is promoted to Assistant Pool Manager or Pool Manager, the employee will be placed in the step closest to what their returning wage would have been that will provide an increase.



Request for Common Council Action

Meeting Date: May 19, 2026
Department: City Clerk
From: Carey Danen, City Clerk
Subject: Recommendation from the Finance/Personnel Committee on revisions to the criteria and structure of the Community Service Grant Program.
Recommendation: Motion to approve.

The Finance/Personnel Committee voted unanimously at its May 12, 2026 meeting to recommend approval of the proposed applicant eligibility and first-time applicant criteria for the Community Service Grant program, with the guidelines to take effect immediately. The Committee also voted to recommend transitioning to a single annual application window beginning in 2027.

In March, the Common Council discussed potential guidelines for the Community Service Grant program and requested that staff research comparable programs in other Wisconsin municipalities. To gather this information, staff submitted an inquiry to the statewide Wisconsin Municipal Clerk’s listserv. No responses or examples of similar grant structures or criteria were received. In the absence of external models, staff met internally to brainstorm ideas and build upon the suggestions raised at the Council meeting.

To guide the development of program criteria, staff revisited the original intent of the Community Service Grant Program. When the program was established, the goal was to encourage individuals and small local groups to take an active role in improving the community. Specifically, the program was designed to support projects that:

- Contribute to community infrastructure
- Enhance public safety
- Promote community awareness
- Improve the aesthetic quality of the City
- Strengthen City culture and the overall sense of community

These principles reflect the City’s commitment to fostering civic engagement and empowering residents to make meaningful, visible contributions to De Pere’s public spaces and community life. The modest grant amount was intentionally structured to

support grassroots, volunteer-driven initiatives rather than large-scale projects.

Based on these discussions, staff recommends the following criteria and structural adjustments for the program:

Applicant Eligibility

Applications must be submitted by a De Pere-based organization, or the proposed project must occur within City limits or directly benefit City residents.

Preference for First-Time Applicants

To encourage broad community participation, preference may be given to applicants who have not previously received a Community Service Grant.

Annual Application Window

Staff recommends shifting from the current twice-per-year award cycle (June and December) to a single annual application window. The specific timing of the application period and award date would be determined based on what best aligns with community needs and program goals. Under this structure, the Council could award up to five \$600 grants using the amount currently budgeted for the program. Staff recommends continuing the biannual cycle for 2026 and transitioning to the annual process in 2027.

If the Council supports these recommendations, staff will update the program materials, application form, and public communications to reflect the programs' revised structure and criteria.

Staff welcomes Council feedback on the proposed criteria and any additional considerations the Council would like incorporated into the program.

Attachments:

None



Request for Common Council Action

Meeting Date: May 19, 2026
Department: City Attorney
From: Joanne Bungert, City Attorney
Subject: Recommendation of the Finance/Personnel Committee to retain Stafford Rosenbaum LLP as outside counsel for representation before the Public Service Commission for the extension of utilities to the southeast area of De Pere.

The Common Council may convene in closed session pursuant to Section 19.85(1) (g), Wis. Stats., for the purpose of conferring with legal counsel for the governmental body who is rendering oral or written advice concerning strategy to be adopted by the body with respect to litigation in which it is or is likely to become involved. The Common Council will thereafter reconvene in open session pursuant to Section 19.85(2), Wis. Stats., to take action on items discussed in closed session, if appropriate, and to consider the remainder of the agenda.

Recommendation: Motion to approve.

The Finance/Personnel Committee voted unanimously at its meeting on May 12, to approve the hiring of Stafford Rosenbaum LLC.

Seeking to retain outside counsel to assist with the petition and hearing process to obtain authority from the Public Service Commission to extend public utility infrastructure to service parcels recently annexed into the City.

Attachments:
05.12.26-Memo to FP - PSC Application and Outside Counsel

CITY OF DE PERE MEMO



To: Finance & Personnel Committee
From: Joanne Bungert, City Attorney
Date: May 12, 2016
RE: Selection of Stafford Rosenbaum LLP as Outside Counsel for PSC Utility Extension Application and Hearing.

In December 2015, the City annexed several parcels through unanimous consent of the parcel owners from the Town of Rockland. In order to support the intended development of these parcels, certain public service utilities need to be extended and constructed to service these parcels. The process by which this occurs is governed by state statutes and involves filing petitions, applications and hearings before the Public Service Commission. Due to the potentially complex nature of these proceedings, staff is seeking to retain outside counsel that specializes in this area of the law and has the requisite expertise to accomplish the necessary approvals to successfully proceed with the public construction of the utility extension.

Funding for these services will come from the Law Department's Consulting Services Budget. For the initial steps of filing a municipal petition and application to the Public Service Commission, the budgeted costs range from \$7,500 - \$14,000. If the petition is denied or the application is contested, additional costs would be involved, which could potentially require a request from unassigned reserves. Law Department will oversee and manage outside counsel as well as the legal strategy involved in order to appropriately represent the City's interests throughout the matter. Additionally, we will seek additional authority from Council and provide litigation updates as necessary.

The Law Department met with and obtained two proposals from law firms regarding the provision of outside counsel services. Based on our review of the scope of work and the potential costs and fees, the recommendation is to select and retain Stafford Rosenbaum LLP.



City of De Pere, Wisconsin

9.A

Request for Common Council Action

Meeting Date: May 19, 2026
Department: City Clerk
From: Carey Danen, City Clerk
Subject: Resolution #26-37 Awarding Official City Newspaper Contract.
Recommendation: Motion to approve.

Attachments:
Reso26-37, Press Times Agreement (Official City Newspaper 2026), Publication Deadlines 2026-2027

RESOLUTION #26-37
AWARDING OFFICIAL CITY NEWSPAPER CONTRACT

WHEREAS, pursuant to Wis. Stats. §985.06, the City of De Pere has advertised and received one effective bid from a qualified newspaper for the printing of Common Council proceedings and legal notices; and

WHEREAS, the sole effective bid was submitted by the *Press Times*.

NOW, THEREFORE, BE IT HEREBY RESOLVED THAT:

The *Press Times* be designated the Official City Newspaper for the printing of Common Council proceedings and legal notices for the 2026-2027 contract year in accordance with its sole effective bid. A copy of such bid is attached and incorporated herein as Exhibit A.

BE IT FURTHER RESOLVED THAT:

All City officers, officials and employees are further authorized and directed to take such steps as are lawful and necessary in furtherance thereof.

Adopted by the Common Council of the City of De Pere, Wisconsin, this 19th day of May, 2026.

APPROVED:

James G. Boyd, Mayor

ATTEST:

Carey E. Danen, City Clerk

Ayes: _____

Nays: _____

**AGREEMENT FOR CONTRACTOR SERVICES BETWEEN THE
CITY OF DE PERE AND BROWN COUNTY PUBLISHING COMPANY, INC.**

THIS AGREEMENT made and entered into this _____ day of _____, 2026, by and between the City of De Pere, Wisconsin, a Wisconsin municipal corporation (“City”), and Brown County Publishing Company, Inc., a Wisconsin corporation (“Contractor”).

I. SCOPE OF SERVICES

Contractor agrees to perform those publishing services described in the City’s Notice to Newspapers, dated March 31, 2026, and published on April 3, 2026, attached hereto and incorporated herein as Exhibit A. No standard terms or conditions of Contractor’s Proposal are incorporated into this Agreement unless such term is specifically written into the Agreement. Any change to the scope of services as identified therein shall be defined in writing and authorized by both parties prior to performing such work. Such writing shall include the scope of work to be done, schedule for commencing and completing the work and the basis for compensation for such work.

II. RATES

The parties agree the Contractor shall charge and the City shall pay the publishing rates as provided in Contractor’s bid attached hereto and incorporated herein as Exhibit B.

III. TERM

The term of this Agreement shall be July 1, 2026, through June 30, 2027.

IV. LEGAL RELATIONS AND PUBLIC RESPONSIBILITY

1. **LAWS TO BE OBSERVED.** The Contractor shall at all times observe and comply with all federal, state, and local laws, regulations and ordinances which are in effect or which may be placed in effect during the contract period and which in any manner affect the conduct of the work. The Contractor shall indemnify and save harmless the City and its officers, agents and employees against any claim or liability arising from or based on the violation of any such law, ordinance, or regulation, whether by Contractor or its employees, subcontractors, or agents.

2. **CONTRACTOR RECORDS.** Contractor acknowledges that, as a contractor of a Wisconsin Municipality, Wis. Stats. §19.36(3) applies to it and records produced by it pursuant to this contract are subject to the public records law to the extent that they would otherwise be if maintained by the City of De Pere. Contractor agrees that, within 10 business days of a written request of the City of De Pere, it shall forward such records as are requested by the City of De Pere. Such records shall be in the

format requested by City of De Pere provided that such records are kept and maintained in that format.

3. PERSONAL LIABILITY OF PUBLIC OFFICIALS. In carrying out any of the provisions of this contract or in exercising any power or authority granted to them thereby, there shall be no personal liability upon the City, its officers, officials, agents and employees, it being understood that in such matters they act as agents and representatives of the City. Any right of action by the Contractor against the City, or its agents or employees, is hereby expressly waived.

V. MEDIATION

All claims, disputes and other matters in question between the parties of this Agreement arising out of or relating to this Agreement or breach thereof, which are not disposed by mutual agreement of the parties, shall be subject to mediation as a condition precedent to the institution of legal proceedings by either party. If such claim, dispute or other matter involves a lien arising out of the Contractor's services, the Contractor may proceed in accordance with applicable law to comply with lien notice and filing deadlines prior to resolution of the matter by mediation.

The City and Contractor shall attempt to resolve claims, disputes and other matters in question between them by mediation in accordance with the Rules of the American Arbitration Association currently in effect unless the parties agree otherwise. A request for mediation shall be filed in writing with the other party to this Agreement and, if applicable, the American Arbitration Association. The request may be made concurrently with the filing of a civil action, but mediation shall proceed in advance of legal proceedings, which may be stayed pending mediation for a period of 60 days from the date of filing unless a longer period is agreed to by the parties or required by a court order.

The parties shall share the mediator's and any filing fees equally. The mediation shall be held in the place where the Project is located, unless another location is mutually agreed upon. Agreements reached in mediation shall be enforceable as settlement agreements in any court having jurisdiction thereof.

VI. NOTICES

Any notification required or needed under the contract shall be sent to the following:

If to City:

City of De Pere
Attention: City Clerk
335 South Broadway Street
De Pere, WI 54115

If to Contractor:

Brown County Publishing Company, Inc.
Attention: Mike Hollihan, General Manager
310 West Walnut Street, 4th Floor
Green Bay, WI 54303

IN WITNESS WHEREOF, the parties hereto have made and executed this Agreement as of the day and year first above written.

BROWN COUNTY PUBLISHING COMPANY, INC.

CITY OF DE PERE

By:

By:

Mike Hollihan, General Manager

Kimberly T. Flom, City Manager

Carey E. Danen, City Clerk

J:\Law\Agreements\2026\Miscellaneous\Press Times Agreement (Official City Newspaper 2026)5-13-26.docx

NOTICE TO NEWSPAPERS

NOTICE IS HEREBY GIVEN that sealed bids will be received by the City Clerk of the City of De Pere, Wisconsin, at the City Clerk's office in City Hall until 12:00 o'clock Noon on the first Tuesday in May, being May 5, 2026, for separate proposals to publish in English (a) Council Proceedings, and (b) City's legal notices.

Bids will be received from all daily and weekly newspapers in accordance with Section 985.03 of the Wisconsin Statutes. Bid submissions must include proof of bona fide paid circulation in the City of De Pere as defined by Section 985.01(1b) of the Wisconsin Statutes and proof of certification from the Department of Administration. Additionally, the newspaper shall be in compliance with all requirements of Chapter 985 of the Wisconsin Statutes.

All newspapers submitting a bid must include a security bond in the amount of \$1,000.00.

All bidders shall submit with its bid the deadline (dates/times) for submission of legal notices and council proceedings for incorporation into the award contract of the successful bidder. These dates shall not be subject to change after the bid is submitted to the City Clerk.

Bids for more than legal rate for like work will not be considered.

The right to reject any or all bids or to waive any informality is reserved by the City.

Dated March 31, 2026

Published April 3, 2026
(Signed) Carey Danen, City Clerk



Locally owned and locally written since 1970
310 W. Walnut St. 4th Floor. Green Bay, WI, 54303 920-799-4687

The Press Times hereby submits the enclosed bid to publish the De Pere's council proceedings and legal notices for the coming year.

In-column Legal Notice fees:

Fees for publishing Legal Notices in the classifieds section are calculated on a per line basis. The Press Times utilizes a 1.5 inch column width and six columns per page. As of April 20, 2012, all Wisconsin Newspapers were required to use Arial font. Using a eight point typeface, 10.2 lines per inch, and our bid is as follows:

Classifieds 6 Column Per Line Charge-Arial 8-point Font
Table with 3 columns: Number of Columns, First Insertion, Subsequent Insertion(s)

Affidavit charge \$1.00 per affidavit

Please consider:

The Press Times classified section uses a six column format which is significantly wider than many competing newspapers. The width difference should be taken into consideration when comparing rate quotes since the billable lines per page in The Press Times may be a fraction of many competitors.

If you have any questions on the above, please contact me at your convenience.

Sincerely,
Mike Hollihan
General Manager
Press Times

UNITED STATES POSTAL SERVICE® (All Periodicals Publications Except Requester Publications)

Statement of Ownership, Management, and Circulation

1. Publication Title: **The Press Times**
 2. Publication Number: **930-660**
 3. Filing Date: **09-25-25**
 4. Issue Frequency: **Weekly**
 5. Number of Issues Published Annually: **51**
 6. Annual Subscription Price: **\$69.00**

7. Complete Mailing Address of Known Office of Publication (Street, P.O. Box, etc., county, state, and ZIP+4®)
**310 W Walnut St., 4th Floor
 Green Bay, WI 54303**
 Contact Person: **Mike Hollihan**
 Telephone Number (include area code): **(920) 265-4872**

8. Complete Mailing Address of Headquarters or General Business Office of Publisher (Not printer)
310 W Walnut St., 4th Floor, Green Bay, WI 54303

9. Full Names and Complete Mailing Addresses of Publisher, Editor, and Managing Editor (Do not leave blank)
 Publisher (Name and complete mailing address):
Patrick J. Wood PO Box 408, Waupaca, WI 54981

Editor (Name and complete mailing address):
Kris Leonhardt 310 W Walnut St., 4th Floor, Green Bay, WI 54303

Managing Editor (Name and complete mailing address):
Mike Hollihan 310 W Walnut St., 4th Floor, Green Bay, WI 54303

10. Owner (Do not leave blank. If the publication is owned by a corporation, give the name and address of the corporation immediately followed by the names and addresses of all stockholders owning or holding 1 percent or more of the total amount of stock. If not owned by a corporation, give the name and address of the individual owner. If owned by a partnership or other unincorporated firm, give its name and address as well as those of each individual owner. If the publication is published by a nonprofit organization, give its name and address.)

Full Name	Complete Mailing Address
Brown County Publishing	310 W Walnut St., 4th Floor, Green Bay, WI 54303

11. Known Bondholders, Mortgagees, and Other Security Holders Owning or Holding 1 Percent or More of Total Amount of Bonds, Mortgages, or Other Securities. If none, check box None

12. Tax Status (For completion by nonprofit organizations authorized to mail at nonprofit rates) (Check one)
 The purpose, function, and nonprofit status of this organization and the exempt status for federal income tax purposes:
 Has Not Changed During Preceding 12 Months
 Has Changed During Preceding 12 Months (Publisher must submit explanation of change with this statement)

13. Publication Title: **The Press Times**
 14. Issue Date for Circulation Data Below: **09/19/2025**

13. Extent and Nature of Circulation		Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date
a. Total Number of Copies (Net press run)		9887	6131
b. Paid Circulation (By Mail and Outside the Mail)	(1) Mailed Outside-County Paid Subscriptions Stated on PS Form 3541 (include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)	202	189
	(2) Mailed In-County Paid Subscriptions Stated on PS Form 3541 (include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)	8851	5802
	(3) Paid Distribution Outside the Mail including Sales Through Dealers and Carriers, Street Vendors, Counter Sales, and Other Paid Distribution Outside USPS®	330	330
	(4) Paid Distribution by Other Classes of Mail Through the USPS (e.g., First-Class Mail®)	0	0
c. Total Paid Distribution (Sum of 13b (1), (2), (3), and (4))		9383	6321
d. Free or Nominal Rate Distribution (By Mail and Outside the Mail)	(1) Free or Nominal Rate Outside-County Copies Included on PS Form 3541	0	0
	(2) Free or Nominal Rate In-County Copies Included on PS Form 3541	0	0
	(3) Free or Nominal Rate Copies Mailed at Other Classes Through the USPS (e.g., First-Class Mail®)	2220	0
	(4) Free or Nominal Rate Distribution Outside the Mail (Carriers or other means)	0	0
e. Total Free or Nominal Rate Distribution (Sum of 13d (1), (2), (3), and (4))		2220	0
f. Total Distribution (Sum of 13c and 13e)		11603	6321
g. Copies not Distributed (See Instructions to Publishers #4 (page R2))		100	100
h. Total (Sum of 13f and g)		11703	6421
i. Percent Paid (13c divided by 13h times 100)		80.86	100

*If you are claiming electronic copies, go to line 18 on page 3. If you are not claiming electronic copies, skip to line 17 on page 3.

UNITED STATES POSTAL SERVICE® (All Periodicals Publications Except Requester Publications)

Statement of Ownership, Management, and Circulation

15. Electronic Copy Circulation

	Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date
a. Paid Electronic Copies	0	0
b. Total Paid Print Copies (Line 13c) + Paid Electronic Copies (Line 15a)	9383	6321
c. Total Paid Distributions (Line 13c + Paid Electronic Copies (Line 15a))	11603	6321
d. Percent Paid (Both Print & Electronic Copies) (15b divided by 15c x 100)	80.86	100

I certify that 80% of all my distributed copies (electronic and print) are paid above a nominal price.

17. Publication of Statement of Ownership
 If the publication is a general publication, publication of this statement is required. Will be printed in the **9/25/25** issue of this publication. Publication not required

18. Signature and Title of Editor, Publisher, Business Manager, or Owner
Mike Hollihan General Manager Date: **Sept. 25, 2025**

I certify that all information furnished on this form is true and complete. I understand that anyone who furnishes false or misleading information on this form or who omits material or information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including civil penalties).

PS Form 3526, July 2014 (Page 3 of 4) PRIVACY NOTICE: See our privacy policy on www.usps.com

Statement of Ownership Management and Circulation
 Owners: As of July 26, 2024 the holders of 1% or more of the outstanding common stock of Brown County Publishing, LLC: 416 Polar Drive Green Bay WI 54302, Patrick Wood, 404 Maxwell Drive, Pittsburgh, PA 15236, Christopher Wood, 400 Security Blvd., Suite 2, Green Bay, WI 54313, WI 54313, Carole Wood, Trustee, Wood Family Trust, Green Bay, WI 54302, Tom Wood, 2228 W Seneca, Appleton WI 54914, Mike Hollihan, 4303 Trent Drive, Green Bay, WI 54313, Nick Wood, 3651 Bay Settlement Rd Green Bay WI 54311, Francis & Mary Pietsch, 589 Green Bay Road, Denmark, WI 54208, David Wood, 1833 Llac Lane Green Bay WI 54302, Daniel Wood, 360 Riverside Drive, Apt. 6C, New York, NY 10025-2750, Rebecca Wood, 2130 Lost Dauphin Road, Apt. 2, De Pere, WI 54115.

Statement of Ownership and Circulation

11. Bondholders: Nicolet National Bank, 111 N Washington St. Green Bay, WI 54301

Owners: As of June 21, 2021 the holders of 1% or more of the outstanding common stock of Brown County Publishing, LLC:

Wood, Patrick	404 Maxwell Drive, Pittsburgh, PA 15236
Wood, Christopher	461 Polaris Road, Green Bay, WI 54302
Wood, Thomas	1800 E Robin Way Suite I Appleton, WI 54915
Wood, Rebecca	2130 Lost Dauphin Road #2-South, De Pere, WI 54115
Wood, Daniel	360 Riverside Drive, Apt. 8C, New York, NY 10025-2750
Hollihan, Michael	4393 Trent Drive, Green Bay, WI 54313
Wood, David	1833 Lilac Lane, Green Bay, WI 54302
Wood, Nicholas	3651 Bay Settlement Road, Green Bay, WI 54311
Pietsch, Francis	589 Green Bay Road, P.O. Box 253, Denmark, WI 54208
Pietsch, Mary	589 Green Bay Road, P.O. Box 253, Denmark, WI 54208
Wood, Carole A., Trustee, Wood Family Trust, Dtd. 8/23/92	1833 Lilac Lane, Green Bay, WI 54302



VERIFICATION CERTIFICATE FOR INDEFINITE TERM BOND

The Ohio Casualty Insurance Company, Surety upon:

a certain Bond No.: 32S615474

Cross Ref Bond No.:

dated effective: July 6, 2021

on behalf of: Brown County Publishing, Inc.

and in favor of: City of De Pere

Amount of bond: \$1,000.00

Description of bond: Publishing

Current Bond Term: July 6, 2025 to July 6, 2026

and that the said bond remains in effect, subject to all its agreements, conditions and limitations, and ends only with the cancellation of said bond or other legal termination.

Signed and dated on: April 16, 2026

Surety Name: The Ohio Casualty Insurance Company

By: Carolyn Banks, Assistant Secretary

Agency Name: TARTAN INSURANCE AGENCY, INC.

Agency Address: 2150 Memorial Dr. Suite 103, Green Bay, WI 54303

Agency Telephone:





POWER OF ATTORNEY

The Ohio Casualty Insurance Company

Principal: Brown County Publishing, Inc.
 Agency Name: TARTAN INSURANCE AGENCY, INC. Bond Number: 32S615474
 Obligee: City of De Pere
 Bond Amount: (\$1,000.00) One Thousand Dollars And Zero Cents

KNOW ALL PERSONS BY THESE PRESENTS: that The Ohio Casualty Insurance Company, a corporation duly organized under the laws of the State of New Hampshire (herein collectively called the "Company"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint **Carolyn Banks** in the city and state of **Seattle, WA**, each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Company in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Company and the corporate seal of the Company has been affixed thereto this 16th day of April, 2026.



The Ohio Casualty Insurance Company

By: *Nathan J. Zangerle*
 Nathan J. Zangerle, Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, currency rate, interest rate or residual value guarantees.

For bond and/or Power of Attorney (POA) verification inquiries, please call 610-832-8240 or email HOSUR@libertymutual.com.

STATE OF PENNSYLVANIA ss
 COUNTY OF MONTGOMERY

On this 16th day of April, 2026, before me personally appeared Nathan J. Zangerle, who acknowledged himself to be the Assistant Secretary of The Ohio Casualty Insurance Company and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written.



Commonwealth of Pennsylvania - Notary Seal
 Teresa Pastella, Notary Public
 Montgomery County
 My commission expires March 28, 2029
 Commission number 1126044
 Member, Pennsylvania Association of Notaries

By: *Teresa Pastella*
 Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-law and Authorizations of The Ohio Casualty Insurance Company, which is now in full force and effect reading as follows:

ARTICLE IV – OFFICERS: Section 12. Power of Attorney.

Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

Certificate of Designation – The President of the Company, acting pursuant to the Bylaws of the Company, authorizes Nathan J. Zangerle, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization – By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature or electronic signatures of any assistant secretary of the Company or facsimile or mechanically reproduced or electronic seal of the Company, wherever appearing upon a certified copy of any power of attorney or bond issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, of The Ohio Casualty Insurance Company do hereby certify that this power of attorney executed by said Company is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Company this 16th day of April, 2026.



By: *Renee C. Llewellyn*
 Renee C. Llewellyn, Assistant Secretary

May 2026

June 2026

Su	Mo	Tu	We	Th	Fr	Sa
31	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	1	2	3	4

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
26	27	28	29 Legals Due 9am	30	1	2
3	4	5 Cinco de Mayo	6 Legals Due 9am	7	8	9
10 Mother's Day	11	12	13 Legals Due 9am	14 Ascension of Jesus	15	16
17	18	19 Legals Due 9am	20	21	22	23
24 Pentecost	25 Memorial Day	26	27 Legals Due 9am	28	29	30
31	1	2	3	4	5	6

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June 2026

July 2026

Su	Mo	Tu	We	Th	Fr	Sa
28	29	30	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	1

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
31	1	2	3 Legals Due 9am	4	5	6
7	8	9	10 Legals Due 9am	11	12	13
14 Flag Day	15	16	17 Legals Due 9am	18	19 Juneteenth	20
21 Father's Day	22	23	24 Legals Due 9am	25	26	27
28	29	30	1	2	3	4 Independence Day

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July 2026

August 2026

Su	Mo	Tu	We	Th	Fr	Sa
26	27	28	29	30	31	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31	1	2	3	4	5

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
28	29	30 Legals Dve 9am	1	2	3	4 Independence Day
5	6	7	8 Legals Dve 9am	9	10	11
12	13	14	15 Legals Dve 9am	16	17	18
19	20	21	22 Legals Dve 9am	23	24	25
26	27	28	29 Legals Dve 9am	30	31	1

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August 2026

September 2026

Su	Mo	Tu	We	Th	Fr	Sa
30	31	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	1	2	3

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
26	27	28	29	30	31	1
2	3	4	5 Legals Due 9am	6	7	8
9	10	11	12 Legals Due 9am	13	14	15 Assumption of the Blessed Virgin Mary
16	17	18	19 Legals Due 9am	20	21	22
23	24	25	26 Legals Due 9am	27	28	29
30	31	1	2	3	4	5

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September 2026

October 2026

Su	Mo	Tu	We	Th	Fr	Sa
27	28	29	30	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
30	31	1 <i>Legals DUE 9am</i>	2	3	4	5
6	7 <i>Labor Day</i>	8	9 <i>Legals DUE 9am</i>	10	11	12
13 <i>Grandparents Day</i>	14	15	16 <i>Legals DUE 9am</i>	17	18	19
20	21	22	23 <i>Legals DUE 9am</i>	24	25	26
27	28	29	30 <i>Legals DUE 9am</i>	1	2	3

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October 2026

November 2026

Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	1	2	3	4	5

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
27	28	29	30	1	2	3
4	5	6 Legals Due 9am	7	8	9	10
11	12 Columbus Day	13	14 Legals Due 9am	15	16	17
18	19	20	21 Legals Due 9am	22	23	24
25	26	27	28 Legals Due 9am	29	30	31 Halloween

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November 2026

December 2026

Su	Mo	Tu	We	Th	Fr	Sa
29	30	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	1	2

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1 Daylight Saving Ends All Saints' Day	2	3	4 Legals Due 9am	5	6	7
8	9	10 Legals Due 9am	11 Veterans Day	12	13	14
15	16	17	18 Legals Due 9am	19	20	21
22	23	24 Legals Due 9am	25	26 Thanksgiving Day	27 Black Friday	28
29	30	1	2	3	4	5

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December 2026

January 2027

Su	Mo	Tu	We	Th	Fr	Sa
27	28	29	30	31	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31	1	2	3	4	5	6

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
29	30	1	2 Legals DUE 9am	3	4	5
6	7	8 The Immaculate Conception of The Blessed Virgin Mary	9 Legals DUE 9am	10	11	12
13	14	15	16 Legals DUE 9am	17	18	19
20	21 Legals DUE 9am	22	23	24	25 Christmas	26
27	28	29	30 NO PAPER THIS WEEK!	31 New Year's Eve	1 New Year's Day	2

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January 2027

February 2027

Su	Mo	Tu	We	Th	Fr	Sa
31	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	1	2	3	4	5	6

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
27	28	29	30	31	1 New Year's Day	2
3	4	5	6 Epiphany Legals Due 9am	7	8	9
10	11	12 Legals Due 9am	13	14	15	16
17	18 Birthday of Martin Luther King, Jr.	19	20 Legals Due 9am	21	22	23
24	25	26	27 Legals Due 9am	28	29	30
31	1	2	3	4	5	6

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February 2027

March 2027

Su	Mo	Tu	We	Th	Fr	Sa
28	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	1	2	3

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
31	1	2	3 <i>Legals Due 9am</i>	4	5	6
7	8	9 <i>Legals Due 9am</i>	10 Ash Wednesday	11	12	13
14 Valentine's Day Super Bowl Sunday	15 Washington's Birthday (Presidents' Day)	16	17 <i>Legals Due 9am</i>	18	19	20
21	22	23	24 <i>Legals Due 9am</i>	25	26	27
28	1	2	3	4	5	6

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March 2027

April 2027

Su	Mo	Tu	We	Th	Fr	Sa
28	29	30	31	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	1

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
28	1	2	3 Legals Due 9am	4	5	6
7	8	9	10 Legals Due 9am	11	12	13
14 Daylight Saving Starts	15	16	17 Saint Patrick's Day Legals Due 9am	18	19	20
21 Palm Sunday	22	23	24 Legals Due 9am	25 Maundy Thursday	26 Good Friday	27
28 Easter	29	30	31 Legals Due 9am	1 April Fool's Day	2	3

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April 2027

May 2027

Su	Mo	Tu	We	Th	Fr	Sa
25	26	27	28	29	30	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31	1	2	3	4	5

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
28	29	30	31	1 April Fool's Day	2	3
4	5	6	7 Legals DUE 9am	8	9	10
11	12	13	14 Legals DUE 9am	15	16	17
18	19	20	21 Legals DUE 9am	22 Earth Day	23	24
25	26	27	28 Legals DUE 9am	29	30	1

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Request for Common Council Action

Meeting Date: May 19, 2026
Department: Administration
From: Andrew Pantzlaff, Communications & Marketing Manager
Subject: Resolution #26-38 Authorizing Digital Solutions Agreement with Govstack for website provider services, with transfer of \$15,204 from Unassigned Reserves.
Recommendation: Motion to approve.

This item was unanimously approved by the Finance/Personnel Committee at its meeting on April 14, 2026.

Attachments:
Reso26-38, Govstack by GHD with City revisions, Memo - GovStack Website - Final for Agenda, Govstack Quote - City of De Pere - April 29

RESOLUTION #26-38

AUTHORIZING DIGITAL SOLUTIONS AGREEMENT WITH GOVSTACK FOR WEBSITE PROVIDER SERVICES, WITH TRANSFER OF \$15,204 FROM UNASSIGNED RESERVES

WHEREAS, staff was notified in January of this year that City's current website provider, EGOV is no longer providing website provider services, making it necessary for the City to migrate to an alternative platform; and

WHEREAS, after a thorough vendor review process, staff is recommending GovStack to provide replacement provider services based upon cost-effectiveness and functionality, while offering the most intuitive interface for staff for efficiency, seamless continued connectivity for residents, businesses and visitors to find information, use services and/or connect with the City, as well as provide an Americans with Disabilities Act compliance overlay; and

WHEREAS, GovStack has available and offers to provide personnel and equipment necessary to accomplish the installation, training and migration within the required timeframe; and

WHEREAS, due to the unanticipated discontinuation, the amount of \$15,204 is requested from Unassigned Reserves to start the migration, implementation and the starter subscription, with ongoing subscription costs being budgeted annually hereafter; and

WHEREAS, this matter has been reviewed by the Finance/Personnel Committee which recommends approval thereof.

NOW, THEREFORE, BE IT HEREBY RESOLVED THAT:

The City Manager is authorized and directed to execute such Digital Solutions Agreement, as well as other documentation required by GovStack, subject to review and revisions as deemed necessary by the City Attorney.

BE IT FURTHER RESOLVED THAT:

The Common Council hereby authorizes the transfer of funds from City's Unassigned Reserves account in the amount of \$15,204 and approves the

allocation to Account 100-51450-290 (Other Contractual Services) under the Information Management budget.

BE IT FURTHER RESOLVED THAT:

All City officials, officers and employees are authorized and directed to take such steps as are lawful and necessary in furtherance thereof.

Adopted by the Common Council of the City of De Pere, Wisconsin, this 19th day of May, 2026.

APPROVED:

James G. Boyd, Mayor

ATTEST:

Carey E. Danen, City Clerk

Ayes: _____

Nays: _____

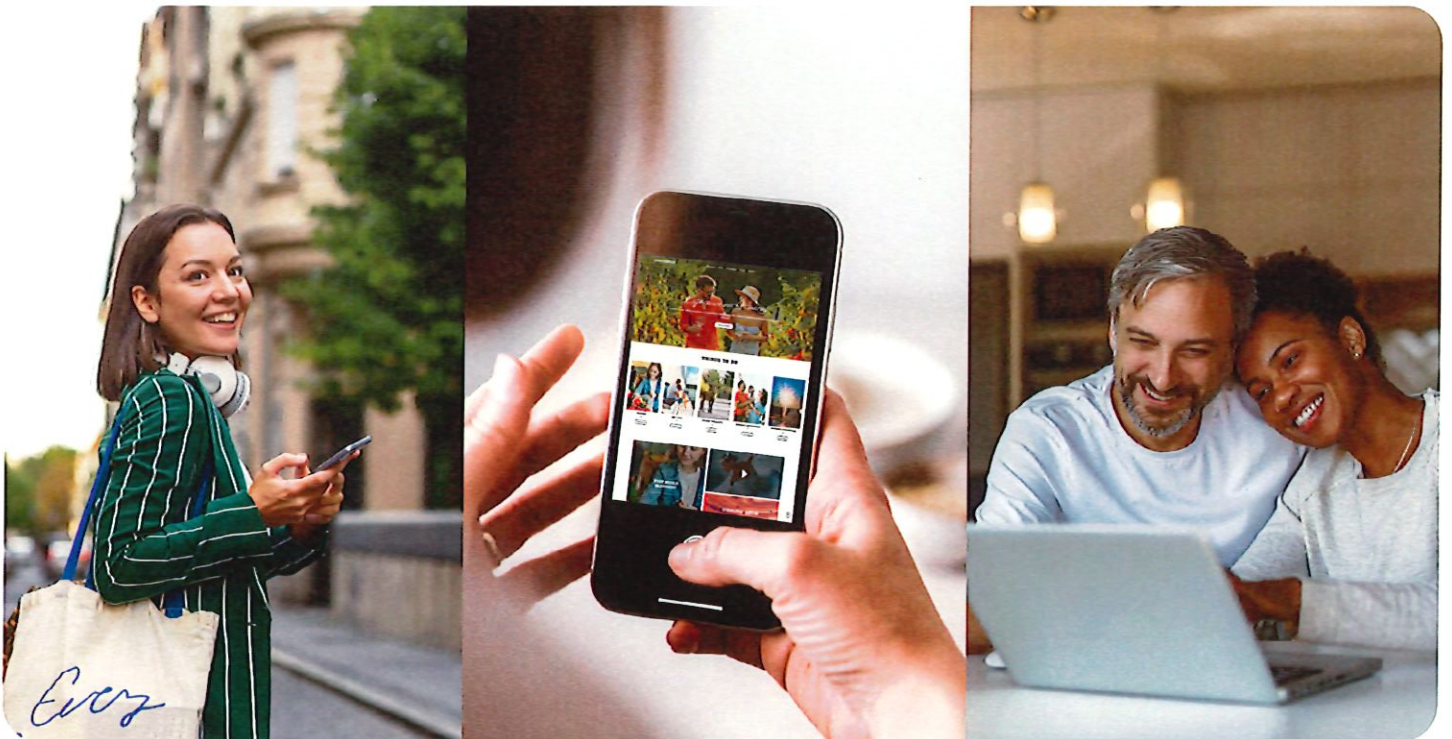
Board/Committee Approval: 04/14/2026

Transform the way you serve and connect with your community



A scalable platform that puts the control into your hands

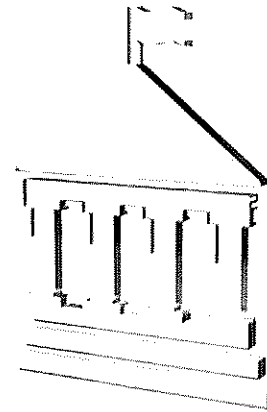
Public sector organizations need to keep pace with the demands of their residents for online information and service delivery, especially in the face of rapid community growth. They also need to provide up-to-date information, but don't always have the technical resources to do this.



→ Transform for good.

Introducing Govstack[®], a platform built for the public sector.

Govstack is a modular and scalable digital platform that enables you to engage, inform, serve, and connect with your community online, while cutting down on the cost and resources necessary to do so.



Govstack[®] products →

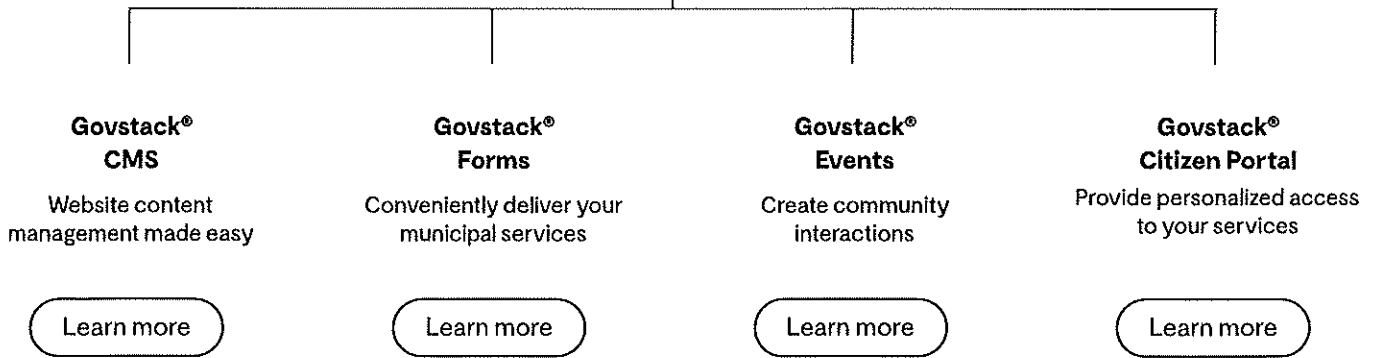
Govstack[®] Content Management System (CMS), a robust website CMS that puts you in control of the way your content is presented.

Govstack[®] Forms, a customizable forms integration that cuts your operating costs by digitally collecting feedback, and allowing your residents to transact business online.








Govstack[®] Events, an interactive tool to easily manage your events both paid and free. Create multiple calendars, aggregate them for a single master view, plan and publish in collaboration with other departments.

Govstack[®] Citizen Portal, a personalized, citizen engagement portal that provides quick access to key information and services tailored to the unique needs of your residents, wherever and whenever they need it.

Govstack[®]



Tailored to meet your unique needs

-  Powerful flexible intuitive Content Management System
-  Self-serve CMS with low code / no code site builder
-  Create subsites, landing pages, control CSS and brand
-  Easy to update and publish content with workflows and rollbacks
-  Powerful and flexible forms
-  Timely updates, Notification and Alerts system
-  Secure, reliable and accessible WCAG 2.1 Level AA



Why Govstack[®]?

① Grow as you go

Evolve with the needs of your community and your organization

② Power with one password

Increase efficiency and centralize your systems on a single platform to deliver city services to your residents through secure, single sign-on (SSO) access.

③ Increase transparency and improve trust

Provide your residents with timely information, automated email notifications and feedback forms to enhance trust and foster connection.

④ Reduce your inquiry cost methods

We understand the pressures and expectations for Council to provide faster, easier, and cost-effective services to the public. And we also recognize the labor shortages that challenge the public sector. That's why we made Govstack, value-driven platform that helps you optimize your workforce and reduce costs, while meeting the online service expectations of your community.

Features of the platform

General

- Subsites
 - Multilingual support
 - Accessibility
 - Responsive on all devices
-

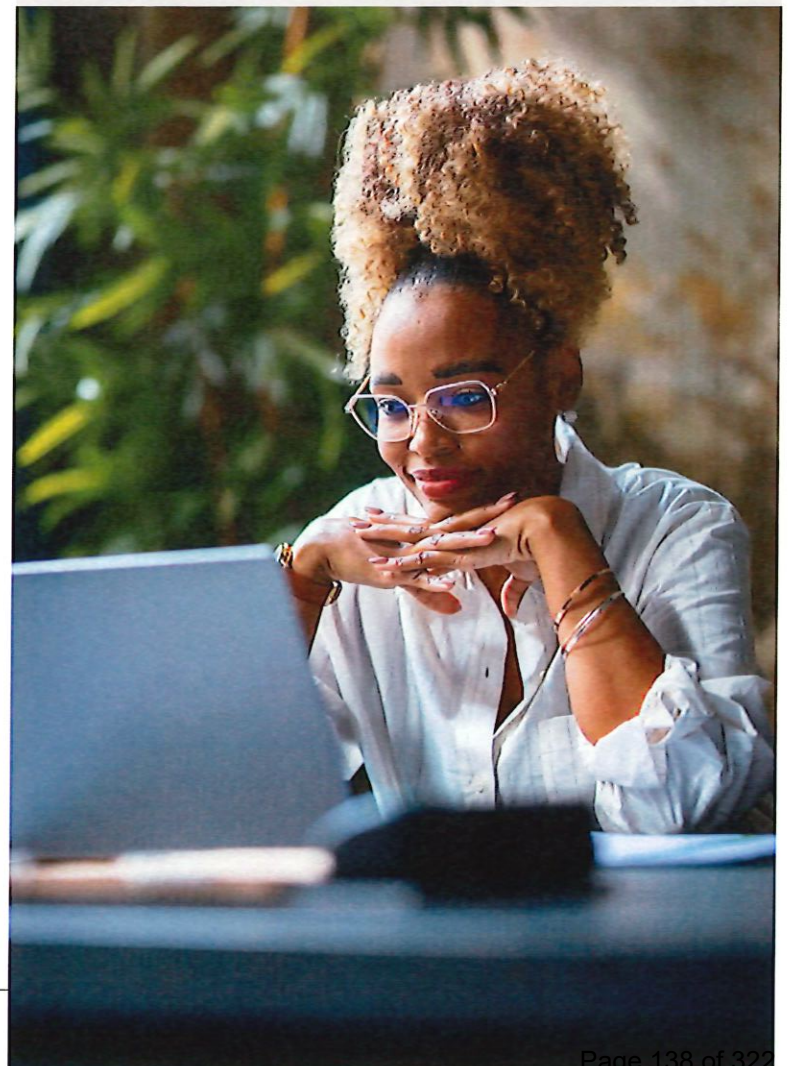
CMS

- Website themes
 - Website advanced search
 - Upcoming calendar events feed
 - Events calendar
 - Recent news
 - News listing page
 - News article detail page
 - Contact Directory
 - Alert banners & pop-ups
 - Embedded social media feeds
 - News subscriptions
 - Forms
-

CMS Back Office (Admin view)

- CMS access with single sign-on
 - Site builder
 - Preview mode editable across multiple device screens
 - Calendar events widget
 - News widget
 - News article
 - News subscriptions
 - Alerts
 - Contact Directory management
 - Landing pages
 - Search engine optimization (SEO)
-

Figure 1.2 - Govstack template





Part 4 PRODUCTS & SERVICES

Products & Services

	Name	Billing Frequency	Quantity	Unit Price	Total
1	Govstack CMS Starter - Implementation	One-Time	1	\$10,962.35	\$10,962.35
2	Govstack CMS Starter - Subscription	Annually	1	\$4,241.26 / year	\$4,241.26 / year
3	200 Page Content Migration	One-Time	1	\$0.00	\$0.00
				Annual subtotal	\$4,241.26
				One-time subtotal	\$10,962.35
				Total	\$15,203.61

Customer: City of De Pere, Wisconsin
 Contact: Amy Darnick, Administrative Assistant, adarnick@deperewi.gov, +19203394042 ext 1262
 Address: 335 South Broadway , De Pere Wisconsin, United States 54115

License Term: 36 months
 Payment Terms: Net 30 days, USD*Applicable taxes and annual increase the greater of 5% and Inflationary Index not included
 Quote Expiry Date: May 31, 2026

Additional Terms:
Option 2: Spread One-time Implementation over 5 years

- One-time Fee: N/A
- Annual Fee (Years 1-5): \$6,433.73
- Annual Fee (Years 6+): \$4,241.26

Questions? Contact me



Isaac Walker
Account Executive
isaac.walker@ghd.com
+15193403822

Statement of Work

1. Govstack Starter Plan (CMS + Events)

o Implementation:

This service provides the implementation of a new Govstack website with Content Management System (CMS) and Events functionality, based on the selected theme's default layout.

Scope:

Installation and Configuration: Installation and basic configuration of a new Govstack website utilizing the default layout of the client's chosen theme.

Local Identity Management: Configuration of Govstack's local identity management system for user accounts, providing single sign-on access to all Govstack applications. (Note: Azure AD integration for SSO is available as a separate AddOn.)

Delivery Coordination: Includes a kickoff meeting, a post-training meeting, and a closeout meeting to facilitate communication and project management.

Sample Sitemap and Navigation Tips: Provision of a sample sitemap from a similar organization and a tip sheet outlining best practices for site navigation.

Pre-recorded Training Video: Access to a pre-recorded "Writing for the Web" training video.

Training Webinars: Unlimited registration for regularly scheduled Govstack training webinars for users within the client's organization domain.

Knowledge Base Access: Access to the Govstack online Knowledge Base, containing product documentation and resources.

Go Live Activities: Support for go-live activities, with the website launch scheduled within four (4) months of the project kickoff meeting.

Exclusions:

Custom design or layout modifications beyond the selected theme's default.

Content creation or migration for the website.

Integration with third-party systems (except for optional Azure AD SSO).

On-site training or support (all training is virtual or via the Learning Centre).

Customization of the training webinars.

Go-live activities occurring beyond four (4) months of the kickoff meeting.

Deliverables:

A new Govstack website with CMS and Events functionality, based on the selected theme's default layout.
Configured local identity management system.
Sample sitemap and site navigation tip sheet.
Access to the pre-recorded "Writing for the Web" training video.
Access to regularly scheduled Govstack training webinars.
Access to the Govstack online Learning Centre.
Support for go-live activities within the specified timeframe.
Assumptions:

The client will select a website theme from the available Govstack options.
The client will provide necessary information for website setup and configuration.
The client will manage their own content creation and migration.
The client will utilize the provided training resources.
The client will be ready for go-live within four months of the kickoff meeting.
Note: This implementation plan provides a foundational Govstack website with CMS and Events capabilities, leveraging a theme-based approach and offering comprehensive training resources to get you started.

2. Govstack Starter Platform:

- o Use of GHD Govstack SSO for user accounts, enabling single identity access to all Govstack applications.
(Azure AD integration for Single Sign-On (SSO) is available as an add-on service.)
- o Maximum of 20 MAU (Monthly Active Users)
- o 50GB of storage (shared across all applications)
-Restrictions may apply to compatible add-ons with this subscription tier.

CMS:

- o Website Theme
- o Content Management
- o Site Builder
- o Google Search (3rd party fees apply)
- o News & Subscriptions

Events:

- o 2 Calendars
- o Available Views: Events, Council, and Tourism
- o Public Submission with approvals
- o Event email notifications

Govstack Enterprise Hosting:

- Govstack is hosted in Microsoft Azure with Geographic Zones
- Azure SQL Database
- Disaster Recovery
- High Availability Infrastructure
- Resource scaling
- Microsoft Defender for Cloud
- Traffic Management and DDoS Protection with Azure Front Door
- GHD issued SSL/TLS certificates Included through Azure Managed Certificates
- All products use GHD managed certificates with 256-bit encryption. GHD does not support customer issued certificates.
- Hosting Infrastructure Certifications: ISO 27001 and PCI-DSS

Basic Support Includes:

- Up to two (2) authorized support contacts.
- Access to Knowledge Base online and ticket portal: <https://support.govstack.com/>
- 24/7 Emergency Phone Support for Priority 1 Incidents after hours

Upgrade to Premium Support for: 6 support contacts, live phone support, priority incident escalation and resolution, dedicated Account Manager & more.

3. Migration of website content (up to 200 pages) from an existing site to Govstack, following a provided sitemap and including image/document transfer. Maintains existing page structure where possible, but does not address pre-existing broken links, errors, or accessibility issues. Integrations, modules, forms, calendar events, and news items are excluded unless otherwise agreed upon.



DIGITAL SOLUTIONS AGREEMENT →

Part 1 PURPOSE

Please see quote.

Part 2 ACCEPTANCE CRITERIA

Looks and functions like the selected theme and has been updated based on the logo and brand guidelines provided by the customer. Is responsive to different screen sizes and orientations. Is developed following the practices and guidelines outlined by the WCAG 2.1 level AA standard. All included products and AddOns are installed and configured based on the preferences confirmed by the customer during initiation. Blank pages and navigation based on the approved sitemap are setup. Training was provided for the CMS and all included products and AddOns. A GoLive Plan has been provided to the customer.

Part 3 DELIVERY SCHEDULE

Schedule will be provided upon approval of this Statement of Work.

Part 5 EXCLUSIONS, ASSUMPTIONS, AND ADDITIONAL TERMS

1. Exclusions

- Content writing, editing, or maintenance by GHD
- Sitemap creation or revisions by GHD unless included in quote
- User set-up and permission configuration by GHD
- Integrations into third-party software not identified in scope
- Additional products, modules, or features that are not included in the selected Govstack plan, or as Add Ons under this quote
- Website clean-up assistance such as adding/editing images, photo galleries, tables, accordions, and alt text, or fixing broken links, spelling mistakes, or content-related accessibility errors.

2. Assumptions

- Customer will choose from the library of available Govstack themes, and the website will be delivered with the standard homepage and interior page layout for that theme.
- Customer will use GHD's Identity Provider for user accounts
- Customer will be responsible for ensuring all content is accessible, including uploaded documents
- Delivery will include no more than 10 meetings between customer and GHD [Standard only]
- Close Out will be within 6 months of Kickoff
- If content migration see **Schedule A** <https://www.govstack.com/learning-centre/onboarding/content-migration/>

3. Additional terms

Update choice state of law to represent Wisconsin (previously California) - See section #20 of DSA below

Part 6 PAYMENT SCHEDULE

1. An invoice will be issued to the Customer by GHD for all Implementation or One-Time fees
30% on signing, 60% CMS Handoff, 10% on Go-Live
2. An invoice will be issued to the Customer by GHD for 1 Year's Annual fees
30 days following Effective Date of this Agreement.

*DSA does not include applicable taxes.

Part 7 CHANGE REQUESTS

The fees quoted are based on GHD executing the services on a specific, mutually agreed upon, schedule that allows both GHD and Customer reasonable time to perform their tasks. Any deviation from the scope or schedule could result in corresponding changes to the estimated price, dates, responsibilities, or other provisions of the project. Changes that have material impact to any of the foregoing will be accommodated with a Change Order form or a separate Statement of Work as deemed appropriate by both parties. GHD will make reasonable efforts to mitigate the costs associated with the change, with Customer bearing only that portion of costs that cannot be mitigated or otherwise avoided.

GHD's our attached Terms and Conditions are applicable to this Digital Solutions Agreement and incorporated herein by reference. The offer to perform the Statement of Work for the fees quoted shall expire if not accepted and signed by an authorized representative of Customer on Quote Expiry Date.

IN WITNESS WHEREOF, GHD and Customer have caused this Agreement to be executed by their authorized representatives as of the date of last signature below ("**Effective Date**").

Customer

GHD digital

All Carden, PMP | A GHD Principal
Vice President & Global Practice Director,
Products and Platforms

6. Data Security. GHD will maintain industry standard administrative, technical, and physical safeguards, including but not limited to PCI DSS and ISO 27001 compliance, to protect the security and privacy of Customer Data, in use, in transit, and at rest. These safeguards include, but are not limited to, implementation of adequate privacy and security policies and data breach response plans that comply with industry standards and the requirements of applicable laws and the regulatory agencies responsible for enforcing them. If either Party becomes aware of any unauthorized access to or breach of the Products which includes Customer Data ("Security Incident"), such Party will promptly notify the other in writing of the Security Incident and include the following information: (i) the nature of the Personal Information compromised and how the Security Incident occurred; (ii) the timing of the Security Incident; (iii) the steps taken by the impacted Party to resolve the Security Incident; and (iv) the measures to be undertaken and implemented to prevent a recurrence of the Security Incident. In the event of a Security Incident, GHD reserves the right to shut down the Product(s) to protect the Parties with reasonable notice to Customer and with no liability to GHD for these or other remedial actions.

7. Term and Payment. (a) The term of the license granted to Customer shall be set forth in the DSA and shall continue until the Agreement is terminated or expires pursuant to Section 15. Unless otherwise provided for in the DSA, upon expiration of the initial term, the term may be renewed for additional one (1) year terms by executing a written order. GHD reserves the right to non-materially update these Terms at the expiration of each term. (b) Beginning on the first-year anniversary of the Effective Date and on each succeeding anniversary of the Effective Date during the term of this agreement, and for each renewal term, GHD shall include a price increase in accordance with the Economic Price Adjustment (EPA) Clause I-FSS-969 (b)(1) will reference the highest increase as noted on the Employment Cost Index Summary by the Bureau of Labor Statistics: <https://www.bls.gov/news.release/eci.nr0.htm>, which for budgeting purposes and transparency averages 5% per annum. Continued use of the Product beyond the expiration date shall be considered acceptance of the Terms. (c) GHD shall invoice Customer on a periodic basis for the applicable fees as set forth in the DSA. Customer agrees to pay such invoices within thirty (30) calendar days after the receipt date of the applicable invoice. Unpaid invoices will be subject to the interest rate established by the Secretary of the Treasury as provided in [41 U.S.C. 7109](#), which is applicable to the period in which the amount becomes due, and then at the rate applicable for each six-month period as fixed by the Secretary until the amount is paid. (d) GHD shall provide Customer with notice of the unpaid invoices. (e) GHD shall state separately on invoices taxes excluded from the fees, and the Customer agrees either to pay the amount of the taxes (based on the current value of the equipment) or provide evidence necessary to sustain an exemption, in accordance with 552.212-4(k).

8. Customer Responsibilities. (a) Customer shall license all third party software and obtain all hardware, at Customer's sole expense, that may be needed for Customer to operate the Products. (b) Customer shall abide by all laws, regulations, and ordinances applicable to the use of the Product, and the terms of this Agreement. Customer assumes responsibility for all acts or omissions of its Authorized End Users and agrees to indemnify and hold GHD harmless from any claim howsoever arising from the acts or omissions of its Authorized End Users. (c) Customer shall comply with any demand by GHD to correct, discontinue, or remedy any violation of applicable laws, or regulations, pertaining to Customer Data or any other content collected or used by the Products. (d) Customer may subscribe and consent to receive outage notifications, release notes, and/or other marketing material from GHD. Failure to subscribe may result in Customer not receiving information relevant to their use of the Product. (e) Unless the Customer utilizes Single Sign On ("SSO") where Customer manages their own active directory, Customer will promptly provide to GHD a list of names and other requested information to register each Administrative User to use the Products and shall notify GHD in writing as to any changes including termination of the Administrative Users. Each Administrative User will have a unique User ID for his or her access to the Products which cannot be shared nor transferred. Customer will adopt and maintain such security precautions for User IDs to prevent their disclosure to and use by unauthorized persons and will promptly take steps to remove access for such unauthorized persons and notify GHD if the security or integrity of a User ID or password has been compromised. The number of Administrative Users licensed shall be as set forth in the DSA. Customer may permanently reassign an Administrative User license from one individual to another individual by (1) notifying GHD of the Administrative User whose use of the Products is being terminated and (2) the individual to whom the Administrative User license will be reassigned. Each additional Administrative User may require an additional fee, the amount for which is specified in the DSA.

9. Change Order. Customer may request a modification to the DSA by written request to GHD. The requested changes will become effective only when a change order which describes the scope of the changes, the timing for the performance of any Services, and any fees resulting from the changes is executed by authorized representatives of both parties ("Change Order"). Upon execution, a Change Order will become part of this Agreement.

10. Product Customization. a.(i) GHD may provide services or Product customization ("Deliverables") set forth in the DSA. (ii) In the event that the DSA provides Deliverables to Customer for evaluation or test purposes (e.g., demo, test, or trial-versions), the Customer's right to use such version is limited to (i) internal evaluation or test purposes by Customer and, where applicable, (ii) the time period specified by GHD during implementation planning ("User Acceptance Testing" or "UAT"). Any Productive Use is strictly prohibited. "Productive Use" means an environment in which Deliverables are used for Customer's business purposes and not for test purposes. All major upgrades,

and new systems must be tested by the appropriate users prior to installation of the software in production ("Production"). UAT plans include tests of all major functions, processes, and interfacing systems. Use of the Deliverables pursuant to this section may be subject to functional restrictions and any use is at the Customer's own risk. GHD disclaims all liability arising from use of the Deliverables during UAT. (iii) Unless otherwise provided, Customer shall inspect Deliverables and conduct an acceptance test for a period of time specified by GHD ("Acceptance Period"). Customer shall review and inspect the Deliverables and shall either (i) provide acceptance or (ii) provide GHD with notice that the Deliverables do not conform to the DSA ("Deficiency"). Within thirty (30) business days of such notice GHD will provide a response or a plan of remedial action to Customer's notice of Deficiency and extend the Acceptance Period. Failure to provide notice of acceptance or rejection or a Deficiency statement to GHD at the end of the Acceptance Period constitutes acceptance by Customer. Upon acceptance, an invoice will be issued for any annual fees due and for any unpaid one-time implementation fees per the DSA. In the event the Customer finds the Deliverables do not conform to the DSA, within ninety (90) business days following acceptance, GHD will take commercially reasonable steps to remedy the Deliverables. After ninety (90) business days, any Deficiencies in the Deliverables will be remedied by GHD using commercially reasonable efforts at Customer's expense to be billed on a time and material basis pursuant to a Change Order. GHD shall retain all IP and Intellectual Property Rights in the Deliverables created by GHD under this Product Customization provision.

11. Equipment. GHD will not furnish equipment or materials necessary for the Product to Customer and its Authorized End Users, except as expressly provided in the DSA ("Equipment"). If Equipment is provided to Customer by GHD, all Equipment is the sole and exclusive property of GHD. Customer agrees to promptly deliver Equipment, at Customer's cost and risk of loss, to GHD at the end of the license term or earlier, as requested by GHD.

12. End User Terms. The Customer agrees that it's Authorized End-Users will abide by this End User Licensing Agreement (EULA): **12.1 You are responsible for keeping your user ID, password, and account information private and confidential. The obligation of confidentiality shall survive the termination of this Agreement. 12.2 You shall not input or provide content that could be subject to government regulation, content that may require enhanced security measures, or personal data into the Website, without obtaining prior written consent or direction from the Site Owner. 12.3 You authorize the Site Owner to store, process and use Your contact information and account data for business dealings with You. 12.4 The Website is to be used solely for the legitimate purposes intended by the Site Owner. 12.5 You shall not copy, reproduce, translate, adapt, vary, modify, decompile, disassemble, or reverse engineer the Website, nor assign, license, sublicense, sell, rent, loan or otherwise provide the Website in whole or in part or in any form or variation to any person. 12.6 You acknowledge that all intellectual property rights in the Website are the property of the Site Owner or its vendors and nothing in this Agreement implies the transfer of any such rights to You. 12.7 You may not, through its own operations, circumvent user authentication or security of any host, network, or account, cause disturbances, outages or other problems which may affect the Site Owner's network or network-based equipment, or which may adversely affect the Site Owner's ability to provide the Website. 12.8 The Site Owner reserves the right to, at its sole determination and without notice, remove any material or data and to block the use of the network for one or more users when their use or purpose does not meet these Terms. 12.9 You may not use the Website to access any computer systems, software, data or any confidential, copyright protected or patent protected material of any other person without the knowledge and consent of such person, make unauthorized attempts to gain access to any account or computer resource not belonging to You (i.e., engage in "spoofing") or otherwise gain unauthorized access to, alter or destroy any information of another person by any means or device. 12.10 You may not use the Website to upload, post, publish, deface, modify, transmit, reproduce, or distribute in any way, information, software, or other material which is confidential, protected by copyright or other intellectual, property or proprietary right, or related derivative works, without obtaining permission of the copyright owner or right holder.**

13. Third Party Integrations Fees. Product may be used by Customer in conjunction with one or more third party services. Customer's use of third-party services in conjunction with the Product may be subject to separate fees and Third Party Terms. The functionality of third party integrations may be limited by the availability of data sources from third parties and access to data sources from the third party's vendors. In the event Customer requests third party services be integrated into the Product, the Services required will be addressed through a Change Order, which will be subject to a third party integration fee.

14. Default. Customer shall be in "Default" if (i) Customer or its Authorized End User breaches any of the terms of this Agreement, (ii) GHD has reasonable grounds to believe that Customer or an Authorized End User is in breach of this Agreement, or (iii) there is the institution by or against Customer of insolvency, receivership, bankruptcy proceedings or upon Customer ceasing to do business. If GHD reasonably believes Customer to be in Default, GHD shall provide Customer with notice of the nature of such Default. When the End User is an instrumentality of the U.S., recourse against the United States for any alleged breach of this Agreement must be brought as a dispute under the contract Disputes Clause (Contract Disputes Act). During any dispute under the Disputes Clause, GHD shall proceed diligently with performance of this Agreement, pending final resolution of any request for relief, claim, appeal, or action arising under the Agreement, and comply with any decision of the Contracting Officer.

GHD shall be in Default if (i) GHD breaches any of the terms of this Agreement, or (ii) insolvency, receivership, bankruptcy proceedings initiated by GHD or upon GHD ceasing to do business. If GHD is in Default, Customer shall provide GHD with notice of the nature of such Default. If a Default, other than a breach of the Warranty obligations in Section 16 of these Terms, has not been cured by GHD within thirty (30) days of such notice, Customer shall have the right to terminate Customer's license to access the Products without further liability for payment, provided all amounts due GHD prior to the Default have been paid. If a Default is a breach of the Warranty obligations in Section 16 of these Terms and such Default has not been cured by GHD within one hundred twenty days (120) days of such notice, Customer shall have the right to suspend payment due GHD until such Default is cured. If GHD is unable to cure the Default, GHD shall be entitled to terminate this Agreement.

15. Termination and Suspension. The provision of the Products shall expire as set forth in the DSA. Upon expiration or earlier termination of this Agreement, Customer shall immediately discontinue use of the Product. No expiration, termination, or suspension will affect Customer's obligation to pay all fees due pursuant to the DSA. Customer shall have no right to a refund of any previously paid fees. Any suspension of access to the Products resulting from a Default shall not constitute a termination of the Agreement. Customer's access to the Products shall resume upon Customer no longer being in Default, and upon payment by Customer any costs directly related to the restoration of access to the Products. GHD shall have the right to terminate this agreement as set forth in other provisions of this Agreement.

16. Warranty. (a) GHD warrants the functionality of the Product as set forth in the SLA and that the Product will meet applicable accessibility laws in place during the term of this Agreement, except that GHD has no responsibility to monitor or correct any content provided, generated, or uploaded by Customer. (b) Customer understands that the Product, or some features thereof, may be temporarily or permanently discontinued, changed, upgraded, improved, or limited, with reasonable notification to Customer. If, as a result of these changes, the Product is no longer supported by GHD, its vendors, or third parties, GHD shall have the right to terminate portions of, or the entire Agreement. (c) Customer acknowledges that use of the Products is at Customer's own risk, except as otherwise provided herein. GHD is not responsible for protection or privacy of information transferred through the Internet or any other network Customer may utilize. Sensitive data may be protected with the use of encryption that does not violate any governing laws or regulations. Customer acknowledges that GHD has no control over and accepts no responsibility for Customer Data hosted by Customer. (D) EXCEPT AS EXPRESSLY SET OUT IN SECTION 16(a), THE PRODUCTS ARE PROVIDED "AS IS" AND WITHOUT WARRANTIES, GUARANTIES, OR REPRESENTATIONS OF ANY KIND, EXPRESSED OR IMPLIED, AT COMMON LAW, BY COURSE OF CONDUCT OR USAGE IN THE TRADE, INCLUDING BUT NOT LIMITED TO ANY WARRANTIES REGARDING ACCURACY, COMPLETENESS, MERCHANTABILITY, OR FITNESS FOR ANY PARTICULAR USE OR PERFORMANCE. GHD DOES NOT WARRANT THAT THE PRODUCTS WILL MEET ALL OF CUSTOMER'S REQUIREMENTS OR THAT IT WILL OPERATE IN ALL COMBINATIONS WHICH MAY BE SELECTED FOR USE BY CUSTOMER OR THAT THE OPERATION OF THE PRODUCTS WILL BE ERROR FREE OR UNINTERRUPTED OR THAT ANY DEFECTS IN THE PRODUCTS WILL BE CORRECTED OR THAT ANY DATA IS COMPLETE OR WHOLLY ACCURATE, OR THAT THE PRODUCTS WILL FUNCTION WITHOUT FAILURE OR INTERRUPTION. (E) UPON CUSTOMER NOTIFYING GHD OF ANY ERRORS, BUGS, OR OTHER PROBLEMS IN THE PRODUCTS, GHD'S SOLE AND EXCLUSIVE RESPONSIBILITY WILL BE TO PROVIDE COMMERCIALY REASONABLE EFFORTS TO CORRECT SUCH PROBLEMS TO THE EXTENT COMMERCIALY FEASIBLE. (e) The Products may contain Third Party Content. Customer acknowledges and agrees that GHD is not responsible or liable for: (i) the availability or accuracy of such Third Party Content. Links to or use of Third Party Content does not imply any endorsement by GHD of the Third Party Content. Customer has the sole responsibility for and assumes all risk arising from Customer's use of any such Third Party Content. Customer further acknowledges that Customer's use of Third Party Content will be subject to the Third Party Terms applicable to such content.

17. Indemnification. (a) GHD agrees to indemnify and hold harmless Customer from and against losses, damages, liabilities, and expenses (including reasonable legal fees, court costs, and costs of investigation) to the extent they are caused by the gross negligence or willful misconduct of GHD or based on a claim that the Products infringe on any patent, copyright, trademark, or other intellectual property right of a third party; provided however, that GHD shall have no liability or obligation if the claim arises from (i) any alteration or modification to the Products by Customer or any third party not specifically authorized by GHD, (ii) any combination of the Products by Customer with other programs or data not furnished by GHD; or (iii) any use of the Products by Customer or its Authorized End Users that is prohibited by the EULA or is otherwise outside the permitted of use for which the Products are intended. Nothing contained herein shall be construed in derogation of the U.S. Department of Justice's right to defend any claim or action brought against the U.S., pursuant to its jurisdictional statute 28 U.S.C. §516. (b) Notwithstanding anything to the contrary contained or implied herein, the GHD Indemnitees (defined below) shall have no liability for any damages, whatsoever relating to the tools, third party software, third party products, or any products or services not developed or provided by GHD. (c) Reserved.

18. Limitation of Liability. (a) TO THE MAXIMUM EXTENT PERMITTED BY LAW, FOR ANY DAMAGE CAUSED BY NEGLIGENCE, INCLUDING ERRORS, OMISSIONS, OR OTHER ACTS; OR FOR ANY DAMAGES BASED IN CONTRACT; OR FOR ANY OTHER CAUSE OF ACTION OR THEORY OF LIABILITY; THE GHD INDEMNITEES' LIABILITY

SHALL BE LIMITED TO THE AMOUNT ACTUALLY PAID BY CUSTOMER TO GHD DURING THE TWELVE (12) FULL CALENDAR MONTHS IMMEDIATELY PRECEDING THE MONTH IN WHICH THE EVENT UPON WHICH LIABILITY IS PREDICATED FOR THE PRODUCTS PROVIDED BY GHD HEREUNDER. (b) EXCEPT AS EXPRESSLY SET OUT HEREIN, THE GHD INDEMNITEES SHALL NOT BE LIABLE TO CUSTOMER, TO ANYONE CLAIMING BY, THROUGH OR UNDER CUSTOMER, OR TO ANY THIRD PARTY FOR ANY LIABILITY, EXPENSE, INJURY, CLAIM, PENALTY, FINE, INTEREST, OR CAUSE OF ACTION WHATSOEVER OR HOWSOEVER ARISING, INCLUDING, WITHOUT LIMITATION, ANY LOSS OR DAMAGE, INDIRECT, SPECIAL, INCIDENTAL, CONSEQUENTIAL, PUNITIVE, OR EXEMPLARY, OR FOR LOSS OF PROFIT OR REVENUES, BUSINESS INTERRUPTION, CONTRACT, GOODWILL, OR OTHER BUSINESS OR ECONOMIC LOSS, OR FOR LOST OR DAMAGED DATA, THE AVAILABILITY OF DATA, OR DAMAGE TO NETWORK, COMPUTER, SERVER, OR THE PRODUCTS. THE FOREGOING LIMITATION OF LIABILITY SHALL NOT APPLY TO (1) PERSONAL INJURY OR DEATH RESULTING FROM LICENSOR'S NEGLIGENCE; (2) FOR FRAUD; OR (3) FOR ANY OTHER MATTER FOR WHICH LIABILITY CANNOT BE EXCLUDED BY LAW.

19. Dispute Resolution. Both Parties agree in good faith to attempt to resolve amicably, without litigation, any dispute arising out of or relating to this Agreement provided hereunder. The matter may be submitted to the judicial system set forth in Section 20.

20. Choice of Law. The Federal laws of the United States and the laws of the State of California shall apply in accordance with and to the extent consistent with GSAR Clause 552.238-114 Use of Federal Supply Schedule Contracts by Non-Federal Entities (May 2019) shall govern this Agreement, without reference to conflicts of law rules or principle. Both GHD and Customer specifically disclaim the application of the UN Convention on Contracts for the International Sale of Goods to the interpretation or enforcement of this Agreement. Customer shall bring any action, suit, or other legal proceeding to enforce, directly or indirectly, this Agreement or any right based upon it exclusively in such courts.

21. Contracting Entity. The term GHD Digital used herein is a marketing name for the entities licensing the Product. For Customers located in the United States of America, the Product is licensed from GHD Services Inc, a Delaware corporation with offices at 2055 Niagara Falls Blvd., Niagara Falls, NY 14304, USA. For Customers located in the Canada, the Product is licensed from GHD Digital (Canada) Limited, formerly eSolutions Group Limited, an Ontario corporation with offices at 455 Phillip St., Waterloo, ON, N2L 3X2, CA.

22. Force Majeure. In accordance with GSAR 552.212-4(f), GHD will not be liable for any delay or failure to perform any obligation under this Agreement where the delay or failure results from any unforeseen or unavoidable cause reasonably beyond the affected Party's control ("Force Majeure"). Force Majeure may include, but is not limited to natural events, pandemic, labor, or civil disruption, governmental or legislative actions, or orders of any court or agency having jurisdiction of the Party's actions.

23. Notice. Notices pertaining to this Agreement shall be in writing and deemed to have been duly given if delivered by email to the respective Party's contact identified in the Agreement, or at such other address as may be changed by either Party by giving written notice thereof to the other. All notices to GHD pertaining to this Agreement shall be delivered to digital-legal@ghd.com.

24. Insurance. GHD agrees to carry throughout the Term of this Agreement insurance coverage appropriate to its Products and Services. The certificates of insurance, incorporated herein by reference, confirm GHD's policy details for its commercial general liability, technology professional liability, and cyber liability insurance in effect at the Effective Date. Upon Customer's request, GHD will provide certificates of insurance stating Customer as a certificate holder.

25. Service Levels. The Product will meet or exceed the minimum service level standards set out in the Service Level Agreement ("SLA"), subject to change without notice, published at https://www.ghd.com/en/resources/trustcenter/ServiceLevelAgreement_1_0.pdf and incorporated into this Agreement.

26. Piggyback Clause. This Agreement may be used by other institutions (such as state, province, local and/or public corporations or agencies) who express an interest in piggybacking on this contract in accordance with the terms and conditions of this Agreement at the pricing offered by GHD to Customer at the time of piggybacking. GHD agrees that Customer shall bear no responsibility or liability for any agreements between GHD and the other Institution(s) who desire to exercise this option.

27. General. (a) Third Party beneficiaries. This Agreement does not and is not intended to confer any rights or remedies upon any person other than the Parties. (b) Waiver. No failure or delay by either Party in exercising any right, power or privilege hereunder will operate as a waiver thereof, nor will any single or partial exercise of any such right, power, or privilege preclude any other or further exercise thereof. (c) Successors and Assignment. Customer may not assign, sublet, or transfer any rights under or interest (including, but without limitation, monies that are due or may become due) in this Agreement without the written consent of GHD. The obligations of the Parties under this Agreement will not terminate upon any attempted assignment that violates this Agreement. Any assignment or attempted assignment violating this Agreement is void. (d) Severability and Survival. The Parties agree that, in the event one or more of the provisions or a portion thereof of this Agreement should be declared void or unenforceable, the remaining provisions shall not be affected and shall continue in full force and effect. The Parties also agree that the obligations and representations, indemnifications, or limitations of liability contained within

this Agreement shall survive the termination of this Agreement. (e) Authority. Customer represents and warrants that the individual accepting this Agreement is doing so with full and complete authority to bind Customer on whose behalf they are acting to every term of this Agreement. Acceptance of this Agreement signifies that Customer has read and agrees with all terms and conditions referenced in this Agreement. (f) Entire Agreement. The DSA, these Terms, and any documents referenced in either document constitute the complete and final agreement between GHD and Customer regarding the subject matter hereof. This Agreement supersedes all prior or contemporaneous communications, representations, undertakings, or understandings of the Parties, whether oral or written, relating to the DSA or the Products. Modifications of this Agreement shall not be binding unless made in writing and signed by an authorized representative of each Party.

GENERAL SERVICES ADMINISTRATION

Federal Acquisition Service

Authorized Federal Supply Schedule FSS Price List

On-line access to contract ordering information, terms and conditions, up-to-date pricing, and the option to create an electronic delivery order are available through GSA *Advantage!*®, a menu-driven database system. The INTERNET address GSA *Advantage!*® is: GSAAdvantage.gov.

Multiple Award Schedule

FSC Group: Information Technology FSC Class:
Contract number: 47QTCA25D006J

Contract period: Mar 13, 2025 – Mar 12, 2030



GHD Services Inc
2055 Niagara Falls Blvd.
Niagara Falls, NY 14304
Phone: 519-340-3805

Contractor's internet address/web site where schedule information can be found at:
<https://www.gsaelibrary.gsa.gov/>

Contract administration source:
Cody Petrosino
Phone: 519-340-3805
Email: cody.petrosino@ghd.com

Business size: Small Business.

For more information on ordering from Federal Supply Schedules visit the following website:
<http://www.gsa.gov/schedules/>

*This is the MOST RECENTLY awarded Contractor Initiated Modification and does NOT include any Mass Modifications
Prices Shown Herein are Net (discount deducted)

GOVSTACK by GHD DIGITAL
DIGITAL SOLUTIONS AGREEMENT

City proposed revisions to Agreement

PRODUCTS & SERVICES

Payment Terms: Net 30 days, USD* Applicable taxes and annual increase of no greater than 5% not included

DIGITAL SOLUTIONS AGREEMENT

Part 2 ACCEPTANCE CRITERIA

Looks and functions like the selected theme and has been updated based on the logo and brand guidelines provided by the customer. Is responsive to different screen sizes and orientations. Is developed following the practices and guidelines outlined by the WCAG 2.1 level AA standard. Accordingly, GHD certifies its Products and AddOns are compliant with the WCAG 2.1 level AA standard, as it may be amended or revised from time to time. All included products and AddOns are installed and configured based on the preferences confirmed by the customer during initiation. Blank pages and navigation based on the approved sitemap are setup. Training was provided for the CMS and all included products and AddOns. A GoLive Plan has been provided to the customer.

Terms and Conditions

7. Term and Payment. (b) Beginning on the first-year anniversary of the Effective Date and on each succeeding anniversary of the Effective Date during the term of this agreement, and for each renewal term, GHD shall include a price increase no greater than 5% per annum.

17. Indemnification. (a) GHD agrees to indemnify and hold harmless Customer from and against losses, damages, liabilities, and expenses (including reasonable legal fees, court costs and costs of investigation) directly or indirectly caused, occasioned, or contributed to in whole or in part, by reason of any act, omission, fault, or negligence, whether active or passive, of GHD, or of anyone acting under their direction or control or

on their behalf, to the extent the liability results from the negligence of GHD or based on a claim that the Products infringe on any patent, copyright, trademark, or other intellectual property right of a third party; provided however, that GHD shall have no liability or obligation if the claim arises from (i).....

18. Limitation of Liability. Reserved.

24. Insurance. GHD agrees to carry throughout the Term of this Agreement insurance coverage appropriate to its Products and Services. The certificates of insurance incorporated herein by reference, confirm GHD's policy details for its commercial general liability, technology professional liability, and cyber liability insurance in effect at the Effective Date. Upon Customer's request, GHD will provide certificates of insurance stating customer as an additional insured.

CITY OF DE PERE MEMO



To: James Boyd, Mayor
City of De Pere Finance/Personnel Committee Members
From: Andrew Pantzlaff, Communications & Marketing Manager
Date: April 9, 2026

RE: Consideration and Possible Action to enter into a contract for website vendor with GovStack.

Background

Due to the upcoming discontinuation of our current website provider, EGOV, which the City was informed of on January 5, 2026, we will need to transition to a new platform. While this is an unplanned project for our staff, it creates a rare opportunity to modernize and overhaul one of the City's most important public-facing services. Our website serves as one of our primary access points for residents, businesses, and visitors to find information, use services, and connect with the City.

Staff from Communications and IT conducted a thorough vendor review process, evaluating multiple options through demos, pricing comparisons, and internal discussions with department leaders to identify key needs and eliminate unnecessary costs. In the end, three primary vendors were considered: GovStack, Revize, and CivicPlus.

VENDOR	YEAR 1/MIGRATION	YEAR 2-ONGOING	
GovStack	\$15,204	\$4,742	
Revize	\$16,750	\$3,000	
Civic Plus	\$39,961.75	\$9,385	

Overview

Based on our review, staff recommend GovStack as the best overall option. It provides a strong balance of cost-effectiveness and functionality, while offering the most intuitive interface for staff. This will allow more employees to update content without technical expertise, reducing bottlenecks and improving efficiency across departments.

GovStack's first-year cost would be \$15,204, which includes CMS implementation and our starter subscription. Year 2 and ongoing will be a cost of \$4,742 annually, which includes an ADA overlay. While

GovStack has a higher annual ongoing fee than Revize, we believe it provides the best solution for the City for the following reasons:

- **Cost-effective compared to alternatives.** In the current economic climate, a price increase was expected transitioning to a new vendor. However, GovStack remains significantly less expensive—sometimes half the cost—of several higher-end options.
- **Robust features.** GovStack offers some of the most comprehensive tools and capabilities among all vendors reviewed. This system makes it easy for staff to update the website without any technical background. We would obtain a broader range of staff permissions, and an enhanced ability to edit pages, organize menus, post news and alerts, and organize content.
- **Major efficiency improvements.** Admittedly, one of the pain points of our current vendor we've used for many years, is that it had an often challenging, limiting interface for staff, with cumbersome workarounds for simple steps. GovStack, by far, had the most intuitive interface we explored while looking to rectify this issue. Their offerings will open up possibilities where a wider range of staff can update and manage content directly, reducing bottlenecks, interdepartmental delays, and reliance on a small number of staff for routine updates. By removing workflow barriers and making processes considerably easier, staff will be able to recover lost time spent on minor website updates and turn that attention to other projects and tasks. This recovered time makes the annual fee more than worth it compared to Revize.
- **Improved resident user experience.** GovStack provides long-desired functionality that will help consolidate and streamline access to important City services and frequently requested information. It reduces clutter and bloat that were unavoidable in our current platform. Staff will also have greater flexibility to create content, rearrange modules, and customize department pages based on their unique services and programs. These improvements should significantly enhance the web experience for residents and businesses, supported by better navigation and improved search functionality.
- **Strong design and aesthetics.** GovStack's visual quality was among the most impressive reviewed, supporting De Pere's goal of maintaining a high standard of digital presentation and remaining a regional leader in online communication.
- **Meaningful ADA and accessibility improvements.** GovStack provides tools and training that help staff better serve residents with visual impairments, cognitive disabilities, and other accessibility needs. Our package includes an ADA website overlay tool—something we have not offered before—which gives residents more control over how they access and view content. On the staff side, GovStack's built-in accessibility scanner highlights and explains issues directly as editors create or update pages, helping us achieve better ADA compliance during content creation. Staff will also have access to virtual training, scheduled webinars, and other resources to provide a broad roster of City staff members the knowledge and support needed to improve our accessibility over time.

- **Significant time savings through content migration.** GovStack’s migration bot will allow a substantial portion of our existing content to be moved into the new system quickly. This is especially valuable given the unplanned nature of this major website overhaul and will save staff considerable time during the transition.

Staff Recommendation

Staff recommends moving forward with GovStack as the City of De Pere website provider. If the Finance and Personnel Committee recommends approval, the appropriate documents will be prepared and brought to Council for review.

Funding to cover the first-year fees, \$15,204, are requested from unassigned reserves. Future year costs will be included in the budget.



Part 4 **PRODUCTS & SERVICES**

Products & Services

	Name	Billing Frequency	Quantity	Unit Price	Total
1	Govstack CMS Starter - Implementation	One-Time	1	\$10,962.35	\$10,962.35
2	Govstack CMS Starter - Subscription	Annually	1	\$4,241.26 / year	\$4,241.26 / year
3	200 Page Content Migration	One-Time	1	\$0.00	\$0.00
Annual subtotal					\$4,241.26
One-time subtotal					\$10,962.35
Total					\$15,203.61

Customer: City of De Pere, Wisconsin
 Contact: Amy Darnick, Administrative Assistant, adarnick@deperewi.gov, +19203394042 ext 1262
 Address: 335 South Broadway , De Pere Wisconsin, United States 54115

License Term: 36 months
 Payment Terms: Net 30 days, USD*Applicable taxes and annual increase the greater of 5% and Inflationary Index not included
 Quote Expiry Date: May 31, 2026

Additional Terms:
Option 2: Spread One-time Implementation over 5 years

- One-time Fee: N/A
- Annual Fee (Years 1-5): \$6,433.73
- Annual Fee (Years 6+): \$4,241.26

Questions? Contact me



Isaac Walker
Account Executive
isaac.walker@ghd.com
+15193403822

Statement of Work

1. Govstack Starter Plan (CMS + Events)

o Implementation:

This service provides the implementation of a new Govstack website with Content Management System (CMS) and Events functionality, based on the selected theme's default layout.

Scope:

Installation and Configuration: Installation and basic configuration of a new Govstack website utilizing the default layout of the client's chosen theme.

Local Identity Management: Configuration of Govstack's local identity management system for user accounts, providing single sign-on access to all Govstack applications. (Note: Azure AD integration for SSO is available as a separate AddOn.)

Delivery Coordination: Includes a kickoff meeting, a post-training meeting, and a closeout meeting to facilitate communication and project management.

Sample Sitemap and Navigation Tips: Provision of a sample sitemap from a similar organization and a tip sheet outlining best practices for site navigation.

Pre-recorded Training Video: Access to a pre-recorded "Writing for the Web" training video.

Training Webinars: Unlimited registration for regularly scheduled Govstack training webinars for users within the client's organization domain.

Knowledge Base Access: Access to the Govstack online Knowledge Base, containing product documentation and resources.

Go Live Activities: Support for go-live activities, with the website launch scheduled within four (4) months of the project kickoff meeting.

Exclusions:

Custom design or layout modifications beyond the selected theme's default.

Content creation or migration for the website.

Integration with third-party systems (except for optional Azure AD SSO).

On-site training or support (all training is virtual or via the Learning Centre).

Customization of the training webinars.

Go-live activities occurring beyond four (4) months of the kickoff meeting.

Deliverables:

A new Govstack website with CMS and Events functionality, based on the selected theme's default layout.
Configured local identity management system.
Sample sitemap and site navigation tip sheet.
Access to the pre-recorded "Writing for the Web" training video.
Access to regularly scheduled Govstack training webinars.
Access to the Govstack online Learning Centre.
Support for go-live activities within the specified timeframe.
Assumptions:

The client will select a website theme from the available Govstack options.
The client will provide necessary information for website setup and configuration.
The client will manage their own content creation and migration.
The client will utilize the provided training resources.
The client will be ready for go-live within four months of the kickoff meeting.
Note: This implementation plan provides a foundational Govstack website with CMS and Events capabilities, leveraging a theme-based approach and offering comprehensive training resources to get you started.

2. Govstack Starter Platform:

- o Use of GHD Govstack SSO for user accounts, enabling single identity access to all Govstack applications.
(Azure AD integration for Single Sign-On (SSO) is available as an add-on service.)
- o Maximum of 20 MAU (Monthly Active Users)
- o 50GB of storage (shared across all applications)
-Restrictions may apply to compatible add-ons with this subscription tier.

CMS:

- o Website Theme
- o Content Management
- o Site Builder
- o Google Search (3rd party fees apply)
- o News & Subscriptions

Events:

- o 2 Calendars
- o Available Views: Events, Council, and Tourism
- o Public Submission with approvals
- o Event email notifications

Govstack Enterprise Hosting:

- Govstack is hosted in Microsoft Azure with Geographic Zones
- Azure SQL Database
- Disaster Recovery
- High Availability Infrastructure
- Resource scaling
- Microsoft Defender for Cloud
- Traffic Management and DDoS Protection with Azure Front Door
- GHD issued SSL/TLS certificates Included through Azure Managed Certificates
- All products use GHD managed certificates with 256-bit encryption. GHD does not support customer issued certificates.
- Hosting Infrastructure Certifications: ISO 27001 and PCI-DSS

Basic Support Includes:

- Up to two (2) authorized support contacts.
- Access to Knowledge Base online and ticket portal: <https://support.govstack.com/>
- 24/7 Emergency Phone Support for Priority 1 Incidents after hours

Upgrade to Premium Support for: 6 support contacts, live phone support, priority incident escalation and resolution, dedicated Account Manager & more.

3. Migration of website content (up to 200 pages) from an existing site to Govstack, following a provided sitemap and including image/document transfer. Maintains existing page structure where possible, but does not address pre-existing broken links, errors, or accessibility issues. Integrations, modules, forms, calendar events, and news items are excluded unless otherwise agreed upon.



Request for Common Council Action

Meeting Date: May 19, 2026
Department: Public Works
From: Thomas Blohowiak , Maintenance Supervisor
Subject: Resolution #26-39 Authorizing Utility Easement for Wisconsin Public Service (925 South Sixth Street; Parcel WD-142).
Recommendation: Motion to approve.

The Board of Public Works voted unanimously to recommend approval of this item at its May 11, 2026 meeting.

Attachments:
Reso26-39, 2026 0511 CI_BOPW_Project_26-16_Proposed_Easement

RESOLUTION #26-39

AUTHORIZING UTILITY EASEMENT FOR WISCONSIN PUBLIC SERVICE
(925 South Sixth Street; Parcel WD-142)

WHEREAS, as part of the Municipal Service Center expansion project (26-16), the City is requesting a new transformer on site at 925 South Sixth Street; and

WHEREAS, in order to complete construction of the new transformer, Wisconsin Public Service is in need of a 12-foot-wide utility easement to run the necessary wires; and

WHEREAS, this matter has been reviewed by the Board of Public Works which recommends approval thereof.

NOW, THEREFORE, BE IT HEREBY RESOLVED THAT:

The Common Council authorizes City staff to negotiate and draft formal utility easement to allow access to Wisconsin Public Service to complete construction of a new transformer in conjunction with the Municipal Service Center expansion, subject to review and approval of the City Attorney, and to record the same with the Brown County Register of Deeds.

BE IT FURTHER RESOLVED THAT:

All City officials, officers and employees are authorized and directed to take such steps as are lawful and necessary in furtherance thereof.

Adopted by the Common Council of the City of De Pere, Wisconsin, this 19th day of May, 2026.

APPROVED:

James G. Boyd, Mayor

ATTEST:

Carey E. Danen, City Clerk

Ayes: _____

Nays: _____

Board Approval: 5/11/2026

CITY OF DE PERE MEMO



To: Honorable Mayor Boyd
Members of the Board of Public Works
From: Tom Blohowiak, Maintenance Supervisor
Date: May 11, 2026

RE: **Consideration and possible action on Proposed Easement at 925 S Sixth Street (Parcel #: WD-142) – Project 26-16***

As part of the Municipal Service Center Expansion Project 26-16, the City of De Pere is requesting a new transformer on site at 925 S Sixth Street as shown in Figure 1 below:

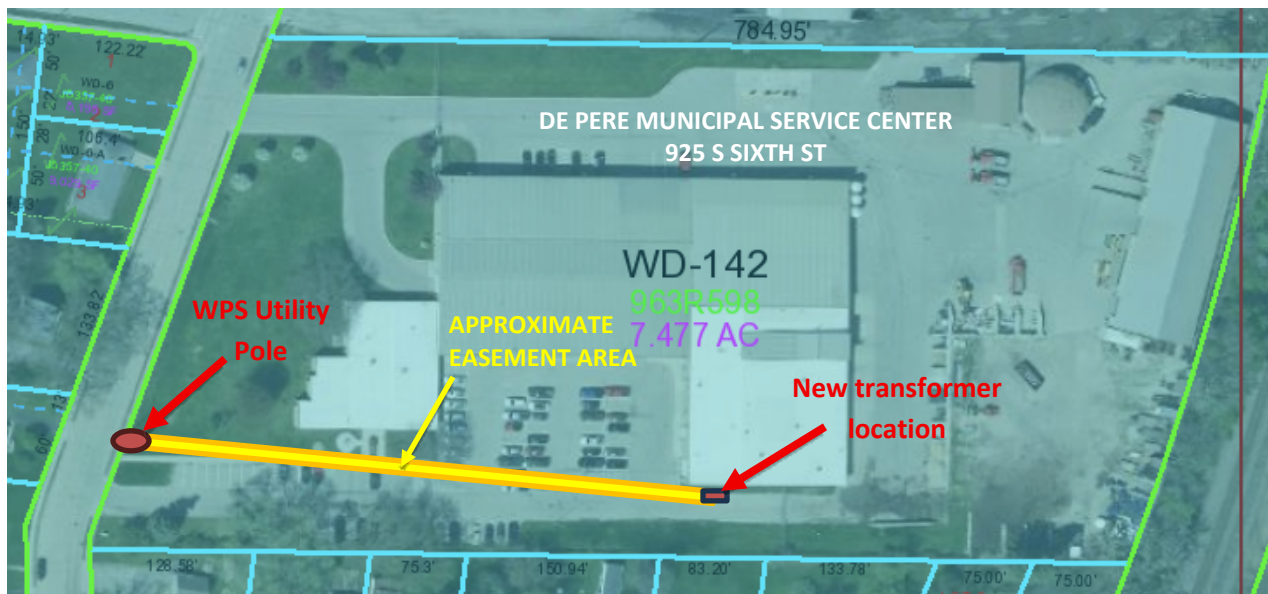


Figure 1 – WPS Easement request for new transformer

Under Project 26-16 Municipal Service Center remodel, the transformer from WPS needs to be replaced and relocated. WPS is requesting a 12' wide easement to run the wires to supply the new transformer.

Recommendation

Staff recommend approving the easement location and working with the City Attorney to draft the formal easement document. Easement will then be executed and recorded with Wisconsin Public Service pending City Attorney approval.



Request for Common Council Action

Meeting Date: May 19, 2026
Department: Public Works
From: Eric Rakers, City Engineer
Subject: Resolution #26-40 Easement 711-815 S Sixth Street
(Parcel #: WD-141-1) - Project 26-01.
Recommendation: Motion to approve.

The Board of Public Works voted unanimously to recommend approval of this item at its May 11, 2026 meeting.

Attachments:
Reso26-40, Utility Easement-WD-141-1, 2026 0511 CI_BOPW_Project_26-01_Proposed_Easement

RESOLUTION #26-40

AUTHORIZING UTILITY EASEMENT
(711-815 South Sixth Street; Parcel WD-141-1)

WHEREAS, as part of its work for Project 26-01, the City is planning to replace the storm sewer from the intersection of South Sixth Street and Helena Street running easterly into the De Pere Foundry site to the 36-inch concrete storm sewer line in coordination with the Municipal Service Center expansion project; and

WHEREAS, in order to complete the proposed replacement work, it is necessary to obtain an easement on the private property owned by De Pere Foundry; and

WHEREAS, this matter has been reviewed by the Board of Public Works which recommends approval thereof.

NOW, THEREFORE, BE IT HEREBY RESOLVED THAT:

The Common Council authorizes City staff to obtain the attached Utility Easement from De Pere Foundry, Inc., and to record the same with the office of the Brown County Register of Deeds.

BE IT FURTHER RESOLVED THAT:

All City officials, officers and employees are authorized and directed to take such steps as are lawful and necessary in furtherance thereof.

Adopted by the Common Council of the City of De Pere, Wisconsin, this 19th day of May, 2026.

APPROVED:

James G. Boyd, Mayor

ATTEST:

Carey E. Danen, City Clerk

Ayes: _____

Nays: _____

Board/Committee Approval: 5/11/2026

UTILITY EASEMENT

DOCUMENT NO.

De Pere Foundry, Inc., a Wisconsin corporation (Grantor), hereby grants and conveys to the City of De Pere, a Wisconsin municipal corporation (Grantee), and its successors, assigns and public utility permittees and licensees, a perpetual utility easement over, under, across and through all lands described below for the purposes of permitting public utilities to install, lay, operate, repair and maintain pipes and conduit for water main, storm sewer, sanitary sewer, telecommunications, gas and electric services and related facilities.

Legal Description:

Part of Lot 1, Certified Survey Map Number 9259, Document Number 2936676, Located in Part of the Southwest 1/4 of the Northeast 1/4 and Government Lot 2, all in Section 28, Township 23 North, Range 20 East, City of De Pere, Brown County, Wisconsin more fully described as follows:

Commencing at Northwest Corner of said Section 28; thence N89°37'42"E, 2487.85 feet on the north line of said Section to the Closing Corner on the North Line of said Section; thence S03°18'19"E, 1565.98 feet on a line between said Closing Corner and Center Corner of said Section; thence S88°54'16"E, 655.28 feet to the east right of way of S. Sixth St., also being the southwest corner of said Lot 1, the POINT OF BEGINNING; thence N19°32'08"E, 31.62 feet on said east right of way; thence S88°54'07"E, 99.20 feet; thence N20°02'41"E, 324.01 feet to a north line of said Lot 1; thence S70°21'40"E, 30.00 feet on said north line; thence S20°02'41"W, 345.64 feet to the south line of said Lot 1; thence N88°54'07"W, 130.62 feet on said south line to the Point of Beginning.

Said proposed easement area contains 13,492 Square Feet (0.310 Acres) of land more or less, as shown and dimensioned on the map attached hereto as Exhibit A.

For the purpose of the installation, maintenance, repair, reconstruction and/or replacement of utility facilities, Grantee shall have the right to enter, pass over and use said premises and the land adjacent thereto for the transportation, laying down and storage of materials, tools and equipment, the depositing and removal of excavated materials, and for other purposes incidental to the work. Grantee agrees to restore after completion of construction, maintenance or replacement the property to its previous condition, or as close thereto as practicable.

This Easement is binding upon and shall inure to the benefit of the heirs, successors, assigns, and licensees of the parties hereto.

Dated this ____ day of May, 2026.

DE PERE FOUNDRY, INC.

By:

Printed Name/Title: _____

State of Wisconsin)
)ss.
Brown County)

This instrument was acknowledged before me on this ____ day of May, 2026, by the above-named person(s).

(Notary Public, State of Wisconsin)
My commission expires: _____

Drafted by: Attorney Joanne Bungert

By:

Printed Name/Title: _____

State of Wisconsin)
)ss.
Brown County)

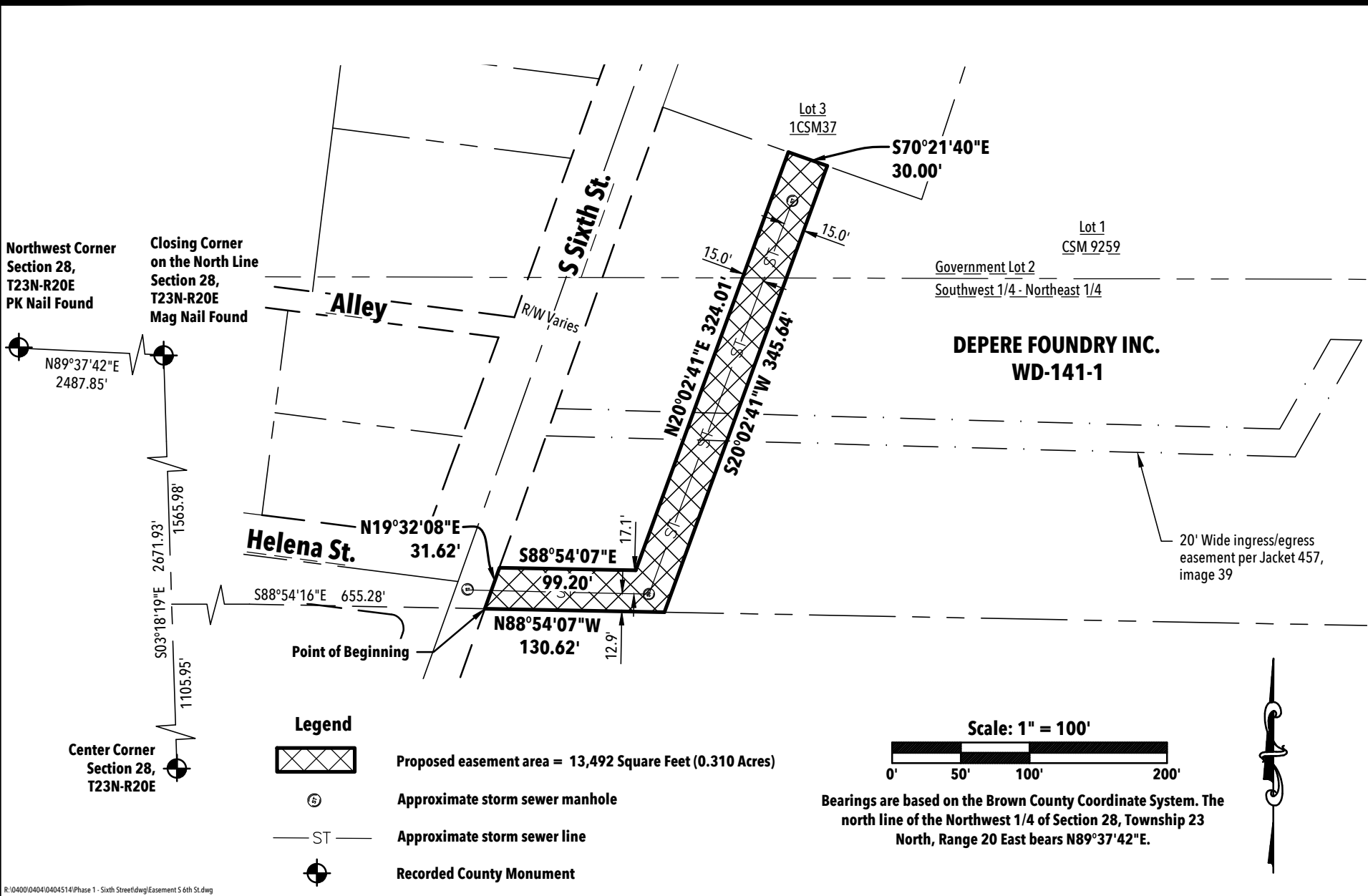
This instrument was acknowledged before me on this ____ day of May, 2026, by the above-named person(s).

(Notary Public, State of Wisconsin)
My commission expires: _____

THIS SPACE RESERVED FOR RECORDING DATA

NAME AND RETURN ADDRESS
Attorney Joanne Bungert
City of De Pere
335 S. Broadway
De Pere, WI 54115

Part of WD-141-1
PARCEL IDENTIFICATION NUMBER (PIN)



R:\0400\0404\0404514\Phase 1 - Sixth Street\dwg\Easement S 6th St.dwg

EXHIBIT 'A'

REL Robert E. Lee & Associates, Inc.
1250 Centennial Centre Blvd | Hobart, WI | 920-662-9641 | releinc.com



CITY OF DE PERE
Engineering Division
925 S. Sixth Street
De Pere, Wisconsin 54115

Office (920) 339-4061
Fax (920) 339-4071

Date: 3/19/2026
REL Job #: 404514
Exhibit Sheet 1 of 1

CITY OF DE PERE MEMO



To: Honorable Mayor Boyd
Members of the Board of Public Works
From: Eric Rakers, P.E., City Engineer
Date: May 11, 2026

RE: **Consideration and possible action on Proposed Easement at 711-815 S Sixth Street
(Parcel #: WD-141-1) – Project 26-01***

The City has a storm sewer that runs through the De Pere Foundry site at 711-815 S Sixth Street as shown in Figure 1 below:

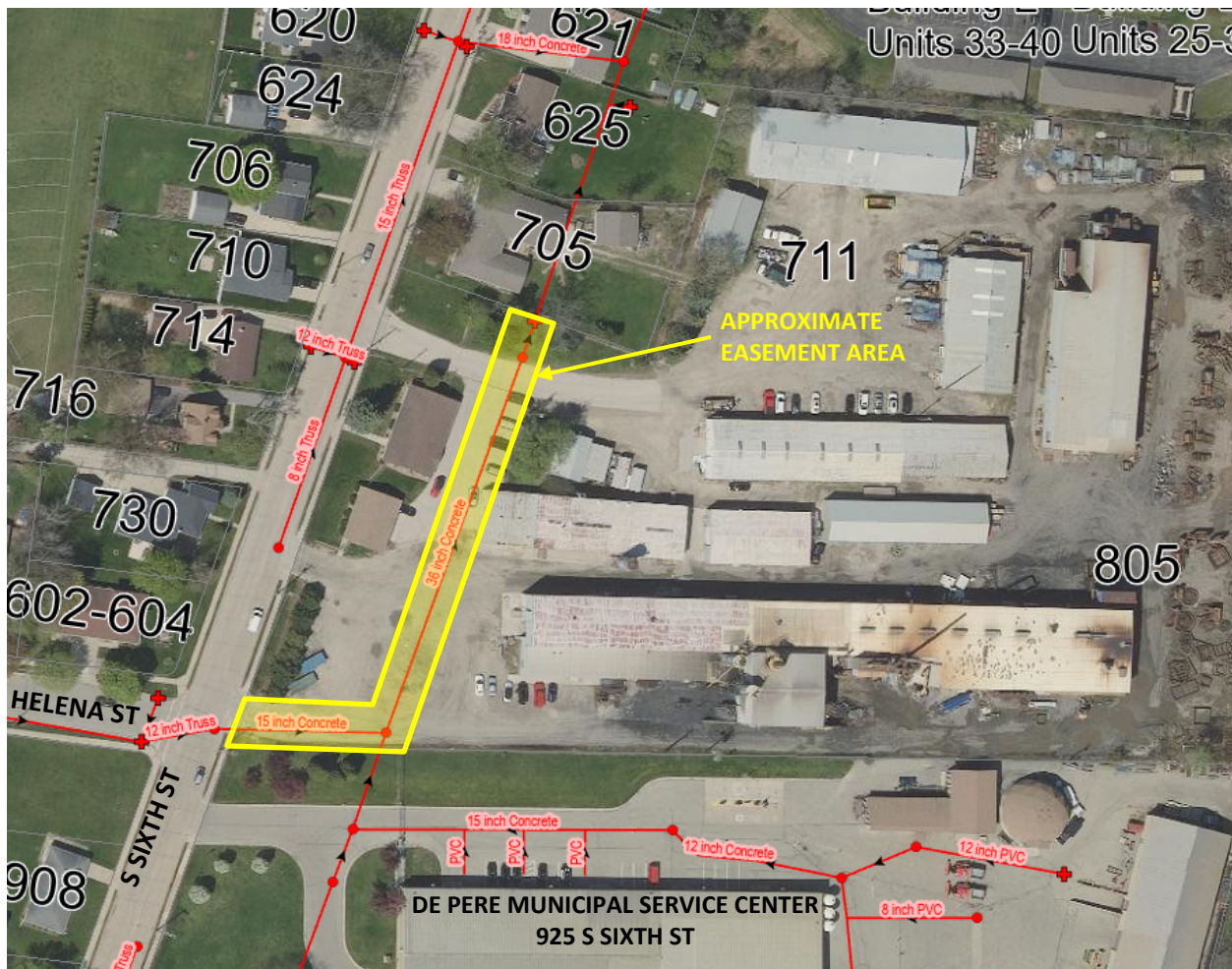


Figure 1 - City Storm Sewer at the De Pere Foundry Site

Under Project 26-01 Sewer and Water Relay and Street Resurfacing, the City is planning to replace the storm sewer from the intersection of S Sixth Street and Helena Street running east into the De Pere Foundry site to the 36-inch concrete storm sewer line in coordination with the Municipal Service Center expansion project.

Staff researched the De Pere Foundry Site and were unable to find documentation for an easement for this storm sewer and subsequently reached out to the Foundry Manager to work towards retaining an easement to complete this storm sewer replacement work. Upon obtaining approvals from the Board of Public Works and Common Council, staff will work with the Foundry towards executing and recording the attached easement document.

Recommendation

Staff recommends approving the easement.

Attachment

Utility Easement WD-141-1



Request for Common Council Action

Meeting Date: May 19, 2026
Department: Public Works
From: Eric Rakers, City Engineer
Subject: Resolution #26-41 2027 Gap Sidewalk Orders and Special Charges.
Recommendation: Motion to approve.

The Board of Public Works voted unanimously to recommend approval of this item at its May 11, 2026 meeting.

Attachments:

Reso26-41, 2026 0511 CI_BOPW_2027_Gap_Sidewalk, Attachment 1_2026 Estimated Sidewalk and Sidewalk Replacement Costs, Exhibit A - Garritys South Gaps, Exhibit B - Mystic Creek Gaps, Exhibit C - Waterview 5th Gaps, Attachment 5_CI-BOPW_Updating Sidewalk Policy_2016-9-12

RESOLUTION #26-41

ORDERING INSTALLATION OF SIDEWALKS
AT VARIOUS LOCATIONS FOR 2027

WHEREAS, the Board of Public Works reviews the installation of sidewalks adjacent to undeveloped and other lots on a yearly basis; and

WHEREAS, on May 11, 2026, the Board of Public Works reviewed the need for sidewalk installation in City right-of-way adjacent to certain lots within the City; and

WHEREAS, the Board of Public Works recommends ordering in such sidewalk along the terms and conditions as set forth below:

NOW, THEREFORE, BE IT HEREBY RESOLVED THAT:

The Common Council of the City of De Pere hereby orders the owners of the below described properties to comply with and install sidewalks in the public right-of-way adjacent to the below listed premises in accordance with the Standards and Specifications for the Construction of Sidewalks adopted by the City Council, a copy of which shall be served upon each property owner listed herein; and FURTHER that such sidewalks be installed on or before the dates identified below:

Owner/Owner Address	Parcel #	Sidewalk Address	Constructed On or Before
TLKM Development, LLC 2170 Velp Avenue; Suite 106 Green Bay, WI 54303	WD-1943	2497 Lawrence Drive	June 30, 2027
TLKM Development, LLC 2170 Velp Avenue; Suite 106 Green Bay, WI 54303	WD-1944	2501 Lawrence Drive	June 30, 2027
Bonita M. Greene 3444 Fagerville Way Green Bay, WI 54311	WD-2108	2591 South Stellita Circle	June 30, 2027
Cover All, LLC 2513 South Stellita Circle De Pere, WI 54115	WD-2121	2513 South Stellita Circle	June 30, 2027
Midwest Design Homes, Inc. N2335 West 41 Frontage Road Kaukauna, WI 54130	WD-2124	2500 North Stellita Circle	June 30, 2027

CRI Development, LLC 4362 Forest Ridge Drive Green Bay, WI 54313-8557	WD-2173	2535 North Stellita Circle	June 30, 2027
CRI Development, LLC 4362 Forest Ridge Drive Green Bay, WI 54313-8557	WD-2175	2509 Beasle Court	June 30, 2027
Best Built, Inc. 3100 Holmgren Way Green Bay, WI 54304-5720	WD-2239	400 Battery Avenue	June 30, 2027
Best Built, Inc. 3100 Holmgren Way Green Bay, WI 54304-5720	WD-2240	410 Battery Avenue	June 30, 2027

BE IT FURTHER RESOLVED THAT:

The Common Council authorizes the payment of expenses incurred by the City for sidewalk installation pursuant to Order of the Board of Public Works under Wis. Stats. §66.0907 in up to five (5) annual installments for costs in excess of \$1,000, together with interest thereon at the rate of City’s bonding for the fiscal year 2026, plus 1%).

BE IT FURTHER RESOLVED THAT:

Should the owner of such properties subject to this order fail or neglect to install such sidewalk in accordance with the Standards referenced above, the City shall cause such work to be done at the expense of the owner. If the City does such work and the owner fails to pay the City for the work so performed within thirty (30) days of invoice thereof, the City shall place the costs of such installation as a special charge against the tax roll for such property under Wis. Stats. §66.0627.

A copy of this order shall be served upon each property owner identified herein as provided in Wis. Stats. §66.0907(3).

Adopted by the Common Council of the City of De Pere, Wisconsin, this 19th day of May,
2026.

APPROVED:

James G. Boyd, Mayor

ATTEST:

Carey E. Danen, City Clerk

Ayes: _____

Nays: _____

Board/Committee Approval: 05/11/2026

CITY OF DE PERE MEMO



To: Honorable Mayor Boyd
Members of the Board of Public Works
From: Eric P. Rakers, P.E., City Engineer
Date: May 11, 2026

RE: Consideration and Possible Action on 2027 Gap Sidewalk Orders and Special Charges*

The purpose of this item is to review gap sidewalk and issue orders for installation by June 30, 2027, and special charges if not completed by that date. This is an all-inclusive action and will not come back to the Board because the order and special charge is included in this action.

Background

Annually, the Engineering Staff reviews vacant parcels for the installation of sidewalks. On September 12, 2016, the Board of Public Works approved the following policy regarding sidewalk installation:

“Concrete sidewalks shall be constructed in the right-of-way as set forth herein where the following conditions exist:

- 1. Along the streets adjacent to a lot on which a building is constructed;*
- 2. At least 80% of the lots are developed or 80% of the frontage is on lots that are developed, per side of the street; or*
- 3. On all streets in subdivisions after it has been ten (10) or more years since the acceptance of the first building permit for the subdivision phase.”*

Discussion

Based on this guidance, the following parcels were identified to have sidewalk installed in 2027:

Parcel ID	Location	Guidance	Exhibit
WD-1943	2497 Lawrence Drive	88% of Frontage Built	A
WD-1944	2501 Lawrence Drive	88% of Frontage Built	A
WD-2108	2591 S Stellita Circle	86% of Frontage Built	B
WD-2121	2513 S Stellita Circle	86% of Frontage Built	B
WD-2124	2500 N Stellita Circle	86% of Frontage Built	B
WD-2173	2535 N Stellita Circle	94% of Frontage Built	B
WD-2175	2509 Beasle Court	88% of Frontage Built	B
WD-2239	400 Battery Avenue	82% of Frontage Built	C
WD-2240	410 Battery Avenue	82% of Frontage Built	C

Exhibits for each location, including sidewalk installation justification are included for consideration.

Property owners are notified of the special charge after the Board Meeting when the Order is approved. Due to the large sidewalk installation requirements, there are significant charges anticipated due to this sidewalk order. The estimated sidewalk cost for new 4-inch sidewalk is \$79.25 per linear foot in 2026. The costs for 2027 construction are currently unknown. The actual costs for any special charges will be based on 2027 prices. The table below provides the estimated charge for each parcel that would be required to install sidewalks using 2026 pricing:

Parcel ID	Location	Frontage (FT)	Estimated Charge
WD-1943	2497 Lawrence Drive	85.00	\$6,736.25
WD-1944	2501 Lawrence Drive	85.00	\$6,736.25
WD-2108	2591 S Stellita Circle	65.70	\$5,206.73
WD-2121	2513 S Stellita Circle	64.80	\$5,135.40
WD-2124	2500 N Stellita Circle	74.42	\$5,897.79
WD-2173	2535 N Stellita Circle	80.00	\$6,340.00
WD-2175	2509 Beasle Court	88.19	\$6,989.06
WD-2239	400 Battery Avenue	100.00	\$7,925.00
WD-2240	410 Battery Avenue	224.96	\$17,828.08

Under the sidewalk program, the Board has approved a 5-year payback period for special charges more than \$1,000. The 2026 interest rate on the 5-year payback option is 5.12%.

Recommendation

Staff recommends that the Board of Public Works order sidewalk installation at the following properties for the 2027 construction season:

Parcel ID	Location
WD-1943	2497 Lawrence Drive
WD-1944	2501 Lawrence Drive
WD-2108	2591 S Stellita Circle
WD-2121	2513 S Stellita Circle
WD-2124	2500 N Stellita Circle
WD-2173	2535 N Stellita Circle
WD-2175	2509 Beasle Court
WD-2239	400 Battery Avenue
WD-2240	410 Battery Avenue

For sidewalk not constructed by June 30, 2027, the City will construct and charge property owners at the rate established in 2027 for new 4-inch concrete sidewalk. Staff recommends a 5-year payback period for each property receiving a special charge for sidewalk installation.

Attachments

1. 2026 Estimated Sidewalk and Sidewalk Replacement Costs
2. Exhibit A – Garrity’s Glen South Subdivision Sidewalk Gaps
3. Exhibit B – Mystic Creek Subdivision Sidewalk Gaps
4. Exhibit C – Waterview Heights 5th Addition Subdivision Sidewalk Gaps
5. CI-BOPW_Updating Sidewalk Policy_2016-9-12

CITY OF DE PERE

Public Works - Engineering Department



925 S. Sixth Street, De Pere, WI 54115 | 920-339-4061 | www.de-pere.org

2026

ESTIMATED COSTS FOR NEW & REPLACEMENT SIDEWALK

NEW 4-INCH SIDEWALK

Provide 4-inch Concrete Sidewalk	\$12.00	
Provide ¾-inch Crushed Aggregate Base Course	0.60	
<u>Drilled Tie Bars</u>	<u>0.08</u>	
Subtotal (Per Square Foot)	\$12.68	
5% Contingency	0.63	
<u>20% Engineering & Administration</u>	<u>2.54</u>	
Total (Per Square Foot)	\$15.85	(\$79.25 / LF)

NEW 6-INCH SIDEWALK

Provide 6-inch Concrete Sidewalk	\$13.00	
Provide ¾-inch Crushed Aggregate Base Course	0.60	
<u>Drilled Tie Bars</u>	<u>0.08</u>	
Subtotal (Per Square Foot)	\$13.68	
5% Contingency	0.68	
<u>20% Engineering & Administration</u>	<u>2.74</u>	
Total (Per Square Foot)	\$17.10	(\$85.50 / LF)

REPLACEMENT 4-INCH SIDEWALK

Remove and Replace 4-inch Concrete Sidewalk	\$12.00	
Provide ¾-inch Crushed Aggregate Base Course	0.05	
<u>Drilled Tie Bars</u>	<u>0.69</u>	
Subtotal (Per Square Foot)	\$12.74	
5% Contingency	0.64	
<u>20% Engineering & Administration</u>	<u>2.55</u>	
Total (Per Square Foot)	\$15.93	(\$79.65 / LF)

REPLACEMENT 6-INCH SIDEWALK

Provide 6-inch Concrete Sidewalk	\$13.00	
Provide ¾-inch Crushed Aggregate Base Course	0.05	
<u>Drilled Tie Bars</u>	<u>0.69</u>	
Subtotal (Per Square Foot)	\$13.74	
5% Contingency	0.69	
<u>20% Engineering & Administration</u>	<u>2.75</u>	
Total (Per Square Foot)	\$17.18	(\$85.90 / LF)

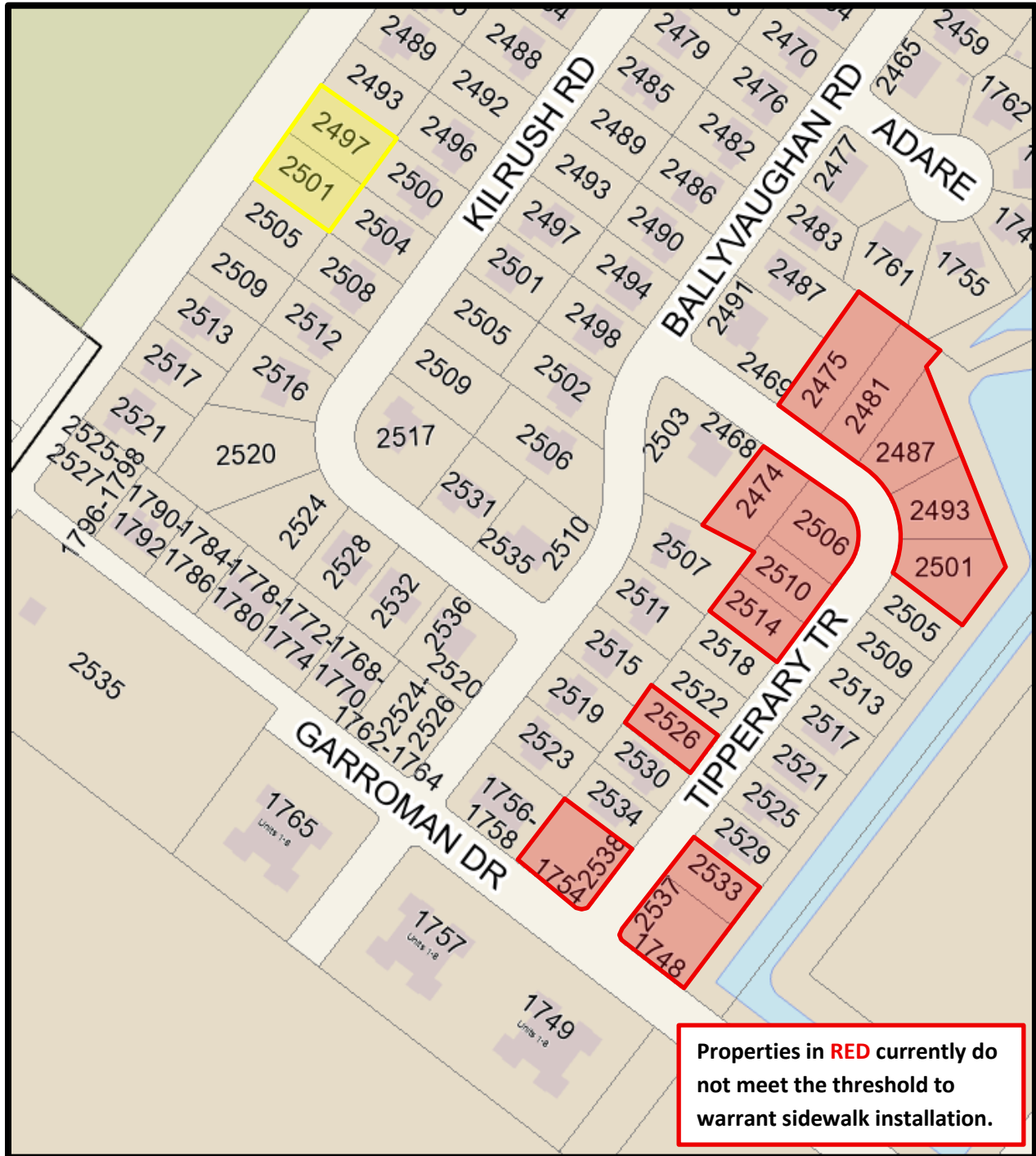
CITY OF DE PERE

Engineering Division

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EXHIBIT A – GARRITY’S GLEN SOUTH SUBDIVISION SIDEWALK GAPS 2020 SUBDIVISION COMPLETION



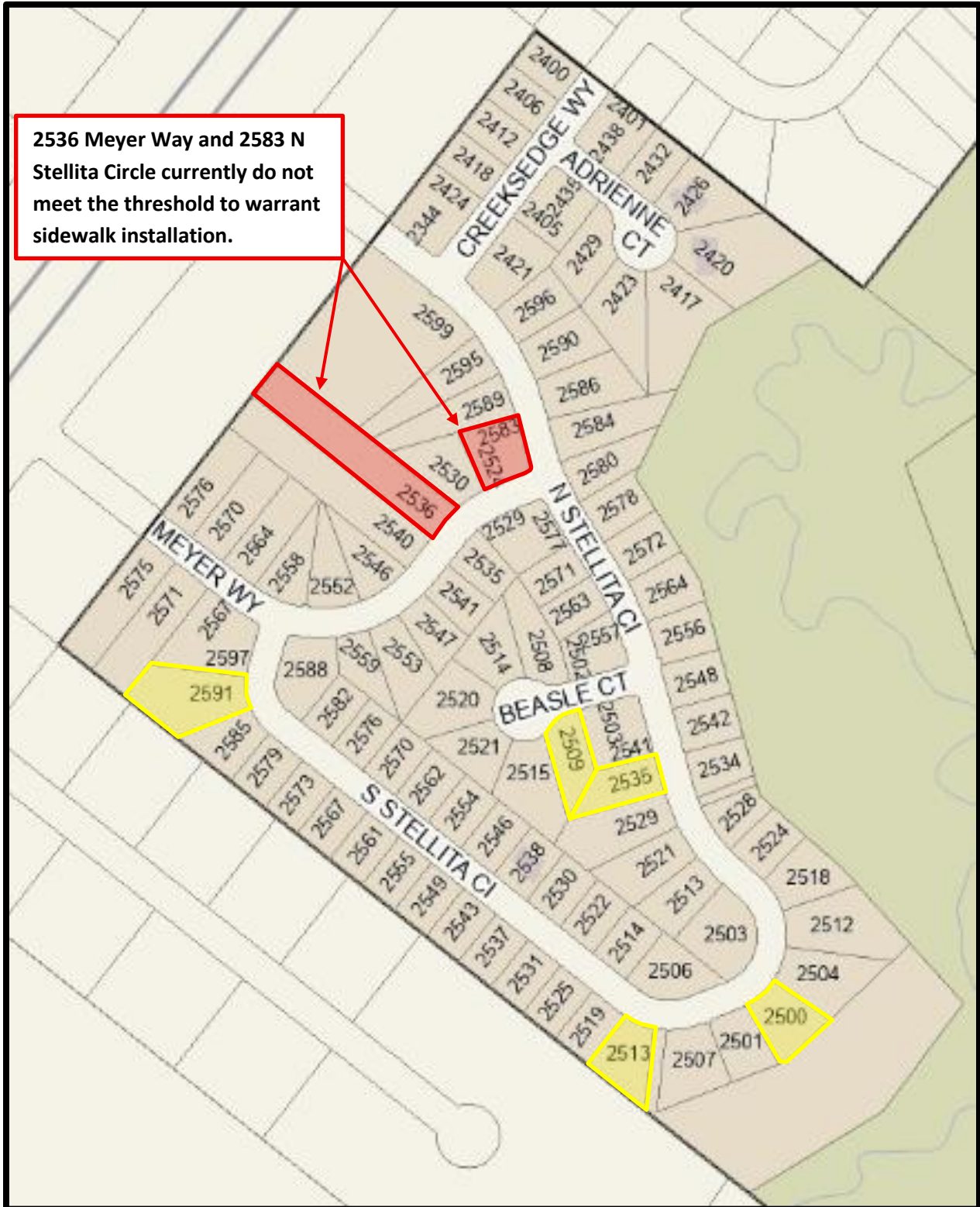
CITY OF DE PERE

Engineering Division

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EXHIBIT B – MYSTIC CREEK SUBDIVISION SIDEWALK GAPS 2023 SUBDIVISION COMPLETION



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Engineering Division

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EXHIBIT C – WATERVIEW HEIGHTS 5TH ADDITION SUBDIVISION SIDEWALK GAPS
2023 – PHASE ONE COMPLETION – WILLIE MAYES CL, MEADOW ROSE LN, & BATTERY AV
2024 – PHASE TWO COMPLETION – LANSDOWNE ST, BROOKLINE AV, & VIN SCULLY LN



City of De Pere Public Works Department

Memo

To: Honorable Mayor Walsh
Members of the Board of Public Works
From: Chase K. Kuffel, Assistant City Engineer
Date: September 7, 2016
Subject: Consider New Policy for the Installation of New Sidewalks Along New Streets or New Subdivisions*

A request was made to staff to review and provide options for implementing a new policy for ordering in sidewalk.

Background and Discussion

The City's current policy for the construction of sidewalks is governed by city ordinance 22-5 through the provisions of Wisconsin State Statutes 62.16 and 66.0907. City ordinance states:

22-5(d) *"Sidewalks required constructed.* Sidewalks shall be constructed according to the specifications set forth in subsection (b) of this section. The board of public works shall, at least annually, review those areas where sidewalks have not been constructed to determine the need for such construction for the safety of all citizens and recommend to the common council the installation of sidewalks in such areas. In reviewing the need for such construction of sidewalks, the board and common council shall consider the following factors: thoroughfares, connector streets, connection with public facilities such as schools and parks, pedestrian and vehicular safety and topographic consideration. Upon such recommendation the common council may require installation pursuant to Wis. Stats. § 66.0907.

22-5(e) *Determination of need.* In addition to the requirements set forth in subsection (d) of this section, the board of public works shall review all subdivision plats and certified survey maps requiring dedication of property for street purposes to determine whether or not sidewalks shall be required to be constructed upon streets set forth thereon. The board of public works shall make that determination based upon the criteria established above. If the board of public works determines that sidewalks are so required, they shall submit that finding to the common council and final approval of the plat of map may be subject to the imposition of a restrictive covenant thereon requiring installation of sidewalks prior to issuance of any occupancy permit. If such covenant is not required, nothing in this section shall prohibit a review of said areas contained on such a plat of map pursuant to subsection (d) of this section at a later date."

In a given year, public works staff identifies several areas that should be considered for sidewalk installation. In 2016, staff identified the following locations:

<u>Location</u>	<u>Purpose</u>
2322 Samantha Drive	Gap
Tenmile Drive	Gap, Park has been developed
402-404 Moonglow Drive	Gap
850 S. Melcorn Circle	Gap
680 Black Earth Drive	Gap
2113 Yahara Circle	Gap

These locations are typically identified through complaints and requests received by public works staff. Staff then presents these locations to the board of public works for consideration of new sidewalk installations. As directed by city ordinance 22-5(d), the board considers the construction of new sidewalks at proposed properties based on the following factors:

- Thoroughfares
- Connector streets,
- Connection with public facilities such as schools and parks
- Pedestrian and vehicular safety
- Topographic consideration

The board has the authority to recommend or deny the construction of new sidewalk on a property by property basis. Recommendations can be made to construct sidewalk by the end of the current year's construction season, or grant extensions for specific properties, requiring that their sidewalk be installed by the end of a future construction year. The Board's recommendation is then brought forth to Common Council where a resolution is created based on the full recommendation of the board or parts thereof.

This year, it was requested of public works staff to create a policy to better identify vacant parcels in developed residential or commercial areas that should have sidewalk constructed in benefit of public safety and welfare. Based off this request, staff identified two issues that need to be addressed:

1. Constructing sidewalks on properties, abutting streets with urban or rural cross-sections, annexed into the City of De Pere.
2. Constructing sidewalks on new subdivisions and streets and allowing the developing authority ample time to fill vacant parcels.

Staff reviewed and identified the policies of other Wisconsin communities for the construction of new sidewalk on vacant properties. Staff identified three different classifications for sidewalks that do not currently exist:

1. **Existing, Improved Streets:** Areas where streets have been fully improved with curb and gutter but lack sidewalk. Pursuant to Wisconsin State Statute 66.0907(3)(a):

“Authority of council. The council may by ordinance or resolution determine where sidewalks shall be constructed and establish the width, and determine the material and prescribe the method of construction of standard sidewalks. The standard may be different for different streets. The council may order by ordinance or resolution sidewalks to be laid as provided in this subsection.”

2. **Existing, Unimproved Streets:** Areas where existing streets have not been improved with curb and gutter. It is currently the City policy that in areas where existing streets have not been improved with curb and gutter, at the time of installation of the curb and gutter, sidewalk shall also be installed on both sides on those streets.
3. **New Subdivisions and Streets:** For new development, the requirement of whether sidewalk is required is placed on the subdivision plat. Sidewalk construction is required as part of the final occupancy conditions for a developed parcel. However, some parcels remain undeveloped which results in gaps in the sidewalk system. Municipalities around the State have incorporated different policies to address this situation. Measures from other municipalities are shown in Table 1 to address missing walks.

Table 1

New Subdivisions and Streets	
Municipality	Missing sidewalk installation shall occur on each street:
City of Chilton	Once 70% of the lots abutting on such street are occupied. Sidewalk shall be installed on both sides.
City of Janesville	Once 80% or more of the parcels, per side of the street, within a block are developed.
Village of North Fond du Lac	Once at least 75% of the lots within the subdivision have been improved OR Once it has been five (5) or more years since the acceptance of the first building permit for the subdivision phase.
City of Plymouth	Once 50% of the lots within a given block being built upon are ready for occupancy OR Abutting lots in newly-annexed developed districts of the City that abut on a public street upon which sidewalks are not already constructed shall be required to have sidewalks constructed thereon within one (1) year after annexation
City of Two Rivers	Once at least 75% of the lots are developed or 75% of the frontage is developed. Sidewalk shall be installed on both sides of a public street.

A full copy of each municipality’s sidewalk ordinance or code is attached in the appendix.

Based on the conditions shown in Table 1, staff applied the given ordinances for the new subdivisions and streets to three test areas in the City where the newer subdivisions exist. Staff utilized aerial imagery from 2014, 2010, and 2005 to determine the impacts over roughly equal intervals to these areas. The three test areas are as follows:

Northeast De Pere:

The properties bounded by Desplane Road to the west, and the City border to the north, east, and south.

Southeast De Pere:

The properties bounded by Rockland Road to the north, City limits to the east and south, and the Fox River Trail to the west.

Southwest De Pere:

The properties south of Red Maple Road bounded by the Fox River to the east, and the City limits to the south and west, including Honeysuckle Circle, Wild Rose Drive, Silver Maple Drive and Red Maple Drive.

The following tables show the impacts by year if the policies from these outside municipalities were to be adopted and enforced. Each test area had its total number of parcels counted by test year, as well as the number of parcels affected by each ordinance. Please note that the tables below only take into consideration those parcels that require sidewalks through restrictive covenants and do not take into consideration how long a parcel has been occupied without sidewalk.

Northeast De Pere			
	2014	2010	2005
Total Parcels	126	126	126
Total Parcels without Sidewalk	12	26	56
City of Chilton (70% of both sides of a street)	10	4	6
City of Janesville (80% of the parcels, per side of the street, within a block)	0	0	0
City of Plymouth (50% of the lots within an given block)	12	22	22
City of Two Rivers (both sides of a street within a block have at least 75% of the lots developed or 75% of the frontage developed)	By Lot: 10 By Frontage: 5	By Lot: 4 By Frontage: 7	By Lot: 2 By Frontage: 2

Example 1: If the City of Chilton's policy that sidewalk shall be installed on both sides of a street once 70% of the lots are occupied were to be adopted, 10 of the 126 parcels in this area would be affected in De Pere's northeastern test area in 2014.

Example 2: If the City of Two Rivers policy that sidewalk shall be installed on both sides of a street when either 75% of the lots are developed or 75% of the frontage is developed were to be adopted, 2 of the 126 parcels in this area would be affected due to lots being developed, and 2 of 126 parcels in this area would be affected due to frontage being developed in De Pere's northeastern test area in 2005.

Southeast De Pere			
	2014	2010	2005
Total Parcels	242	156	Undeveloped
Total Parcels without Sidewalk	51	70	---
City of Chilton (70% of both sides of a street)	10	12	---
City of Janesville (80% of the parcels, per side of the street, within a block)	11	2	---
City of Plymouth (50% of the lots within an given block)	36	24	---
City of Two Rivers (both sides of a street within a block have at least 75% of the lots developed or 75% of the frontage developed)	By Lot: 10 By Frontage: 10	By Lot: 2 By Frontage: 3	---

The areas of southeast De Pere that were considered had yet to develop in 2005.

Southwest De Pere			
	2014	2010	2005
Total Parcels	490	437	429
Total Parcels without Sidewalk	53	51	130
City of Chilton (70% of both sides of a street)	9	12	9
City of Janesville (80% of the parcels, per side of the street, within a block)	9	10	8
City of Plymouth (50% of the lots within an given block)	37	24	30
City of Two Rivers (both sides of a street within a block have at least 75% of the lots developed or 75% of the frontage developed)	By Lot: 9 By Frontage: 8	By Lot: 12 By Frontage: 8	By Lot: 9 By Frontage: 6

Based off the pricing from Project 16-05 – Sidewalk, Curb and Concrete Pavement Repair, new 4-inch concrete sidewalk is priced at \$42.00 per square yard and new 6-inch concrete sidewalk is priced at \$47.50 per square yard. Considering an assumed frontage of 100 feet, 80 feet of which is 4-inch concrete and 20 feet of which 6-inch concrete, and a City standard sidewalk width of 5 feet, the cost per parcel to install new sidewalk is approximately \$2,500. This cost would be 100% assessable to the parcel owner.

Recommendation

Staff recommends that the City adopt a sidewalk policy for the installation of new sidewalks that are required as part of the subdivision plat review or per the City Sidewalk Requirement Map in new subdivisions and streets based off of the following:

“Concrete sidewalks shall be constructed in the right-of-way as set forth herein where the following conditions exist:

1. Along the streets or adjacent to a lot on which a building is constructed
2. At least 80% of the lots are developed or 80% of the frontage is on lots that are developed, per side of the street.
3. On all streets in subdivisions after it have been ten (10) or more years since the acceptance of the first building permit for the subdivision phase.

Sidewalks abutting newly annexed parcels will be installed once the street is improved with concrete curb and gutter along unimproved streets or one (1) year after annexation for improved streets.”

This policy will allow ample time for developing authorities to fill vacant parcels – 10 year or 80% occupancy, whichever comes first - before the City installs sidewalks to fill the gaps.

The following maps show the impacts on the three regions that were studied for this policy, based off 2014 aerials, if the City were to adopt the abovementioned recommendation. The parcels highlighted in blue or red currently do not have sidewalks and the parcels. However, the parcels highlighted in red would meet the requirements to have sidewalk ordered in. The roads highlighted in green do not require sidewalks, and the roads highlighted in pink have a rural cross-section. Northeast De Pere would have zero parcels, southeast De Pere would have 11 parcels, and southwest De Pere would have nine parcels that would require sidewalk to be installed without considering how old the subdivisions are.



Request for Common Council Action

Meeting Date: May 19, 2026
Department: Public Works
From: Eric Rakers, City Engineer
Subject: Resolution #26-42 Authorizing intergovernmental agreement with the Town of Ledgeview for the Old Plank Road street resurfacing.
Recommendation: Motion to approve.

The Board of Public Works voted unanimously to recommend approval of this item at its May 11, 2026 meeting.

Attachments:
Reso26-42, 2026 0506 Ledgeview_Intergovernmental_Agreement_Old_Plank_Road,
2026 0511 CI_BOPW_Ledgeview_Intergovernmental_Agreement

RESOLUTION #26-42

AUTHORIZING INTERGOVERNMENTAL AGREEMENT WITH THE TOWN OF
LEDGEVIEW FOR COST SHARING OF CURB REPAIR AND STREET RESURFACING
(Old Plank Road)

WHEREAS, Wisconsin Statutes §66.0301 authorizes local governments to enter into cooperative agreements for the receipt of or furnishing of services or the joint exercise of any power or duty required or authorized by law and is liberally construed in favor of cooperative action between local governments; and

WHEREAS, both the City of De Pere (“City”) and the Town of Ledgeview (“Town”) are interested resurfacing Old Plank Road from Cornellius Martin Court to South Broadway Street (STH 32-57) and repairing/replacing the connected curbing (the “Project”), which shall be bid by the City as Project 26-07; and

WHEREAS, the City and Town desire to share in the costs associated with the Project, with each paying its proportionate share of the final constructed price for the street resurfacing, as well as any curb and gutter removed and replaced, based upon the corresponding frontage bordering each municipality and wish to enter into an Intergovernmental Agreement to clarify and delineate the responsibilities of each municipality; and

WHEREAS, the City and Town believe it is in their individual and mutual best interests to enter into this Agreement to foster intergovernmental cooperation between the jurisdictions in an effort to share costs and expenses of this Project and reduce the burden to each individual municipality; and

WHEREAS, the Board of Public Works has reviewed this matter and recommends approval thereof.

NOW, THEREFORE, BE IT HEREBY RESOLVED THAT:

The City Manager and City Clerk are hereby authorized and directed to execute the Intergovernmental Agreement Between the Town of Ledgeview and the City of De Pere for Cost Sharing of Street Resurfacing as is attached hereto.

BE IT FURTHER RESOLVED THAT:

All City officials, officers, employees, and agents are authorized and directed to take such steps as are lawful and necessary in furtherance thereof.

Adopted by the Common Council of the City of De Pere, Wisconsin, this 19th day of May, 2026.

APPROVED:

James G. Boyd, Mayor

ATTEST:

Carey E. Danen, City Clerk

Ayes: _____

Nays: _____

Board/Committee Approval: 05/11/2026

**INTERGOVERNMENTAL AGREEMENT
BETWEEN THE TOWN OF LEDGEVIEW
AND THE CITY OF DE PERE
FOR COST SHARING OF
STREET RESURFACING**

This Wis. Stat. §66.0301 Intergovernmental Agreement for the sharing of costs for curb repair and street resurfacing (“Project”) is entered into by the Town of Ledgeview (“Ledgeview”) and the City of De Pere (“De Pere”), for the purposes of creating an agreement between Ledgeview and De Pere to share in the costs of street resurfacing for Old Plank Road (collectively referred to as “Road”) which have shared frontage as set forth below:

WHEREAS, Ledgeview and De Pere desire to resurface the Road; and

WHEREAS, Ledgeview and De Pere will share in the costs of the Project proportionally based upon the frontage of each road bordering each municipality; and

WHEREAS, Ledgeview and De Pere desire to enter this agreement for purposes of clarifying the responsibility of each municipality; and

WHEREAS, the parties will work together on this Project in an effort to share costs and expenses and to reduce the burden on each individual municipality. By working together, the municipalities herein believe that it will be in their common interest to share in the aforementioned costs and expenses.

NOW, THEREFORE, for valuable consideration, receipt of which is hereby acknowledged, Ledgeview and De Pere agree as follows:

1. De Pere will be responsible for all costs related to engineering, design, and plan drafting for the Project.
2. The Project will be bid by De Pere as Project 26-07 Curb Repair and Street Resurfacing with a bid date of Thursday, March 19, 2026 at 1:00 PM.
3. The parties shall share the costs of the bidding and material testing as follows:
 - a. Old Plank Road. De Pere Shall pay 56.37% of the final constructed price for the street resurfacing of the Road (see Exhibit A).
 - b. Old Plank Road. Ledgeview shall pay 43.63% of the final constructed price for the street resurfacing of the Road (see Exhibit A).

4. All driveway repairs shall be paid for by the municipality on which municipality the property borders.
5. The scope of work is further identified in Exhibit B, namely pages C110 through C115.
6. Field inspection of the construction will be performed by each municipality for their respective portions.
7. This agreement shall run with the land and may be amended only with the written consent of Ledgeview and De Pere. Any dispute with respect to this agreement shall be venued in Brown County, Circuit Court. Prior to the commencement of any legal proceeding in Circuit Court, the parties agree to give each other at least sixty (60) days' prior written notice of any dispute or disagreement that may be the subject of said proceedings.

CITY OF DE PERE

TOWN OF LEDGEVIEW

 Kimberly Flom, City Manager

 Sarah K. Burdette, Town Administrator

 Carey Danen, City Clerk

 Jennifer Broich, Town Clerk

 Date

 Date

EXHIBIT A

**MUNICIPAL BOUNDARIES ON OLD PLANK ROAD FROM ROCKLAND ROAD TO GREENLEAF ROAD (STH
57-32)**

**EXHIBIT A
MUNICIPAL BOUNDARIES ON OLD PLANK ROAD**

North/West Half of Old Plank Road

Parcel ID	Address	ROW or Frontage		Municipality	
		Width (ft)			
D-48-3-1	2560 Old Plank Road	11.32		Ledgeview	
D-48-5	2540 Old Plank Road	100.00		Ledgeview	
D-48-7	2500 Old Plank Road	108.90		Ledgeview	
D-992-1 To D-993-6	2440-2490 Old Plank Road	425.27		Ledgeview	
D-48-2	2426 Old Plank Road	135.53		Ledgeview	
D-48-4	2420 Old Plank Road	292.99		Ledgeview	
D-47	2400 Old Plank Road	199.06		Ledgeview	
D-47-1	2378 Old Plank Road	171.34		Ledgeview	
D-47-2	2370 Old Plank Road	170.00		Ledgeview	
D-46-4	2356 Old Plank Road	94.33		Ledgeview	
D-46-1	2342 Old Plank Road	95.79		Ledgeview	
D-46-3	2366 Old Plank Road	36.37		Ledgeview	
D-46	2324 Old Plank Road	152.41		Ledgeview	
D-39	2306 Old Plank Road	283.14		Ledgeview	
D-38-1	2288 Old Plank Road	242.62		Ledgeview	Total Road
ED-D-38-5	2268 Old Plank Road	367.87		De Pere	Frontage
City of De Pere Subtotal		367.87	12.74%		6.37%
Town of Ledgeview Subtotal		2519.08	87.26%		43.63%

South/East Half of Old Plank Road

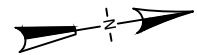
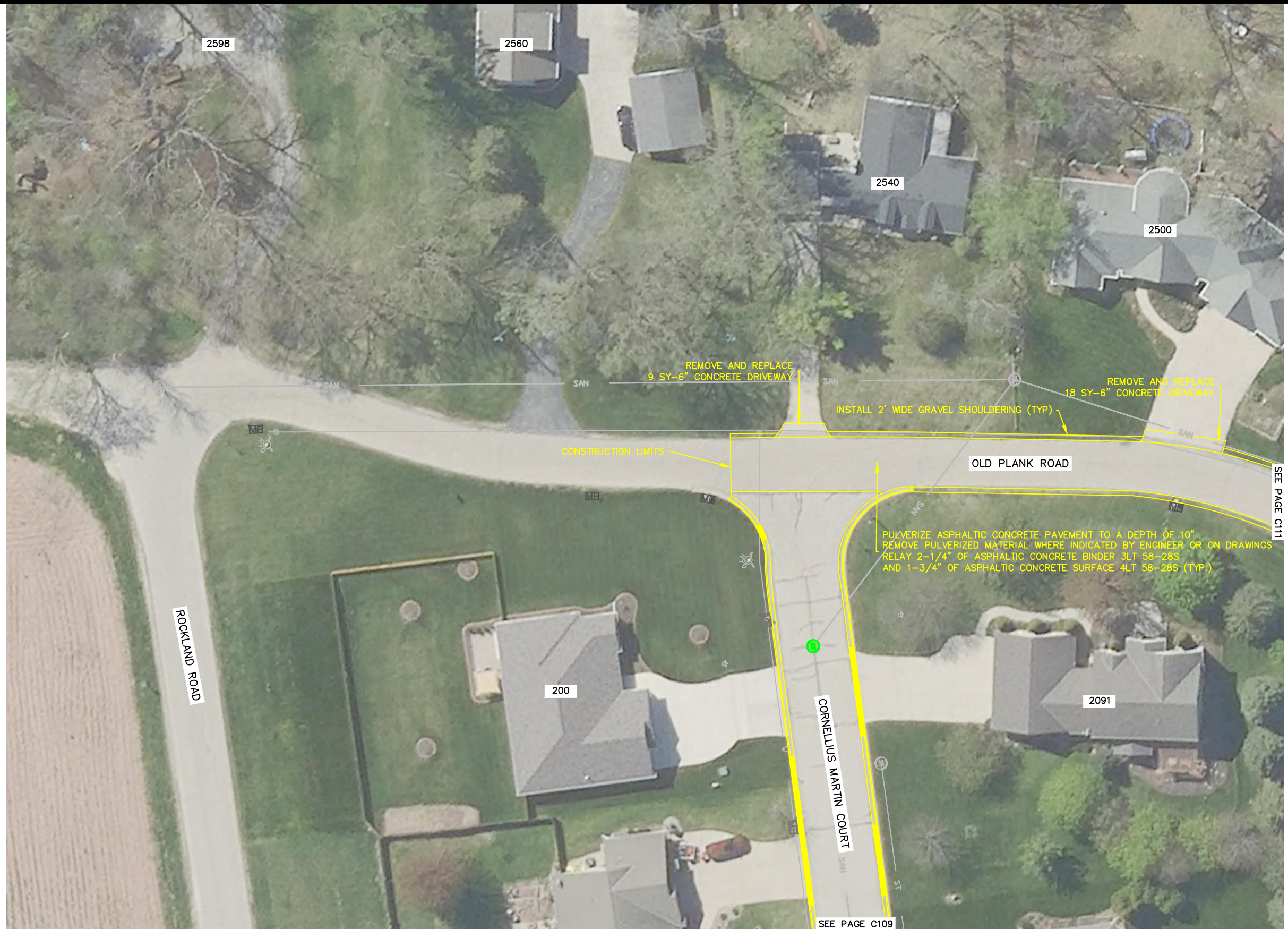
			Total Road Frontage
City of De Pere Subtotal		100.00%	50.00%
Town of Ledgeview Subtotal		0.00%	0.00%

Total Road Frontage Percentage for Old Plank Road	
City of De Pere	56.37%
Town of Ledgeview	43.63%
Total Frontage	100.00%

EXHIBIT B

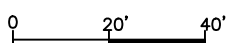
PROJECT 26-07 CURB REPAIR AND STREET RESURFACING PLAN SHEETS FOR OLD PLANK ROAD

PLAN SHEETS C110 THROUGH C115



SEE PAGE C111

SEE PAGE C109



CITY OF DE PERE

ENGINEERING DIVISION 925 S. SIXTH ST DE PERE WI 54115
OFFICE: 920-339-4061 EMAIL: DPPUBWRKS@DEPEREWI.GOV

**OLD PLANK ROAD
ROCKLAND ROAD TO
180' N/O CORNELIUS MARTIN COURT**

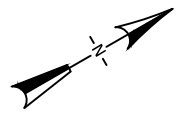
NAME: CURB REPAIR AND STREET RESURFACING
PROJECT 26-07

BY	DATE
SURVEYED	JJL 01-2026
DRAWN	JJL 01-2026
DESIGNED	JJL 01-2026
CHECKED	CKK 02-2026

REVISIONS / ISSUES			
NO.	DATE	BY	REMARKS

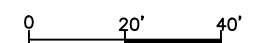
PAGE NO.
C110

X:\ENG\Projects\City Projects\2026\Project 26-07 Curb Repair and Street Resurfacing\1200-CAD\Old Plank Road_LP&P.dwg



SEE PAGE C110

SEE PAGE C112



CITY OF DE PERE

ENGINEERING DIVISION 925 S. SIXTH ST DE PERE WI 54115
OFFICE: 920-339-4061 EMAIL: DPPUBWRKS@DEPEREWI.GOV

OLD PLANK ROAD
180' N/O CORNELLIUS MARTIN COURT TO
280' NW/O OAK WATER COURT

NAME: CURB REPAIR AND STREET RESURFACING
PROJECT: 26-07

	BY	DATE
SURVEYED	JJL	01-2026
DRAWN	JJL	01-2026
DESIGNED	JJL	01-2026
CHECKED	CKK	02-2026

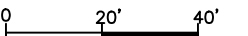
REVISIONS / ISSUES		
NO.	DATE	REMARKS

PAGE NO.
C111



SEE PAGE C111

SEE PAGE C113



CITY OF DE PERE

ENGINEERING DIVISION 925 S. SIXTH ST DE PERE WI 54115
OFFICE: 920-339-4061 EMAIL: DPPUBWRKS@DEPEREWI.GOV

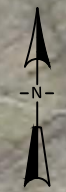
OLD PLANK ROAD
280' NW/O OAK WATER COURT TO
850' NW/O OAK WATER COURT

NAME: CURB REPAIR AND STREET RESURFACING
PROJECT: 26-07

BY	DATE
SURVEYED	JJL 01-2026
DRAWN	JJL 01-2026
DESIGNED	JJL 01-2026
CHECKED	CKK 02-2026

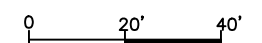
REVISIONS / ISSUES		REMARKS
NO.	DATE	

PAGE NO. **C112**



SEE PAGE C112

SEE PAGE C114



CITY OF DE PERE

ENGINEERING DIVISION 925 S. SIXTH ST DE PERE WI 54115
OFFICE: 920-339-4061 EMAIL: DPPUBWRKS@DEPEREWI.GOV

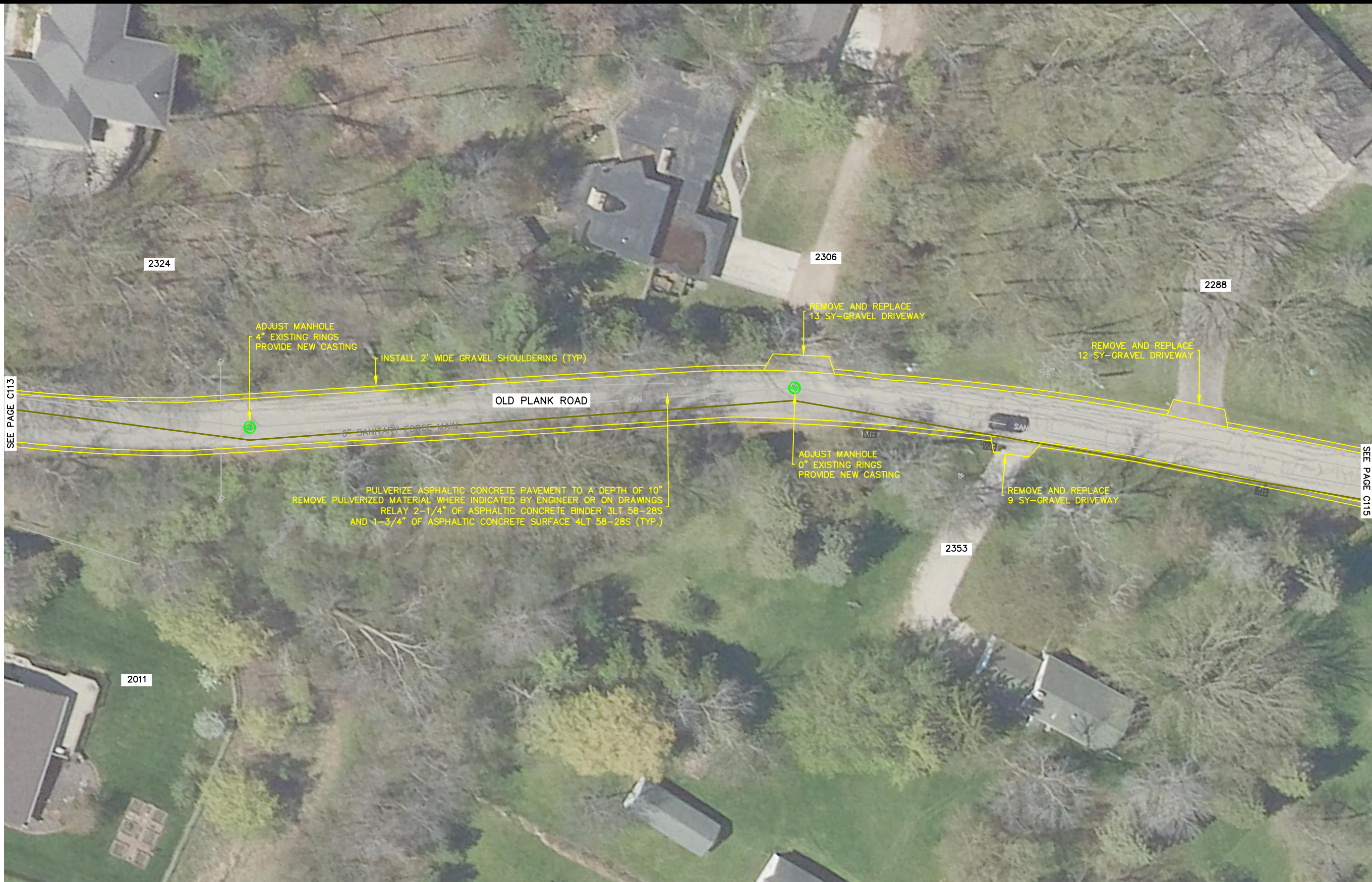
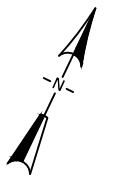
OLD PLANK ROAD
850' NW/O OAK WATER COURT TO
150' W/O OLD PLANK COURT

NAME: CURB REPAIR AND STREET RESURFACING
PROJECT 26-07

BY	DATE
SURVEYED	JUL 01-2026
DRAWN	JUL 01-2026
DESIGNED	JUL 01-2026
CHECKED	CKK 02-2026

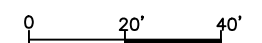
REVISIONS / ISSUES		
NO.	DATE	REMARKS

PAGE NO. **C113**



SEE PAGE C113

SEE PAGE C115



CITY OF DE PERE

ENGINEERING DIVISION 925 S. SIXTH ST DE PERE WI 54115
OFFICE: 920-339-4061 EMAIL: DPPUBWRKS@DEPEREWI.GOV

**OLD PLANK ROAD
150' W/O OLD PLANK COURT TO
350' W/O GREENLEAF ROAD**

NAME: CURB REPAIR AND STREET RESURFACING
PROJECT 26-07

	BY	DATE
SURVEYED	JJL	01-2026
DRAWN	JJL	01-2026
DESIGNED	JJL	01-2026
CHECKED	CKK	02-2026

REVISIONS / ISSUES		
NO.	DATE	REMARKS

PAGE NO. **C114**



SEE PAGE C114

2268

REMOVE AND REPLACE
12 SY-6" CONCRETE DRIVEWAY

INSTALL 2' WIDE GRAVEL SHOULDERING (TYP)

6" SANITARY FORCE MAIN

OLD PLANK ROAD

ADJUST MANHOLE
14" EXISTING RINGS

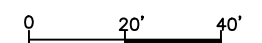
ADJUST MANHOLE
0" EXISTING RINGS
PROVIDE NEW CASTING

ED-F0123

PULVERIZE ASPHALTIC CONCRETE PAVEMENT TO A DEPTH OF 10"
REMOVE PULVERIZED MATERIAL WHERE INDICATED BY ENGINEER OR ON DRAWINGS
RELAY 2-1/4" OF ASPHALTIC CONCRETE BINDER 3LT 58-28S
AND 1-3/4" OF ASPHALTIC CONCRETE SURFACE 4LT 58-28S (TYP.)

CONSTRUCTION LIMITS

GREENLEAF ROAD (HWY 57-32)



CITY OF DE PERE

ENGINEERING DIVISION 925 S. SIXTH ST DE PERE WI 54115
OFFICE: 920-339-4061 EMAIL: DPPUBWRKS@DEPEREWI.GOV

OLD PLANK ROAD
350' W/O GREENLEAF ROAD TO GREENLEAF ROAD

NAME: CURB REPAIR AND STREET RESURFACING
PROJECT 26-07

BY	DATE
SURVEYED	JIL 01-2026
DRAWN	JIL 01-2026
DESIGNED	JIL 01-2026
CHECKED	CKK 02-2026

REVISIONS / ISSUES	
NO.	DATE

PAGE NO.
C115

CITY OF DE PERE MEMO



To: Honorable Mayor Boyd
Members of the Board of Public Works
From: Eric P. Rakers, P.E., City Engineer
Date: May 11, 2026

RE: **Consideration and possible action on Intergovernmental Agreement between the Town of Ledgeview and the City of De Pere for the Old Plank Road Construction***

Attached is an intergovernmental agreement between the Town of Ledgeview and the City of De Pere for the cost sharing of construction costs for the curb repair and street resurfacing of Old Plank Road from Cornellius Martin Court to S. Broadway Street (STH 32-57). The cost sharing for the resurfacing costs is based proportionally upon each municipality's frontage on Old Plank Road. Each municipality will also be covering the cost for any curb and gutter removed and replaced along their corresponding frontage.

Recommendation

Staff recommends that the Board approve this agreement and forward the agreement to Common Council for final consideration and approval.

Attachment

2026 0506 Ledgeview_Intergovernmental_Agreement_Old_Plank_Road



Request for Common Council Action

Meeting Date: May 19, 2026
Department: Finance
From: Pamela Manley, Finance Director
Subject: Resolution #26-43 Authorizing Agreement for Professional Services with Berry, Dunn, McNeil & Parker, LLC, with transfer of \$56,000 from Unassigned Reserves (Enterprise Resource Planning).
Recommendation: Staff recommends approval.

The Finance/Personnel Commission unanimously approved an agreement with BerryDunn for ERP consulting services, along with the allocation of \$56,000 from unassigned reserves, at its meeting on May 12, 2026.

The City currently utilizes Incode 9 as its Enterprise Resource Planning (ERP) system. This system supports a range of essential functions, including accounts receivable, accounts payable, employee management (such as hire dates, pay rates, and benefits), payroll processing, and building permit administration. Incode has been in use since 2005. Given that the typical useful life of an ERP system is between 10 and 20 years and considering the significant technological advancements that have occurred during this period, the City's existing ERP system is due for a comprehensive update. The City seeks to enhance system functionality and improve transparency between the Finance Department, other City departments, and the Common Council. A formal needs assessment is a critical first step in the process of replacing the ERP system. This assessment will help clearly define the City's requirements and ensure that any future ERP solution is well-aligned with operational needs and long-term objectives.

See attached staff memo for further details.

Attachments:
Reso26-43, Berry Dunn et al.(ERP Consulting)5-14-26-JB, Exhibit A-Berry, Dunn, et al., Berry, Dunn, McNeil & Parker - Proposal, Berry, Dunn, McNeil & Parker - Presentation, ERP Consulting - Memo

RESOLUTION #26-43

AUTHORIZING AGREEMENT FOR PROFESSIONAL SERVICES BETWEEN THE
CITY OF DE PERE AND BERRY, DUNN, MCNEIL & PARKER, LLC,
WITH TRANSFER OF \$56,000 FROM UNASSIGNED RESERVES
(Enterprise Resource Planning)

WHEREAS, due to the age of its current system, and in consideration of significant technological advancements, the City is in need of a comprehensive update to its Enterprise Resource Planning (ERP) system to enhance system functionality and improve transparency among City departments and the Common Council; and

WHEREAS, to ensure that any future ERP solution is well-aligned with operational needs and long-term objectives, a formal needs assessment is a critical first step in the process of replacing Incode, City's current ERP system; and

WHEREAS, Berry, Dunn, McNeil & Parker, LLC has available and offers to provide personnel and professional assistance necessary to accomplish the needs assessment within the required timeframe; and

WHEREAS, to assist with financing this project, the amount of \$56,000 is requested from Unassigned Reserves to cover the fixed fee and potential travel expenses, with optional contract negotiations and approval assistance services being budgeted for 2027; and

WHEREAS, this matter has been reviewed by the Finance/Personnel Committee which recommends approval thereof.

NOW, THEREFORE, BE IT HEREBY RESOLVED THAT:

The City Manager and City Clerk are authorized and directed to execute the Standard Agreement for Professional Services Between the City of De Pere and Berry, Dunn, McNeil & Parker, LLC, as is attached hereto, subject to such changes as deemed necessary by the City Attorney.

BE IT FURTHER RESOLVED THAT:

The Common Council hereby authorizes the transfer of funds from City's Unassigned Reserves account in the amount of \$56,000 and approves the allocation to Account 100-51500-811 (Capital Equipment) under the Finance budget.

BE IT FURTHER RESOLVED THAT:

All City officials, officers, and employees are authorized and directed to take such steps as are lawful and necessary in furtherance thereof.

Adopted by the Common Council of the City of De Pere, Wisconsin, this 19th day of May, 2026.

APPROVED:

James G. Boyd, Mayor

ATTEST:

Carey E. Danen, City Clerk

Ayes: _____

Nays: _____

Board/Committee Approval: 5/12/2026

STANDARD AGREEMENT FOR PROFESSIONAL SERVICES BETWEEN THE
CITY OF DE PERE AND BERRY, DUNN, MCNEIL & PARKER, LLC

Project: (Enterprise Resource Planning)

THIS AGREEMENT made and entered into this ___ day of _____, 2026, by and between the City of De Pere, a Wisconsin municipal corporation ("City"), and Berry, Dunn, McNeil & Parker, LLC, a foreign limited liability company authorized to do business in Wisconsin ("Consultant"), collectively referred to as the parties.

WITNESSETH

WHEREAS the City is in need of Enterprise Resource Planning (ERP) consulting services to replace its current financial and human resource information system in order to streamline financial, human resources and operational functions to enhance efficiency and effectiveness of city's governmental operations; and

WHEREAS the Consultant has available and offers to provide qualified personnel and facilities necessary to accomplish the work within the required timeframe.

NOW, THEREFORE, in consideration of the following terms and conditions, City and Consultant mutually agree as follows:

I. SCOPE OF WORK

The scope of work shall include all services and materials necessary to complete the project as fully described and specified in the March 2, 2026, City Request for Proposals (Exhibit A) and Consultant's Proposal thereto dated April 6, 2026 (Exhibit B), both of which are attached hereto and incorporated herein by reference. If a conflict exists between Exhibit A and Exhibit B, the terms of Exhibit A shall prevail. If there is a conflict between the terms and conditions of Exhibit A and this Agreement, the terms of this Agreement shall prevail. No standard terms or conditions of Consultant's Proposal are incorporated into this Agreement unless such term is specifically included herein.

II. AMENDMENTS TO AGREEMENT

This Agreement may be amended only by written instrument signed by both parties. If in the reasonable judgment of the City, the scope or nature of the services to be performed by Consultant change or deviate materially from the scope or nature of the services described above, the City may, at its discretion, suspend performance of its services until a written agreement superseding this Agreement and adjusting the scope, schedule, terms and conditions has been executed. Where additional work is to be completed on time and expenses compensation, charges shall be in accordance with the fee schedule submitted with the Consultant's proposal.

III. FEES

Total fees payable to Consultant shall not exceed the amount of \$105,800 for all services, materials, equipment and authorized reimbursable expenses under this Agreement unless an Amendment to Agreement signed by both parties, approves additional fees in writing. Any such additional fees shall be defined in writing and authorized prior to execution of such work. Exhibit B deliverables in Table 3: Fixed-Fee Project Costs for Phases 0-02 are specifically modified as follows:

Deliverable 0B. Ongoing Biweekly Status Updates 9 months at \$1,500 per month	\$ 13,500
Deliverable 1. Needs Assessment Report	\$ 29,500
Deliverable 4. Final Functional and Technical Requirements	\$ 17,500
Deverable 7. Demonstration Facilitation	\$ 16,000

Total Cost	\$105,800
Optional Deliverable 9. Contract Negotiations and Approval Assistance	\$ 10,000

IV. SCOPE OF CONSULTING SERVICES

Consultant agrees to perform all those services and furnish all material necessary as fully described in Exhibits A and B.

V. SCOPE OF CITY SERVICES

City agrees to provide the Consultant certain items and/or information such as existing plans, standard specifications, and other information concerning the project that may be applicable in the design of the project, as are available.

VI. COMPENSATION

The City agrees to pay, and the Consultant agrees to accept, compensation in accordance with the compensation provisions described in Exhibit B, to be paid in a lump sum at the conclusion of the work. Payment to the Consultant is due in 30 days from the invoice date. Compensation for special services shall be as agreed upon by the City and Consultant and set forth in the written authorization for special services.

VII. INDEMNIFICATION

Consultant will indemnify and hold harmless the City for any claims by reason of its negligent acts, errors or omissions for professional services. The obligation to indemnify and hold harmless the City, its elected and appointed officials, officers, employees, agents, representatives and volunteers and each of them, shall be applicable except to the extent the liability results from the sole negligence of the City, its elected and appointed officials, officers, employees, agents, representatives and volunteers.

In the event that Consultant employs other persons, firms, corporations or entities (sub-contractor) as part of the work covered by this Agreement, it shall be Consultant's responsibility to require and confirm that each sub-contractor enters into an Indemnity Agreement in favor of the City, its elected and appointed officials, officers, employees, agents, representatives and volunteers, which is identical to this Indemnity Agreement.

This indemnity provision shall survive the termination or expiration of this Agreement.

VIII. INSURANCE

Consultant shall not commence work under this Agreement until it has obtained the insurance required herein. All coverages shall be with insurance carriers licensed and admitted to do business in the State of Wisconsin. All coverages shall be with carriers acceptable to the City. A minimum AM Best Rating of A-VII is required.

It is hereby understood and agreed that the insurance required by the City is primary coverage and that any insurance or self-insurance maintained by the City, its officers, council members, agents, employees or authorized volunteers will not contribute to a loss.

Worker's Compensation and Employers Liability Minimum Requirements as required by Statute: Consultant shall cover or insure under applicable labor laws relating to worker's compensation insurance, all of their employees in accordance with the law in the State of Wisconsin. Consultant shall provide statutory coverage for work related injuries and employer's liability insurance with limits of \$100,000 each accident, \$500,000 disease policy limit and \$100,000 disease each employee.

Liability Insurance: Consultant shall procure and maintain during the life of this Agreement the following Commercial General Liability Insurance and Automobile Liability insurances:

- A. PROFESSIONAL LIABILITY (Errors and Omissions)
 - (1) Minimum Limits
 - (a) \$2,000,000 each claim/\$3,000,000 annual aggregate
 - (b) Any deductible not to exceed \$25,000 each claim
 - (2) Must continue coverage for 3 years after final payment for service/job
- B. GENERAL LIABILITY COVERAGE
 - (1) Commercial General Liability
 - (a) \$2,000,000 general aggregate
 - (b) \$1,000,000 products - completed operations aggregate
 - (c) \$1,000,000 personal injury and advertising injury
 - (d) \$1,000,000 each occurrence limit
 - (2) Claims made form of coverage is not acceptable.
 - (3) Insurance must include:
 - (a) Premises and Operations Liability
 - (b) Blanket Contractual Liability including coverage for the joint negligence of the City of De Pere, it officers, council members, agents, employees, authorized volunteers and the named insured
 - (c) Personal Injury
 - (d) Explosion, collapse and underground coverage
 - (e) Products/Completed Operations
 - (f) Independent Contractors
- C. BUSINESS AUTOMOBILE COVERAGE
 - (1) Minimum Limits - \$2,000,000 Combined Single Limit for Bodily Injury and Property Damage each accident
 - (2) Must cover liability for "Any Auto" - including Owned, Non-Owned and Hired Automobile Liability
- D. UMBRELLA LIABILITY
 - (1) Coverage to be in excess of employer's liability, commercial general liability, and automobile liability insurance required above. Limits of liability not less than \$2,000,000 each occurrence, \$4,000,000 aggregate.

Additional Insured: Consultant shall name the City, including all elected and appointed officials, all employees and volunteers, all boards, commissions and/or authorities and their board members, employees and volunteers as an Additional Insured on the General Liability Coverage. This coverage shall be primary to the Additional Insured, and not contributing with any other insurance or similar protection available to the Additional Insured, whether other available coverage is primary, contributing or excess.

Waiver of Workers Compensation Subrogation: The workers' compensation policy is to be endorsed with a waiver of subrogation. The insurance company, in its endorsement, agrees to waive all rights of subrogation against the City, its officers, officials, employees and volunteers for losses paid under the terms of the policy that arises from the work performed by the named insured for or on behalf of the City of De Pere.

Cancellation Notice: All insurances required by this Agreement shall include an endorsement stating the following: "Thirty (30) days Advance Written Notice of Cancellation or Ten (10) days for Non-Renewal shall be sent to: City of De Pere Attn: City Clerk 335 S. Broadway, De Pere, WI 54115.

Proof of Insurance Coverage: Consultant shall provide to the City, at the time this Agreement is returned for execution, Certificates of Insurance and/or policies, acceptable to the City. If so requested, certified copies of any or all policies shall also be furnished. The Additional Insured Policy endorsement must accompany the Certificate of Insurance. A copy of the Certificate of Insurance must be on file with the City. If no Certificates of Insurance and/or policies are provided to the City upon execution of this Agreement, the Agreement shall be null and void.

Continuation of Coverage: If any of the above coverage expires during the term of this Agreement, the Consultant shall deliver renewal certificates and/or policies to the City at least ten (10) days prior to the expiration date.

IX. OWNERSHIP AND FORM OF DOCUMENTS

Any reports, specifications, drawings, or other documents prepared by the Consultant in the performance of its obligations under this Agreement shall become the property of the City. All such materials shall be returned to the City upon completion, termination, or cancellation of this Agreement and payment in full of all monies due the Consultant. The Consultant shall not use, willingly allow, or cause such materials to be used for any purpose other than the performance of all Consultant's obligations under this Agreement without the written consent of the City. The City agrees that the Consultant shall not be responsible for any re-use by the City, or by third parties that obtained the documents from or through the City, for purposes other than original intent of the documents provided by the Consultant.

Consultant acknowledges that, as the Consultant to City, a Wisconsin municipality, Wis. Stats. §19.36(3) applies to it and records produced by it pursuant to this contract are subject to the public records law to the extent they would otherwise be if maintained by the City. Consultant agrees that, within 10 business days of a written request of City, it shall forward to City any such contract or records maintained by Consultant as are requested by City. Such records shall be in the format requested by City provided that such records are kept and maintained in that format.

X. SAMPLES

Unless otherwise agreed or consumed in testing, test specimens shall be retained for a minimum of thirty (30) days following submission of final report.

XI. AUDITOR ACCESS

Consultant shall, upon request of City or its auditors, provide access to and furnish the auditors with copies of requested records, reports and any other documentation in its possession or custody pertaining to financial transactions, records or other financial information held by Consultant in conjunction with or related to Consultant's obligations under this Agreement.

XII. CONFIDENTIALITY OF INFORMATION

Consultant understands that, during the course of work under this contract, Consultant may become privy to confidential information of City. Consultant shall maintain the confidentiality of all information specifically designated confidential by City

unless withholding such information would violate the law, create a significant harm to the public, or create a risk of significant harm to the public.

XIII. DISPUTE RESOLUTION

All claims, disputes or any other matters in question between the parties arising out of or relating to this Agreement or breach thereof shall be subject to mediation as a condition precedent to the institution of any legal proceedings by either party. If such claim, dispute or any other matter involves a lien arising out of Consultant's services, Consultant may proceed in accordance with applicable law to comply with lien notice and filing deadlines prior to resolution of the matter by mediation. The City and Consultant shall attempt to resolve claims, disputes and other matters in question between them by mediation in accordance with the current Mediation Rules of the American Arbitration Association unless the parties agree otherwise. A request for mediation shall be filed in writing with the other party to this Agreement and, if applicable, the American Arbitration Association.

The parties shall share equally the mediator's and any filing fees. Mediation shall be held in the place where the Project is located, unless another location is mutually agreed upon. Agreements reached in mediation shall have the same force and effect as settlements in any court having jurisdiction thereof.

XIV. ACCESS/UTILITIES

The City will arrange access to the site, as necessary, for Consultant to complete the work. Consultant will take reasonable precautions to minimize any damage to the site due to its operation. Site restoration is not included unless specifically requested by the City.

Consultant is responsible for locating public utilities and agrees to indemnify and save the City harmless from all claims, suits, losses, cost and expenses including attorney's fees as a result of any personal injury, death or property damage occurring from damage to public utilities. Consultant shall coordinate with a private locating service for locating utilities on private property.

XV. SAFETY

Consultant shall comply with all Occupational Safety and Health Administration (OSHA) and State and Local safety and health standards and any other applicable rules and regulations.

Consultant's work or field personnel shall not be responsible for determining or implementing the means, methods, techniques, sequences or procedures of construction. Consultant will not be responsible for evaluating, reporting or effecting job conditions concerning health, safety or welfare, unless specifically requested in writing. Consultant's work or failure to perform same shall not in any way excuse any contractor, subcontractor or supplier from performance of its work in accordance with contract documents.

XVI. TIME FOR COMPLETION

The parties hereto agree that time is of the essence in completion of the project. Should Consultant encounter any circumstances, which, in the Consultant's opinion, will delay their response time, Consultant shall so inform the City as soon as the delay in response time is known.

XVII. RESPONSIBILITY OF CONSULTANT

The Consultant is employed to render a professional service only, and any payments made to the Consultant are compensation solely for such services rendered and recommendations made in carrying out the work. The Consultant shall follow the practice of its profession to make findings, opinions, factual presentations, and professional advice and recommendations, consistent with the standard of care expected of professionals in the industry performing similar services on projects of like size and complexity.

XVIII. NON-DISCRIMINATION

The Consultant agrees that, in performing under this Agreement with the City, it will not discriminate against any employee, applicant for employment or any other person or member of the public on the basis of age, race, creed, color, disability, marital status, sex, national origin, ancestry, arrest record, conviction record, military service, use or non-use of lawful products off the employer’s premises during nonworking hours, declining to attend a meeting or to participate in any communication about religious matters or political matters, or any other basis provided under Wis. Stats. §111.321.

XIX. ASSIGNMENT, TRANSFER OR SUBCONTRACTING

This Agreement is binding on the heirs, successors, and assigns of the parties hereto. The Consultant shall obtain the written consent of the City prior to assigning, transferring, or subcontracting any portion of the work to be performed under this project. The Consultant shall be responsible to the City for the actions of persons and firms performing subcontract work.

XX. SEVERABILITY

This Agreement represents the entire understanding of the City and Consultant as to those matters contained herein. No prior oral or written understanding shall be of any force or effect with respect to those matters covered hereunder. This Agreement may not be modified or altered except in writing signed by both parties.

XXI. AUTHORITY

The parties hereto have all necessary or requisite power and authority to execute and deliver this Agreement.

XXII. APPLICABLE LAWS AND JURISDICTION

This Agreement shall be administered and interpreted under the laws of the State of Wisconsin. Jurisdiction of litigation arising from this Agreement shall be in that state. If any part of this Agreement is found to be in conflict with applicable laws, such part shall be inoperative, null and void insofar as it is in conflict with said laws, but the remainder of this Agreement shall be in full force and effect.

XXIII. ENTIRE AGREEMENT

This Agreement, together with the City’s Request for Proposals (dated March 2, 2026), Consultant’s Proposal (dated April 6, 2026), the attachments appended hereto, and all documents, drawings, specifications, and instruments specifically incorporated herein and made a part hereof, shall constitute the entire Agreement of the parties.

XXIV. COMPLIANCE WITH LAWS

Consultant is responsible to see that services and documents furnished by Consultant conform to the applicable laws, rules, regulations, codes, orders, and special requirements, except as may be specifically provided otherwise herein.

XXV. SUSPENSION OF WORK

The City may suspend, in writing, all or a portion of the work under this Agreement in the event unforeseen circumstances beyond the control of the Consultant make normal progress in the performance of the work impossible. The Consultant may request that work be suspended by notifying the City, in writing, of circumstances which are interfering with normal progress of the work. If agreed, the time for completion of the work shall be extended by the number of days the work is suspended. In the event that the period of suspension exceeds 90 days, the terms of this Agreement are subject to renegotiation and both parties are granted the option to terminate work on the suspended portion of the project in accordance with Article XXVI.

XXVI. TERMINATION OF WORK

The City may terminate all or a portion of the work covered by this Agreement. Either the City or the Consultant may terminate work in the event the other party fails to perform in accordance with the provisions of this Agreement. Termination of this Agreement is accomplished by 15 days prior written notice from the party initiating termination to the other and the other party has failed to cured or rectify the issue or matter within fifteen (15) days of receipt of such notice. Notice of termination shall be delivered by certified mail with receipt for delivery returned to the sender.

In the event of termination, the Consultant shall perform such additional work as is necessary for the orderly filing of documents and closing of the project. The additional time for filing and closing shall not exceed 10 percent of the total time expended on the completed portion of the project prior to the effective date of termination.

The Consultant shall be compensated for the completed portion of the work on the basis of work actually performed prior to the effective date of termination plus the work required for filing and closing. Charges for the latter work are subject to the 10 percent limitation described in this Article.

XXVII. NOTICES

Any notification required or needed under the contract shall be sent via First Class Mail to the following:

If to City: City of De Pere
Attn; City Clerk
335 South Broadway
De Pere, WI 54115

If to Consultant: Ryan Doil, Project Principal
Berry, Dunn, McNeil & Parker, LLC
2211 Congress Street
Portland, ME 04102

XXVIII. COUNTERPARTS

This Agreement may be executed in several counterparts, and the signatures on this Contract may be transmitted electronically. Electronic signatures will deemed to constitute original signatures and counterparts to this Agreement containing the signatures (whether original or electronic) of all the parties will be deemed to constitute a single, enforceable Contract.

IN WITNESS WHEREOF, the parties hereto have made and executed this Agreement as of the day and year first above written.

BERRY, DUNN, MCNEIL & PARKER, LLC

CITY OF DE PERE, WISCONSIN

By: _____

Name: _____

Its: _____

By: _____
Kimberly T. Flom, City Manager

By: _____

Name: _____

Its: _____

By: _____
Carey E. Danen, City Clerk

DE PERE[®]



**REQUEST FOR PROPOSALS
Enterprise Resource Planning
Consulting Services**

City of De Pere, Wisconsin

Finance Department

**Issued: March 2, 2026
Proposals Due: April 6, 2026, by 12:00 PM**

A. INTRODUCTION

The City of De Pere seeks proposals from qualified firms to provide Enterprise Resource Planning (ERP) consultant services. The City intends to replace its current financial and HRIS systems in order to streamline financial, human resources, and operational functions, enhancing the efficiency and effectiveness of the city's governmental operations.

At a minimum, we plan to update or replace our systems that handle HRIS, finance and permitting. Additional modules, systems and/or processes may also be considered based on the needs assessment and recommendations.

The City of De Pere (City) is seeking proposals from qualified vendors to provide the specified services further detailed in the Scope of Services section below.

B. PROPOSALS MUST BE RECEIVED NOT LATER THAN 12:00PM ON TUESDAY, APRIL 6, 2026.

The City of De Pere reserves the right to accept or reject any or all proposals, to waive any irregularities, informalities, or defects in any proposal, to accept any proposal in whole or in part which shall be deemed in the best interests of the City of De Pere, and to negotiate with the successful proponent.

C. PROCESS

The City of De Pere will conduct the review, screening, and selection of a professional consultant to provide the services required. The consultant is encouraged to suggest or incorporate additions or modifications to the scope into the proposal that will enhance our ERP procurement process.

D. CITY AND ORGANIZATION BACKGROUND

The City of De Pere is located in Brown County and is part of the Green Bay metropolitan area. Incorporated in 1890, the City of De Pere covers approximately 13 square miles and has an estimated population of 25,605. The City has two excellent school districts, an urban private college, a dynamic downtown, successful business parks and safe neighborhoods served by ample parks and natural areas. De Pere is known for providing an exceptionally high quality of life and an exceptional local government customer service experience.

De Pere provides a full range of services typical of municipal governments, including police, fire and emergency medical protection; public works activities such as highway and street maintenance, refuse and recycling collection, water, storm and wastewater utilities; health department; parks and recreation activities; community development activities including planning and zoning enforcement, economic development, and construction permitting/inspection; and general and financial administration. As of the most recent debt issue in September 2025, the City continues to maintain an Aa2 rating from Moody's Investor's Service, Inc.

The City employs 157 full-time equivalent (excluding part-time and seasonal) employees. The City's annual general fund budget is typically about \$23 million. To learn more about the City of De Pere, please visit our website at <https://www.deperewi.gov/>.

E. FINANCIAL AND INFORMATION SYSTEMS BACKGROUND

The City of De Pere currently uses Tyler Technologies ERP Pro (9) (InCode). Modules used include Accounts Payable, Accounts Receivable, Building Projects, Check Reconciliation, Cash Collection, General Ledger, Payroll, Time Entry, and Administration.

Other software programs also being utilized by various departments include the following:

CivicPlus-SeeClickFix (citizen concerns/complaints), CivicRec (Rec software-registrations, rentals, POS), CivicClerk (agenda and meeting management)

GovOS-SeamlessDoc

FlexCAD-county-wide computer-aided dispatch

GERP-county-wide police records management system

TraCs-state-wide program for accident reports, traffic tickets, and municipal citations

AXON/Evidence.com-camera and taser video evidence

Thomson Reuters-Fixed Assets CS (Finance), Westlaw (Law)

CrewSense-Fire Department staff scheduling including overtime call-in

Image Trend-Fire and EMS reporting

PSTrax-Fire Department daily compliance checks and inventory management

TIPSS-Municipal Court software including FivePoint for online payments

HealthSpace-Health Department agent licensing

PipeTech Inspect-sewer televising inspection records

Fleet Maintenance Pro-tracking vehicles and maintenance records

FMX-Maintenance requests

Sling-Recreation seasonal timekeeping, scheduling, and communicating

Signup Genius-used for private swim lesson signup

Musco-Recreation field lighting

NeoGov-Applicant tracking, onboarding, and online forms

Halogen-Performance appraisals

HydroCAD

AutoDesk Civil3D

Bentley WaterCAD

WinSLAMM

eGov – website management

Microsoft Office-Access, Excel, Word

F. PROJECT DRIVERS

The following are considerations that are driving this project and the decisions of the executive team.

The City needs a more full-featured ERP software system that will help the City better manage financial and HRIS activities.

Limitations of the current system include:

Limited data access and inability to import and export bulk datasets.

System is not user friendly and requires specialized training.

Invoices cannot directly connect to accounts payable processes.

Online licensing/permit applications do not link to payments within the ledger.

Multiple Time Entry systems with several areas using paper timecards.

Many paper driven processes with manual approvals.

System has limited capacity for budgeting, requiring all budgeting processes and work to be completed in Excel.

Finance and HRIS systems are the priority for updating and replacement, but the City may consider additional modules based off of work with consultant.

The City enjoys a strong collaborative culture across departments and will utilize a team approach to work with the consultant on this project.

Management requires better access to data, information and reporting than is currently available without requiring custom reporting to obtain. Reports are inadequate in the current ERP system.

City personnel find the current ERP system difficult to resolve technical issues with the vendor and difficult to use and understand.

As a result of current limitations to functionality, City personnel have developed work-around processes that are impacting City business and are difficult to support.

Third-part software integrations with the current system are extremely difficult, limited or unavailable which results in duplication of efforts and data across systems, computer tasks and manual data entry.

The City is interested in a solution that could be expanded to other departments or service areas in the future.

G. SCOPE OF SERVICES

This project includes two phases:

- **Phase I – ERP Needs Assessment**
- **Phase II – Request for Proposal (RFP) Development Assistance and Selection Assistance**

Phase I – ERP Needs Assessment

1. Project Goals and Objectives
 - a. The consultant will work with the City team to establish project methodology, timeline and goals and objectives.
2. Current State
 - a. The consultant will work with all City Departments to inventory and analyze current systems and processes.
 - b. The primary focus is a detailed analysis for the current state interactions between departments and the finance/HRIS software system.

- c. A secondary focus is to inventory and analyze other department processes and systems that may benefit from upgrades and/or integration.
 - d. The current state should document inefficiencies, unmet needs and opportunities for optimization to enhance the overall effectiveness of the ERP system.
3. Analysis and Recommendation
- a. The consultant will provide a range of recommendations to address gaps found during the current state review.
 - b. Recommendations should review both new ERP software solutions and new utilization of current technologies and processes.
 - c. Analysis should include a review of the current marketplace and major factors in ERP consideration.
 - d. The analysis should address gaps in current performance and desired outcomes.
 - e. The analysis should prioritize the various goals and needs.

Phase II – Request for Proposal (RFP) Development Assistance and Selection Assistance

- Develop specific requirements for an enterprise resource planning system (ERP) based on the needs assessment, Phase I.
- Develop a comprehensive request for proposal (RFP) with City for the purchase and implementation of an ERP system.
- Assist the City with selection of an ERP vendor including evaluation benchmarks.

H. SUBMITTAL QUESTIONS

All questions shall be submitted in written form to the portal link provided below by 5:00 p.m. on Monday, March 16, 2026. Answers will be provided via the City website as an addendum to the RFP as they become available. The City anticipates releasing responses by 5:00 p.m., Monday, March 23, 2026. Multiple addenda may be released.

Question Portal: <https://deperewi.seamlessdocs.com/f/RFPQuestions>

I. SUBMISSION REQUIREMENTS

The City wishes to evaluate each proposal under the same uniform review standards. Proposals for this project should be organized in the following order and contain all the following information: Respondent shall submit one (1) electronic copy in PDF format through the City's online portal. To be considered, proposals must be received no later than 12:00 p.m., April 6, 2026, at the portal link below:

RFP Site: Enterprise Resource Planning Consulting Services
 Submission Portal: <https://deperewi.seamlessdocs.com/f/RFPSubmittal>

J. PROPOSAL RESPONSE FORMAT

Proposals to be submitted electronically in PDF format no later than 12PM on April 6, 2026. Proposals should include information related to the specific topics listed below, as a minimum.

Failure to include any of the requested information may be cause for proposal to be considered non-responsive and rejected.

1. Cover Letter

- a. Introduce your firm and confirm your interest in completing the project. Indicate your agreement with, or specific exceptions to, any of the objectives, requirements, terms or conditions contained in this RFP.

2. Firm Information

- a. Name, Address, Website, Contact Information, Company Profile, Years in Business.

3. Experience Overview

- a. Describe your firm's overall experience with developing needs assessments that translated into ERP solutions and ultimate implementation.

- b. Key Personnel
 - i. Provide a summary of the project team, field staff, and their capabilities and experience. Describe the applicable skills and accomplishments of the project manager including experience negotiating ERP contracts, knowledge of Governmental Accounting Standards and knowledge of Wisconsin laws and practices.

- c. References and Comparables
 - i. Provide at least 3 relevant references for comparable work. The reference list should include client name, contact person, address, telephone number and description of work performed.
 - ii. Provide a list and a list/overview of comparable projects. Comparable projects should include the details on existing and proposed ERP systems and status of ERP implementation for each project.
 - iii. Include a list and description of any projects that involved the City of De Pere's current ERP System – Tyler Technologies ERP Pro 9 (Incode 9).

4. Proposed Methodology

- a. Provide a work plan to accomplish this project, including a detailed explanation of how the services are to be provided and managed.
- b. Describe how project management, coordination and communications with the City will be accomplished.
- c. Identify the expected involvement by City staff for each major activity in the project. A project schedule with stated milestones should be included in this section.
- d. Indicate what resources are available if additional support is requested.
- e. Identify key deliverables, project schedule and project milestones.

5. Proposed Fee

- a. Fixed price proposal for all work performed as proposed.
- b. Include and separate fees, expenses, travel and other costs associated.
- c. Include hours estimated for project across various phases.

6. Work Sample

- a. Provide a representative example of a needs assessment prepared by the firm.

K. EVALUATION CRITERIA

Proposals will be evaluated based on the overall approach, team experience and qualifications, budget, organizational structure, methodology, schedule and fit with the City of De Pere. Proposals will be evaluated according to the following:

1. Experience Overview
 - a. Assessment of the credentials and capabilities of the project team, with emphasis on the project manager’s experience and proven ability to successfully execute all project components.
 - b. Review of the team’s past performance on similar projects, including specific examples with our software system and similar communities.
2. Proposed Methodology
 - a. Evaluation of the proposed approach, including clarity of scope, methodology, and alignment with project objectives.
3. Proposed Fee
 - a. Evaluation of the proposed budget, including cost-effectiveness, transparency, and alignment with the scope of work.

Respondents must be able to demonstrate that they have successfully assisted other government entities in a similar capacity, and that the recommended assessments and system selections have not been consistently awarded to one solution. The City desires a consultant that has demonstrated a proven track record of recommendations to multiple systems in the marketplace and/or utilizing existing technology solutions, depending on the needs of the specific government entity.

L. TIMELINE

The following timeline is subject to change.

Release of Request for Proposal	March 2, 2026
Questions due using portal	March 16, 2026
Reponses to questions available on website	March 23, 2026
Submission deadline by 12:00PM	April 6, 2026
Follow Up Information and Interviews	April 14-16, 2026
Consultant Recommendation to Finance/Personnel Committee	May 12, 2026
Consultant Recommendation to Common Council	May 19, 2026

We plan on conducting interviews with up to three respondents but reserve the right to recommend a consultant without hosting any interviews.

M. MISCELLANEOUS AND GENERAL PROVISIONS

Contract Term- The contract resulting from the award of this RFP shall commence as soon as administratively possible following award notification and shall continue until all agreed upon tasks have been satisfactorily completed.

Right to Reject- The City reserves the right to reject any or all proposals, to waive technicalities, or to accept the proposal deemed to serve the City's best interest.

Proposal Costs- All costs associated with preparation, submittal and presentation of proposals shall be borne by the proposer.

Business Interest- Respondents to this Request for Proposal (RFP) must have no past, present or anticipated future interest or business association with the vendor(s), systems, technology, or solution(s) evaluated, recommended, or specified, and shall be entirely independent and impartial in the development of its requirements and recommendations.

A sample Consultant Agreement the City uses is included with this RFP.

"The City of De Pere is an Equal Opportunity Employer"

PROPOSAL FOR:

City of De Pere

Enterprise Resource Planning
Consulting Services

SUBMITTED BY:

Berry, Dunn, McNeil & Parker, LLC
2211 Congress Street, Portland, ME
04102

Ryan Doil, Project Principal

Berry, Dunn, McNeil & Parker, LLC
rdoil@berrydunn.com

**David Ledbetter, Engagement
Manager**

Berry, Dunn, McNeil & Parker, LLC
dledbetter@berrydunn.com

Corey Clafin, Project Manager

Berry, Dunn, McNeil & Parker, LLC
cclafin@berrydunn.com

SUBMITTED BY:

April 6, 2026 by 12 p.m. CDT

1. Cover Letter

April 6, 2026

City of De Pere
Finance Department
335 S. Broadway
De Pere, WI 54115

Dear Members of the Selection Committee:

On behalf of Berry, Dunn, McNeil & Parker, LLC ("BerryDunn," "we," "our"), I am pleased to submit this proposal in response to the City of De Pere's (the City's) request for proposals (RFP) for Enterprise Resource Planning (ERP) Consulting Services. We have read the City's request and reviewed its terms, conditions, and the contents presented therein. Our proposal is a firm and irrevocable offer valid for 120 days from the submission deadline of April 6, 2026.

a. Firm Introduction

BerryDunn is a nationally recognized professional services firm headquartered in Portland, Maine, with nine office locations. We are focused on **inspiring organizations to transform and innovate** and have preserved our reputation for excellence throughout our 52-year history. Our firm's culture is centered on a deep understanding of our clients' commitment to serving the public. We proudly tailor each of our projects to recognize the work our clients do every day. **We care about what we do, and we care about the people impacted by our work—including City staff and constituents.**

As it relates to the City's requested services, we would like to highlight the following unique attributes offered by our proposed team:



Demonstrated independence and vendor-neutral ERP selection process



Deep municipal Finance and Human Resources Information System (HRIS) expertise



Experience with Tyler Technologies migrations, including Incode/ERP Pro



Local government experience, including in Wisconsin (the State)

Requested, Negotiable Exceptions

As it relates to the City's RFP and the Sample Agreement, we have three requested negotiable exceptions we wish to present.

Sample Agreement, Section VII: Indemnification: BerryDunn has a robust professional liability policy for acts or omissions of BerryDunn, our agents, employees and subcontractors. Our professional liability insurance pays directly to a client who brings a claim based on negligence in professional services. This policy contains language within it that states that it will not apply if BerryDunn takes on additional liabilities under contract, such as the agreement to indemnify for anything other than our own professional negligence.

Sample Agreement, Section VIII: Insurance: BerryDunn carries a policy whereby any deficits in the requested insurance coverages are made up by an umbrella policy (such as carrying a general liability

BerryDunn is the brand name under which Berry, Dunn, McNeil & Parker, LLC and BDMP Assurance, LLP, independently owned entities, provide services. Berry, Dunn, McNeil & Parker, LLC provides tax, advisory, and consulting services. BDMP Assurance, LLP, a licensed CPA firm, provides attest services.

with \$1 million per occurrence and leveraging an umbrella policy above/beyond that amount as contrasted with the requested \$2 million per occurrence coverage).

Sample Agreement, Section XXVI, Termination of Work: As it relates to the sample termination clause, we would respectfully request that the resulting contract include language allowing for a reasonable notice for cure procedure. While we would not expect to experience the need to leverage such a cure period, the nature of professional services often lends itself to a collaborative process to cure any non-conforming services in a timely manner. Sample language is as follows: Either party may terminate this Agreement upon written notice to the other party in the event of substantial failure by the other party to perform in accordance with the terms of this Agreement through no fault of the terminating party; provided, however, that the terminating party has first given the other party written notice of the reason for such termination and the other party has failed to cure or rectify the issue or matter within fifteen (15) days of receipt of such notice.

We appreciate the opportunity to propose, and the time and consideration taken by the City to review our submission. As a principal in BerryDunn's Local Government Practice Group, I can attest to the accuracy of our materials, and I am legally authorized to bind, negotiate, make presentations on behalf of, and commit our firm and our resources. **If you have any questions regarding our proposal or updates on the evaluation process, please consider me your primary point of contact and feel free to contact me directly.**

Sincerely,



Ryan Doil, Project Principal

Berry, Dunn, McNeil & Parker, LLC

BerryDunn, 2211 Congress Street, Portland, ME 04102

Tel: 207.541.2343 | Email: rdoil@berrydunn.com

Table of Contents

1. Cover Letter	i
Table of Contents	iii
2. Firm Information	1
3. Experience Overview	3
4. Proposed Methodology	24
5. Proposed Fee	42
6. Work Sample	44

2. Firm Information

BerryDunn is a nationally recognized professional services firm focused on inspiring organizations to transform and innovate. With 76 principals and 35 owners, BerryDunn employs more than 990 staff across nine offices nationally. Our Consulting Services Team employs more than 400 staff and has been serving state, local, and quasi-governmental agencies for over 40 years. From extensive project experience for more than 900 state, local, and quasi-governmental agencies, our team brings valuable perspectives to every engagement. Our firm provides a full range of professional services that supports our ability to complete tasks outlined by the City on this initiative. These include:

Berry, Dunn, McNeil & Parker LLC
 Headquarters: 2211 Congress Street
 Portland, ME 04102
www.berrydunn.com
 52 years in Business

Point of Contact
 Ryan Doil, Principal
rdoil@berrydunn.com
 207.541.2343

- **Software Planning and Procurement**
- **Software Implementation Project Management and Oversight**
- **Business Process Reviews**
- **Organizational Change Management (OCM)**
- Organizational, Operational, and Staffing Analyses
- Performance Analyses
- Enterprise and Departmental Strategic Planning
- Leadership and Organization Development
- Master Planning
- Cost of Service and Fee Studies
- Project Assessments and Remediation
- IT Assessments
- IT Strategic Planning

Figure 1 illustrates the overall organization of BerryDunn's Local Government Practice Group. We provide unparalleled expertise and unique insights across these practices, supporting more than 600 local government clients in solving some of their biggest challenges and planning for success. Our consultants have experience serving state and local government agencies, providing them with an in-depth understanding of government operations, staffing needs, budgetary constraints, and the business processes required to provide necessary services to the internal divisions and the constituents City serves.

Figure 1: Local Government Practice Group Specialization



Our Highly Specialized Enterprise Digital Transformation Practice

Of note to the City, we have a dedicated **Enterprise Digital Transformation (EDT) Practice** that focuses on providing advisory services that address clients' technological and business process modernization needs. The EDT Practice offers more than 40 years of relevant consulting experience, as well as firsthand insights gained from team members' prior experience serving within local government

organizations. Leadership and subject matter experts (SMEs) within the EDT Practice are aligned with focus areas that allow them to specialize and offer customized approaches based on a client's geographic area and community, size and resources, technical environment, stakeholder groups, and industry. For instance, our experience with ERP projects, our familiarity with Tyler Technologies, and work with clients of similar size will benefit the City on this work effort. Having conducted more than 200 projects that span the system replacement life cycle or include business process improvement as a core focal point or part of a larger initiative, we bring unique insights and industry best practices to every engagement. We understand the functionality of local government organizations, and we understand the processes, policies, people, and technology that support it. It is through this and our independence and objectivity that we serve as trusted advisors to our clients and strong proponents to the projects they conduct.

BerryDunn Bridge and Our Independence



BerryDunn Bridge is a program facilitated by our Local Government Practice Group. This program was developed to promote information sharing between public-sector software providers and our consultants and helps continually expand our own—and our clients’—understanding of the public-sector software landscape. BerryDunn Bridge provides opportunities to share our clients’ needs with the software vendor community and gain knowledge of upcoming technological trends, recent product developments, and find target markets for software providers.

Public-sector software providers opt into this program to establish a cadence of meetings between their team members and our own to keep up to date on industry and client trends. This includes knowledge-sharing opportunities ranging from focused discussions between management teams to software demonstrations with a broader audience of consulting staff. As a result of this program, we can best serve our clients and pass on our knowledge gained—including modern software system capabilities not currently being utilized or perhaps even previously contemplated by our clients.

BerryDunn is not affiliated with any specific vendor, allowing us to provide truly independent advisory services to our clients. In that respect, we recognize the importance of networking and continuous market research to help ensure we are apprised of industry best practices, emerging trends, and updates in the software vendor community.

3. Experience Overview

a. Needs Assessment Experience

Our approach to the needs assessment is intentionally foundational

Our firm brings deep experience in conducting needs assessments that directly translate into well-aligned ERP solutions and, ultimately, successful implementations. Examples of this work are provided in **Section c.ii**.

Our approach to the needs assessment is intentionally foundational. The insights and analysis developed during this phase carry forward through the entire system selection lifecycle and into implementation. Specifically, the needs assessment informs the development of clear, traceable functional and technical requirements that serve as the baseline for evaluating ERP solutions and structuring vendor demonstrations. This continuity helps ensure that solution evaluation remains grounded in the City's operational realities and long-term objectives, rather than discrete feature comparisons.

We also emphasize examining current and future-state business processes as part of the needs assessment. By encouraging clients to thoughtfully consider process improvements and operational changes early, the selection process becomes an opportunity to evaluate true software-enabled transformation, setting the stage for a smoother implementation and greater long-term value realization.

b. Key Personnel

Organizational Chart

At BerryDunn, we believe in the synergy that accompanies a team approach. That said, we have carefully assembled a project team with unique and specialized qualifications that coincide with the needs and desired outcomes of the City. **These project team members will remain committed, available, and assigned to perform the City's requested work effort.**

Figure 2 describes the organizational structure of our project team, followed by a listing of project staff. It should be noted we do not intend to subcontract any portion of the City's desired scope of work.

Figure 2: Organizational Chart



About 70% of our consulting work comes from repeat business with clients. This speaks to our team’s ability to build strong working relationships that drive client satisfaction with our services and work products.

i. Capabilities and Experience of Project Team

Below and on the following pages, we list our project team members’ experience, qualifications, and expertise as they relate to projects of this nature and work with comparable local government clients. Many have worked on Wisconsin engagements and are knowledgeable about negotiating ERP contracts, governmental accounting standards, and State laws and practices. Our project team members’ full resumes can be found on [the following pages](#) for further review.



Ryan Doil, MBA, Prosci® CCP, CPPB, NIGP-CPP | Project Principal

Ryan is a principal in the Local Government Practice Group with over 16 years’ experience who focuses on ERP system selection and implementation activities – having been involved in over 130 municipal software system planning and implementation projects. He is a Certified Professional Public Buyer (CPPB), Certified Procurement Professional (NIGP-CPP), and member of the National Institute of Government Procurement (NIGP). Ryan brings more than five years of experience in a federal procurement role and has managed projects similar in scope and size to the services requested by the City for a number of BerryDunn clients. Ryan is skilled in managing the challenges and constraints for complex, enterprise-wide projects, such as the one planned by the City. He has led and assisted in the assessment of current environments, helped define future system requirements through a collaborative and structured system evaluation process, and been involved in overseeing the implementation of a variety of software systems.

As the **project principal**, Ryan will have overall responsibility for the services we have proposed to the City. He will help ensure commitment of our firm and appropriate resource allocation and will review and approve all deliverables in accordance with BerryDunn's quality assurance processes. He will also provide leadership support to our project lead and project team, as needed.



David Ledbetter, PMP®, Prosci® CCP | Engagement Manager

David is a senior manager in our Local Government Practice Group with over 10 years' experience in systems planning, selection, and implementation engagement with local government clients. He focuses on finance and administration-related projects, including business process analysis, system selection and implementation, and OCM activities. He has managed more than 65 implementations and brings a unique set of qualifications to this role, having experience serving as finance administrator for Whitman County, WA. As finance administrator, David served as liaison for the county auditor to implement a new ERP software suite, prepare financial reports, and lead change management initiatives.

As the **engagement manager**, David will work with the project manager to monitor the project's progress, track the initiation and completion of tasks and milestones, and oversee the work of our project team.

Your Dedicated Project Manager



Kate Offerdahl-Joyce, NIGP-CPP | Procurement Lead

Kate is a manager in our Local Government Practice Group who is an experienced project manager with a focus on procurement and contract analysis, having led more than 30 municipal clients through comparable system selection projects. They bring more than 15 years of procurement, process improvement, and recommendation implementation experience. Through work with Wisconsin clients including the City of Superior, Madison Metropolitan Sewerage District, and Outagamie and Waukesha counties, Kate is familiar with governmental accounting standards and knowledgeable about State laws and practices. With a strong background in project management, Kate has hands-on experience working with a wide array of teams and organizations to improve business processes to be more efficient, user-friendly, and time and cost-effective. Kate is also a National Institute of Governmental Purchasing Certified Procurement Professional.

As the **project manager**, Kate will act as primary liaison with the City and will be responsible for maintaining a constructive and clear line of communication between City staff and BerryDunn. Kate will monitor project progress, track the initiation and completion of tasks and milestones, and facilitate our meetings and project activities. In addition, they will oversee the RFP processes with the City as well as provide perspective on procurement process, contract negotiations and approval process, and best practices.



Corey Clafin | Lead Business Analyst

Corey Clafin is a manager in BerryDunn's Local Government Practice Group who leads technology projects—such as needs assessments, system selections and implementations—and organizational development initiatives—such as strategic plans and executive coaching. Corey specializes in carefully crafting teams of SMEs and executing an approach that is tailored to the unique needs of each client. Corey served as project manager of the City of Superior's ERP selection project and led a systems replacement project with Outagamie County.

As the **lead business analyst**, Corey will provide business analysis support to the project team as it relates to facilitating meetings, preparing status reports, and developing project deliverables in a timely

manner. Corey will also help assess the City's current environment, develop requirements, and form recommendations across functional areas.



Louisa Hennecart | Business Analyst

Louisa is a consultant in BerryDunn's Local Government Practice Group with experience in program and project management and coordination. She has a proven ability to support project managers by overseeing project setup, budgeting, and use of financial tracking tools. Further, Louisa is skilled in facilitating cross-departmental collaboration, managing vendor relationships, and coordinating meetings.



Michelle Graham, MS, MBTI, CPM | Business Analyst

Michelle is a senior consultant in our Local Government Practice Group with experience managing and executing various types of projects and initiatives while maintaining a constant focus on organizational development and human capital management (HCM). Prior to joining BerryDunn, Michelle held various leadership roles for the City of Pearland, Texas, for more than 20 years. Her experience includes six years of as director of HR and more than 15 years of parks and recreation leadership. She has a proven track record in employee retention and has earned multiple departmental and individual awards for her initiatives. She utilizes her professional skills, abilities, ethics, experience, and education to focus on the clients' needs and provide for meaningful work.



Ronny Heredia | Business Analyst

Ronny is a member of BerryDunn's Local Government Practice Group with experience supporting public-sector organizations through financial management, systems modernization, and compliance oversight. Ronny has led initiatives involving process improvement, automation, and the development of enterprise reporting and management tools, and has worked with senior leadership to improve transparency, strengthen controls, and support long-term fiscal sustainability.

As the **business analysts**, Louisa, Michelle and Ronny will provide general business analysis support to the project team as it relates to facilitating meetings, preparing status reports, and developing project deliverables in a timely manner, and help assess the City's current environment, develop requirements, and form recommendations across functional areas.

Ryan Doil



MBA, Prosci® CCP, CPPB, NIGP-CPP

Principal | Berry, Dunn, McNeil & Parker, LLC

EDUCATION, CERTIFICATIONS, AND MEMBERSHIPS

MBA, University of Southern Maine

BA, Political Science and History, University of Vermont

Prosci® Certified Change Practitioner

Certified Professional Public Buyer (CPPB)

Certified Procurement Professional (NIGP-CPP)

National Institute of Government Procurement (NIGP), member

Ryan Doil brings more than five years of experience working in a federal procurement role and 16 years working with the public sector. Through this work, Ryan offers a valuable perspective on the effective oversight of complex, multi-organizational government information systems management, procurement processes and compliance, and organizational change.

EXPERIENCE

ERP System Selection and Implementation: Ryan has extensive experience leading organizations through ERP system selection projects. In each, Ryan has worked with all stakeholder groups to confirm current environment challenges and business drivers for the project, document future system requirements, and lead the client through a collaborative and structured system evaluation process.

RFP Development: Leveraging his public-sector procurement experience, as well as his knowledge of project and software systems, Ryan is uniquely situated to facilitate the development and issuance of effective and thorough RFPs. Working jointly with client staff, Ryan has facilitated the development and issuance of more than 150 public-sector RFPs for software system selection initiatives.

Contract Negotiation: Ryan has been involved in more than 120 public sector contract negotiation processes involving large, and complex, software and implementation services scope. Leveraging his public sector background, best practices learned as a CPPB and NIGP-CPP, as well as experience in managing software implementations, Ryan is uniquely situated to draw on this knowledge and experience to assist clients.

CLIENT LIST

Calumet County, WI

Chicago Metropolitan Agency for Planning, IL

City and County IT Commission, WI

City of Cleveland, OH

City of Detroit, MI

City of Lawrence, KS

City of Shoreline, WA

City of Snoqualmie, WA

City of Spokane Valley, WA

City of Stillwater, OK

City of Superior, WI

Gallatin County, MT

Morrow County, OR

Outagamie County, WI

Peoria County, IL

Saginaw County, MI

Washtenaw County, MI

Waste Commission of Scott County, IA

David Ledbetter



PMP®, Prosci® CCP

Senior Manager | Berry, Dunn, McNeil & Parker, LLC

EDUCATION, CERTIFICATIONS, AND MEMBERSHIPS

BBA, Finance, Eastern Washington University

Certified Project Management Professional® (PMP®)

Prosci® Certified Change Practitioner

David Ledbetter is a senior manager in our Local Government Practice Group with more than 10 years of experience in systems planning, selection, and implementation engagements with local government clients. His experience includes software implementation, project management, OCM, knowledge transfer, risk management and requirements development, as well as accounting technology and government finance as finance administrator for Whitman County, Washington

EXPERIENCE

Business Process Analysis: As an engagement and project manager with BerryDunn, and in prior roles as an implementation consultant and project manager with Tyler Technologies, David partnered with clients to gain a comprehensive understanding of business processes and technical requirements to help ensure that system functionality addressed all client needs. His experience includes current environment assessments and existing data documentation analyses and has resulted in his ability to identify challenges with existing processes and provide recommendations.

System Assessment, Selection, and Implementation: David is an active engagement and project manager on enterprise-wide projects, focusing on system selection and implementation. His experience encompasses the full system life cycle—needs assessments, requirements definition, RFP development, contract negotiations and implementation. His experience includes delivering high-quality knowledge transfer services to clients, allowing them to use complex software products efficiently and effectively to achieve daily operations.

CLIENT LIST

Central Texas Regional Mobility Authority, TX
City of Alameda, CA
City of Auburn, WA
City of Bettendorf, IA
City of Corona, CA
City of Creswell, OR
City of El Monte, CA
City of Fort Collins, CO
City of Fountain Valley, CA
City of Galveston, TX
City of Helena, MT

City of Independence, MO
City of Irvine, CA
City of Lawrence, KS
City of Livermore, CA
City of Long Beach, CA
City of Mercer Island, WA
City of Oxnard, CA
City of Redding, CA
City of Richland, WA
City of San Leandro, CA
City of Santa Cruz, CA
City of Santa Fe, NM

City of Snoqualmie, WA
City of Spokane Valley, WA
City of St. Charles, MO
City of Wheat Ridge, CO
City of Woodbury, MN
Community Transit, WA
Klickitat County, WA
Mesa County, CO
Morrow County, OR
Pitkin County, CO
Waukesha County, WI
Washington County, OR

Kate Offerdahl-Joyce



NIGP-CPP

Manager | Berry, Dunn, McNeil & Parker, LLC

EDUCATION, CERTIFICATIONS, AND MEMBERSHIPS

BA, History, University of MN – Twin Cities

Master's Certificates in Government Contracting, Commercial Contracting, and IT/Information Security

Project Management, Villanova University

National Institute of Governmental Purchasing Certified Procurement Professional (NIGP-CPP)

Kate Offerdahl-Joyce is a manager in the Local Government Practice Group who focuses on procurement and contract analysis. They bring more than 15 years of procurement, process improvement, and recommendation implementation experience. With a strong background in project management, Kate has hands-on experience working with a wide array of teams and organizations to improve business processes to be more efficient, user-friendly, and time- and cost-effective. Kate is also a National Institute of Governmental Purchasing Certified Procurement Professional.

EXPERIENCE

Project Management: Kate's project management experience is extensive and wide-reaching. They have worked in various capacities, including across departments, with IT and supporting sales and product development. In their project management engagements, Kate has led all aspects of project management, including inception, discovery, planning, implementation, and execution. In all that they do, they seek to identify opportunities to improve, implement effective change, and help ensure successful partnerships.

Government Procurement: Kate has over 15 years of experience with state and local government procurement. This experience includes RFP writing, vendor evaluation, and response development. They also are well-versed in eProcurement, reporting, and process improvement. While the IT Project Manager for National Association of State Procurement Officials (NASPO) ValuePoint, they worked with many public-sector offices, departments, and organizations, leading the implementation of a national eProcurement software as a service (SaaS) solution, improving business processes, and supporting onboarding and training activities.

CLIENT LIST

Athens-Clark County, GA

City of Amarillo, TX

City of Auburn, WA

City of Cedar Falls, IA

City of Corona, CA

City of Galveston, TX

City of Irvine, CA

City of Jacksonville, NC

City of Lakeville, MN

City of Redding, CA

City of San Leandro, CA

City of Santa Cruz, CA

City of Scottsdale, AZ

City of St. Charles, MO

City of Superior, WI

City of Tempe, AZ

City of Weatherford, TX

City of Wilmington, NC

Hamilton County, IN

Harford County, MD

Jefferson Parish, LA

Madison Metropolitan Sewerage District, WI

McLean County, IL

Outagamie County, WI

Scott County, IA

Waukesha County, WI

Corey Claflin



CAPM®, COBIT

Manager | Berry, Dunn, McNeil & Parker, LLC

EDUCATION, CERTIFICATIONS, AND MEMBERSHIPS

BA, Economics and Political Science, University of Maine

Certified Associate in Project Management® (CAPM®)

COBIT 2019 Foundations Certified, ISACA

Corey Claflin is a manager in BerryDunn’s Local Government Practice Group who has extensive experience in leading city and county level public-sector client through complex initiatives including software procurements and implementations and strategic planning.

EXPERIENCE

Project Management: Corey is an experienced project manager. He has led projects through the full life cycle—from software assessments to procurement and vendor evaluation through implementation project management and OCM. This includes serving as project manager of the City of Superior, Wisconsin’s ERP selection project and leading a systems replacement project with Outagamie County, Wisconsin. He is adept at stakeholder engagement and buy-in and experienced in identifying project risks and deploying mitigation strategies.

Strategic Planning: Corey has assisted in the development of numerous IT strategic plans for public-sector organizations. He regularly leads research and fact-finding efforts, interviews, and focus groups with the goal of understanding the organization’s current state, policies, practices, challenges, and opportunities. He synthesizes data and community input and assists in developing final deliverables.

CLIENT LIST

Adams County, CO	Douglas County, NE	Peoria County, IL
City of Allen, TX	Galveston County, TX	Powhatan County, VA
City of Bettendorf, IA	Hamilton County, IN	Sonoma Resource Conservation District, CA
City of Bloomington, MN	Louisville Metro Public Health and Wellness, KY	Town of Scarborough, ME
City of Detroit, MI	Maui County, HI	Tri-County Health Department, CO
City of Irvine, CA	Metro Parks Tacoma, WA	Village of Downers Grove, IL
City of Midvale, UT	Mobile County Health Department, AL	Wake County Health and Human Services Department, NC
City of Pasadena, CA	Outagamie County Department of Health and Human Services, WI	Yamhill County Health and Human Services Department, OR
City of Superior, WI		
City of Worcester, MA		
Clark County Department of Public Health, WA		

Louisa Hennecart



Consultant | Berry, Dunn, McNeil & Parker, LLC

EDUCATION, CERTIFICATIONS, AND MEMBERSHIPS

BS, International Politics, American University of Paris
Certificate, A/E/C Project Management, PSMJ

Louisa Hennecart is a consultant in BerryDunn’s Local Government Practice Group with experience in program and project management and marketing coordination. She has proven ability to support project managers by overseeing project setup, budgeting, and use of financial tracking tools. Further, Louisa is skilled in facilitating cross-departmental collaboration, managing vendor relationships, and coordinating meetings.

EXPERIENCE

Business Analysis: Louisa supports project managers in project setup and ongoing management, helping ensure accurate financial tracking and performance reporting across engagements. Louisa prepares project reports, including through the use of S curves, cash flow forecasts, and backlog summaries, to inform strategic decision-making and highlight performance trends. She has coordinated contracts, proposals, and project documentation while developing business analytics and financial summaries using Power BI and Excel. Louisa has managed invoicing, performed timesheet reconciliation, and conducted quality assurance/quality control reviews to maintain accuracy and compliance. She facilitates cross-departmental communication by organizing meetings, strengthening collaboration and operational efficiency.

Artificial Intelligence (AI): Louisa uses her background in AI to assist clients with their vision for use of AI and machine learning in enterprise systems. As a solutions program manager for a data translation and localization company that specializes in creating high-quality linguistic datasets for AI and natural language processing (NLP) models, Louisa managed the creation and acquisition of datasets used for AI engine training and oversaw global operational logistics for an AI-related team. She supported solution architecture efforts for new clients and AI-enhanced services and helped establish communication protocols, documentation, and deployment of new processes. She brings a background in AI bias reduction, operationalizing AI workflows, and coordinating teams and processes that support AI engine development.

CLIENT LIST

City of Arlington, TX
City of Honolulu, HI

Sonoma County, CA

Town of Parker, CO

Michelle Graham



MBTI®, CPM, LSSGB

Senior Consultant | Berry, Dunn, McNeil & Parker, LLC

EDUCATION, CERTIFICATIONS, AND MEMBERSHIPS

MS, Recreation and Leisure Studies, Southern Connecticut State University

BA, Speech Communication, Sam Houston State University

Certified Myers-Briggs Type Indicator® (MBTI®) Practitioner and Trainer

Certified Public Manager (CPM)

Lean Six Sigma Green Belt Certified (LSSGB)

Member, Public Sector Human Resources Association (PSHRA)

Member, Society of Human Resources Management (SHRM)

Michelle Graham is a senior consultant in the Local Government Practice Group. She has experience managing and executing various types of projects and initiatives while maintaining a constant focus on organizational development and HCM. Prior to joining BerryDunn, Michelle held various leadership roles for the City of Pearland, Texas for more than 20 years. Her experience includes six years of as director of human resources and more than 15 years of parks and recreation leadership. She has a proven track record in employee retention and has earned multiple departmental and individual awards for her initiatives. She utilizes her professional skills, abilities, ethics, experience, and education to focus on the clients' needs and provide for meaningful work.

EXPERIENCE

HCM: During her tenure with BerryDunn, Michelle has provided project management services for numerous public-sector clients, including system selection and implementation projects for both financial and HCM software systems. Prior to joining BerryDunn and while working for the City of Pearland, Texas, Michelle initiated employee engagement efforts over three years, resulting in her employer being recognized as a Top Workplace in 2019. Additionally, she kickstarted multiple successful development programs to grow staff through low-cost professional development opportunities. With an eye for growth and career advancement, Michelle has mentored and coached many employees resulting in their growth and career advancement while serving as director of human resources. In addition, she initiated and created multiple engagement opportunities for staff at various levels, including a women's affinity group; a Lean process improvement team; and an employee recognition team. Over the course of two years, she increased the retention rate of seasonal employees from 8.7% to 30.4%.

CLIENT LIST

City of Bettendorf, IA
City of Cleveland, OH
City of Beaverton, OR
City of Bettendorf, IA
City of Carrollton, TX
City of Cleveland, OH

City of Peoria, IL
City of Redding, CA
Cumberland County, PA
Klickitat County, WA
Lancaster County, NE
Marion County, OR

Omaha-Council Bluffs
Metropolitan Area Planning
Agency, NE
Sheboygan County, WI
Village of Northbrook, IL
Waukesha County, WI

Ronny Heredia



Senior Consultant | Berry, Dunn, McNeil & Parker, LLC

EDUCATION, CERTIFICATIONS, AND MEMBERSHIPS

Masters, Public Administration, University of Connecticut
Bachelor of Arts, History and Urban Studies

Ronny is a member of BerryDunn’s Local Government Practice Group. He brings to the firm over eight years of experience supporting public-sector organizations through financial management, systems modernization, and compliance oversight. His experience includes operational capital planning, grant administration, financial systems audits, and the design and implementation of enterprise level reporting and management tools. Ronny has led initiatives involving process improvement, automation, and the development of enterprise reporting and management tools, and has worked with senior leadership to improve transparency, strengthen controls, and support long-term fiscal sustainability.

EXPERIENCE

Project Management: Ronny has served as a Project Manager with a high volume of projects to conduct. He has directed cross-functional teams and orchestrated project lifecycles from acquisition to sale. He coordinated municipal inspections, permitting, and quality assurance to meet project deadlines.

Financial Systems Improvement: Ronny has led complex financial systems and organizational improvement initiatives focused on grants, capital planning, and compliance. His work includes evaluating current-state financial processes, identifying systemic risk and inefficiencies, and designing future-state solutions. These processes are supported by data analytics, automation, and custom systems. These efforts resulted in measurable cost avoidance, strengthened compliance, and scalable implementation plans aligned with organizational capacity and long-term operational needs.

Financial Analysis: Ronny has provided financial and operational leadership for a large, complex capital initiative, overseeing funding strategy, forecasting, and compliance across multiple stakeholder groups. His work has included developing long-range financial plans, producing tailored reporting for academic, corporate, and federal partners, and managing integrated financial and HR operations. He also supports organizational objectives through program development, including the design and implementation of a diversity-focused internship initiative that combined professional development, engagement, and workforce pipeline goals.

c. References and Comparables

i. Relevant References

The greatest testament of our high-quality work is the expressed satisfaction shared by our clients. Below, we describe and provide contact information for several recent projects for the City's consideration. These clients can speak well to the quality and satisfaction we deliver on comparable engagements.

City of Superior, Wisconsin

ERP Software Selection Advisory Services

06/2024 – Present

Nick Rhinehart, Finance Director

715.395.7291 | rhinehartn@superiorwi.gov



The City engaged BerryDunn to assist with assessing its current software systems and plan for the selection of a future ERP solution. BerryDunn conducted project planning, data collection, and fact-finding activities with City departments and technical staff to review and document existing business processes, system functionality, and integration considerations. Based on this work, we developed a needs assessment that identified current challenges, future-state goals, and key decision points to help ensure alignment between business requirements and system capabilities. BerryDunn then supported the City through market research, requirements development, and preparation of a comprehensive solicitation package, and assisted with vendor evaluation activities, demonstrations, and contract negotiations to help ensure the City selected a solution that supports sustainable operations moving forward. We are currently providing full-time project management of the implementation of the City's chosen solution, Oracle Netsuite.

Waukesha County, Wisconsin

ERP and HCM System Study

12/2022 – 01/2024

Amber Botsch, Project Manager

262.896.8368 | abotsch@waukeshacounty.gov



Waukesha County retained BerryDunn to assist with assessing current software systems and processes to identify future business software needs. We conducted fact-finding and business process analysis meetings with the goal of reviewing, evaluating, and documenting the County's existing processes followed by the development of business process diagrams. Our team used its understanding of the County's current environment and industry best practices to help make recommendations for future-state business process workflows. Our recommendations were included in a needs assessment and gap analysis report to serve as the basis of research, analysis, to-be process identification, and recommendations development. We assisted the County with future-state planning to incorporate sustainable processes and software systems moving forward as the County implemented the Workday system.

Morrow County, Oregon

ERP Selection Services and Implementation Assistance

12/2023 – Present

Kevin Ince, Finance Director

541.676.5615 | kince@co.morrow.or.us



The County retained BerryDunn to assist with incorporating a centralized ERP system to replace its aging Tyler Incode financial system. We assisted the County with requirements gathering and development of an RFP for a replacement system with increased functionality and better integration with its HRIS, and selection of a new asset management solution. We then facilitated vendor demonstrations and the County's review of vendor proposals, and contract negotiations with the selected vendor. We are currently serving as the County's project manager as it implements a new ERP solution, Tyler Enterprise ERP, and asset management solution.

ii. Comparable Projects

Commitment to the State

The City will benefit from BerryDunn's demonstrated commitment to serving public-sector clients in the State of Wisconsin (the State), including counties. We have developed a strong understanding of the public-sector landscape in the State through recent or ongoing consulting engagements with the clients listed on the following page. Those where we performed similar work are in **bold**.

- **Calumet County**
- City of Janesville
- City of La Crosse
- **City of Superior**
- City of Waukesha
- **City-County Information Technology Commission (City of Wausau and Marathon County)**
- Madison Metropolitan Sewerage District
- Milwaukee County
- North Central Health Care
- **Outagamie County**
- **Sheboygan County**
- **Vilas County**
- **Waukesha County**
- Waukesha County Auditor's Office

Systems Consulting

BerryDunn has extensive experience in providing a variety of system consulting services to clients similar in size and complexity to the City. In Table 1, we have included a summary of select public-sector system consulting projects with which our firm has assisted. We have also provided population data for additional context. The table details identifies where we have performed needs assessments, requirements definition, request for information (RFI) or RFP development, evaluation criteria development, vendor selection, contract negotiations and approval assistance, and implementation assistance. Given the volume of clients, we cannot list the proposed ERP systems or status of implementation for each but would be pleased to offer more specific information at the City's request at the appropriate time. Clients where we assisted with Incode are in **bold**.

Table 1: Systems Consulting Experience

	BerryDunn's Involvement						
	Needs Assessment	Requirements Definition	RFI/RFP Development	Evaluation Criteria Development	Vendor Selection	Contract Negotiations and Approval	Implementation Assistance
Counties and Regional Governments							
Adams County, Colorado (519,570)	•	•	•	•	•	•	•
Berks County, Pennsylvania (415,000)	•	•	•	•	•	•	
Calumet County, Wisconsin (53,000)	•	•	•				
Carver County, Minnesota (102,100)						•	•
Chesterfield County, Virginia (353,000)	•	•	•	•	•	•	
Clark County, Washington (488,000)	•	•	•	•	•	•	•
Coconino County, Arizona (140,000)						•	•
Doña Ana County, New Mexico (218,000)	•	•	•	•	•	•	
Ellis County, Texas (185,000)	•	•	•	•	•	•	•
Fauquier County, Virginia (75,600)						•	•
Goochland County, Virginia (23,000)	•	•	•	•	•	•	•
Hamilton County, Indiana (338,000)	•	•	•	•	•	•	•
Henrico County, Virginia (325,000)	•	•	•	•	•	•	
Imperial County, California (180,000)	•	•	•				
Kaua'i County, Hawai'i (72,000)	•	•	•	•	•		
King George County, Virginia (28,000)	•	•	•	•	•	•	
Maui County, Hawai'i (167,000)	•	•	•	•	•	•	
McLean County, Illinois (170,000)	•	•	•	•	•	•	
Mesa County, Colorado (162,000)	•	•	•	•	•	•	•
Middlesex County, Virginia (10,900)	•	•	•	•	•	•	
Minnehaha County, South Dakota (183,000)	•	•	•	•	•	•	•
Mobile County Health Dept, Alabama (415,000)	•	•	•	•	•	•	•

	BerryDunn's Involvement						
	Needs Assessment	Requirements Definition	RFI/RFP Development	Evaluation Criteria Development	Vendor Selection	Contract Negotiations and Approval	Implementation Assistance
Monroe County, Florida (74,000)	•	•	•	•	•	•	•
Montgomery County, Pennsylvania (831,000)	•	•	•	•	•	•	•
Morrow County, Oregon (12,000)	•	•	•	•	•	•	•
Outagamie County, Wisconsin (184,000)	•	•	•	•	•	•	•
Peoria County, Illinois (179,000)	•	•	•	•	•	•	•
Person County, North Carolina (39,000)							•
Saginaw County, Michigan (191,000)	•	•	•	•	•	•	•
Scott County, Iowa (166,000)	•	•	•	•	•	•	•
Sonoma County, California (488,000)	•	•	•	•	•	•	
Sheboygan County, Wisconsin (118,000)						•	•
Stearns County, Minnesota (164,000)	•	•	•	•	•	•	
Sussex County, Delaware (200,000)	•	•	•	•	•	•	•
Wake County, North Carolina (1,129,000)	•	•	•	•	•	•	•
Waukesha County, Wisconsin (407,000)	•	•	•	•	•	•	
Williamson County, Texas (727,000)	•	•	•	•	•	•	•
Yamhill County, Oregon (107,000)	•	•	•	•	•	•	•
Municipalities							
City of Alameda, California (79,000)							•
City of Amarillo, Texas (199,000)	•	•	•	•	•	•	•
City of Arlington, Texas (394,000)	•	•	•	•	•	•	•
City of Aurora, Colorado (369,000)	•	•	•	•	•	•	•
City of Avondale, Arizona (85,000)	•	•	•	•	•	•	•
City of Beaverton, Oregon (97,000)	•	•	•	•	•	•	•

	BerryDunn's Involvement						
	Needs Assessment	Requirements Definition	RFI/RFP Development	Evaluation Criteria Development	Vendor Selection	Contract Negotiations and Approval	Implementation Assistance
City of Bettendorf, Iowa (40,000)	•	•	•	•	•	•	•
City of Boca Raton, Florida (91,000)	•	•	•	•	•	•	•
City of Boulder, Colorado (105,000)							•
City of Brighton, Colorado (40,000)	•						
City of Broken Arrow, Oklahoma (112,000)	•	•	•	•	•	•	•
City of Burlington, Vermont (43,000)							•
City of Cedar Falls, Iowa (41,000)	•	•	•	•	•	•	•
City of Cedar Park, Texas (77,600)	•	•					
City of Cleveland, Ohio (365,000)	•	•	•	•	•	•	•
City of Coral Springs, Florida (128,000)	•	•	•	•	•	•	•
City of Corona, California (161,500)	•	•	•	•	•	•	•
City of Danville, Virginia (41,000)	•	•	•	•	•	•	
City of Denton, Texas (170,000)	•	•	•	•	•	•	
City of DeSoto, Texas (53,000)	•	•	•	•	•	•	
City of Detroit, Michigan (675,000)	•	•	•	•	•	•	•
City of Dover, Delaware (37,453)	•	•	•	•	•	•	•
City of Duncanville, Texas (40,000)							•
City of Edina, Minnesota (52,000)	•	•	•	•	•	•	•
City of El Monte, California (109,000)							•
City of Fargo, North Dakota (122,000)	•	•	•	•	•	•	
City of Farmers Branch, Texas (35,000)	•	•	•	•	•	•	•
City of Fort Collins, Colorado (165,000)	•	•					
City of Fountain Valley, California (56,000)	•	•	•	•	•	•	•
City of Frisco, Texas (177,000)	•	•	•	•	•	•	•
City of Gahanna, Ohio (35,000)	•	•	•	•	•	•	•

	BerryDunn's Involvement						
	Needs Assessment	Requirements Definition	RFI/RFP Development	Evaluation Criteria Development	Vendor Selection	Contract Negotiations and Approval	Implementation Assistance
City of Gaithersburg, Maryland (68,000)	•						
City of Galveston, Texas (53,000)	•	•	•	•	•	•	•
City of Garland, Texas (238,000)	•						
City of Glendale, Arizona (237,000)	•	•	•	•	•	•	•
City of Grand Prairie, Texas (193,837)							•
City of Helena, Montana (32,000)	•	•	•	•	•	•	•
City of Independence, Missouri (117,000)	•	•	•	•	•	•	•
City of Irvine, California (273,000)	•	•	•	•	•	•	•
City of Irving, Texas (230,000)	•	•	•	•	•	•	•
City of Jacksonville, North Carolina (73,000)	•	•	•	•	•	•	
City of La Mesa, California (60,000)	•						
City of Lakeville, Minnesota (64,000)	•	•	•	•	•	•	•
City of Lawrence, Kansas (96,000)	•	•	•	•	•	•	•
City of Livermore, California (90,000)	•	•	•	•	•	•	
City of Long Beach, California (470,000)							•
City of Mansfield, Texas (70,000)	•	•	•	•	•	•	
City of Mesquite, Texas (147,000)	•	•	•	•	•	•	•
City of Midland, Texas (119,000)	•	•	•	•	•	•	•
City of Minot, North Dakota (48,000)						•	•
City of Ormond Beach, Florida (42,000)							•
City of Pasadena, California (140,000)	•	•	•	•	•	•	•
City of Pearland, Texas (127,000)	•	•	•	•	•	•	•
City of Philadelphia, Pennsylvania (1,581,000)	•	•					•
City of Plano, Texas (287,000)	•	•	•	•	•	•	•

	BerryDunn's Involvement						
	Needs Assessment	Requirements Definition	RFI/RFP Development	Evaluation Criteria Development	Vendor Selection	Contract Negotiations and Approval	Implementation Assistance
City of Puyallup, Washington (41,000)						•	•
City of Redding, California (92,000)	•	•	•	•	•	•	•
City of Richland, Washington (53,000)	•	•	•	•	•	•	•
City of San Leandro, California (90,000)	•	•	•	•	•	•	•
City of Santa Cruz, California (63,000)	•	•	•	•	•	•	•
City of Santa Fe, New Mexico (70,000)	•	•	•	•	•	•	•
City of Simi Valley, California (126,000)							•
City Spokane Valley, Washington (98,000)	•	•	•	•	•	•	•
City of St. Charles, Missouri (70,000)	•	•	•	•	•	•	
City of Stillwater, Oklahoma (50,000)	•	•	•	•	•	•	
City of Sugar Land, Texas (89,000)			•	•	•	•	•
City of Surprise, Arizona (121,000)	•	•	•	•	•	•	•
City of Tampa, Florida (388,000)	•	•	•	•	•	•	•
City of Toledo, Ohio (265,000)	•	•	•	•	•	•	
City of Tucson, Arizona (525,000)	•	•	•	•	•	•	•
City of Weatherford, Texas (31,000)	•	•	•	•	•	•	•
City of Wheat Ridge, Colorado (31,000)	•	•	•	•	•	•	
City of Wilmington, North Carolina (117,000)	•	•	•	•	•	•	•
Town of Front Royal, Virginia (16,000)	•	•	•	•	•	•	•
Village of Oak Park, Illinois (52,000)	•	•	•	•	•	•	•
Regional and Special Purpose							
Coachella Valley Association of Governments, California (represents 10 cities, one county, and four Native American tribes)	•	•	•	•	•	•	•

	BerryDunn's Involvement						
	Needs Assessment	Requirements Definition	RFI/RFP Development	Evaluation Criteria Development	Vendor Selection	Contract Negotiations and Approval	Implementation Assistance
Chicago Metropolitan Agency for Planning, Illinois (CMAP) (2,710,000)	•	•	•	•	•	•	•
City-County Information Technology Commission (CCITC), Wisconsin (serves Marathon County, the City of Wausau, three counties' healthcare, four police departments, and Marathon public library system)	•	•	•	•	•	•	
Consumnes Community Services District, California (210,000)	•	•	•	•	•	•	
Lafayette Consolidated Government, Louisiana (242,000)	•	•	•	•	•	•	•
Louisville/Jefferson County Metro, Kentucky (740,000)	•	•	•	•	•	•	•
Loveland Housing Authority, Colorado (organization assists 1,200 households)	•	•	•	•	•	•	
Madison Metropolitan Sewer District, Wisconsin (429,000)	•	•	•	•	•	•	•
Metropolitan Government of Nashville and Davidson County, Tennessee (684,000)	•	•	•				•
Omaha-Council Bluffs Metropolitan Area Planning Agency, Nebraska (968,000)	•	•	•	•	•	•	
Tri-County Health Department, Colorado (1,400,000)	•	•	•	•	•	•	•
Waste Commission of Scott County, Iowa (175,000)	•	•	•	•	•	•	

Enterprise System Familiarity

BerryDunn has extensive experience assisting clients in every stage of the enterprise system planning, selection, and implementation life cycle; experience and familiarity with most systems and their associated modules in the marketplace; and lack of affiliation with any specific vendor. Our experience assessing a wide variety of vendors means that we understand the capabilities and limitations of today's systems. Enterprise systems that we have reviewed as part of system planning engagements and those that clients have selected for implementation are included in Figure 3 below. While BerryDunn does not

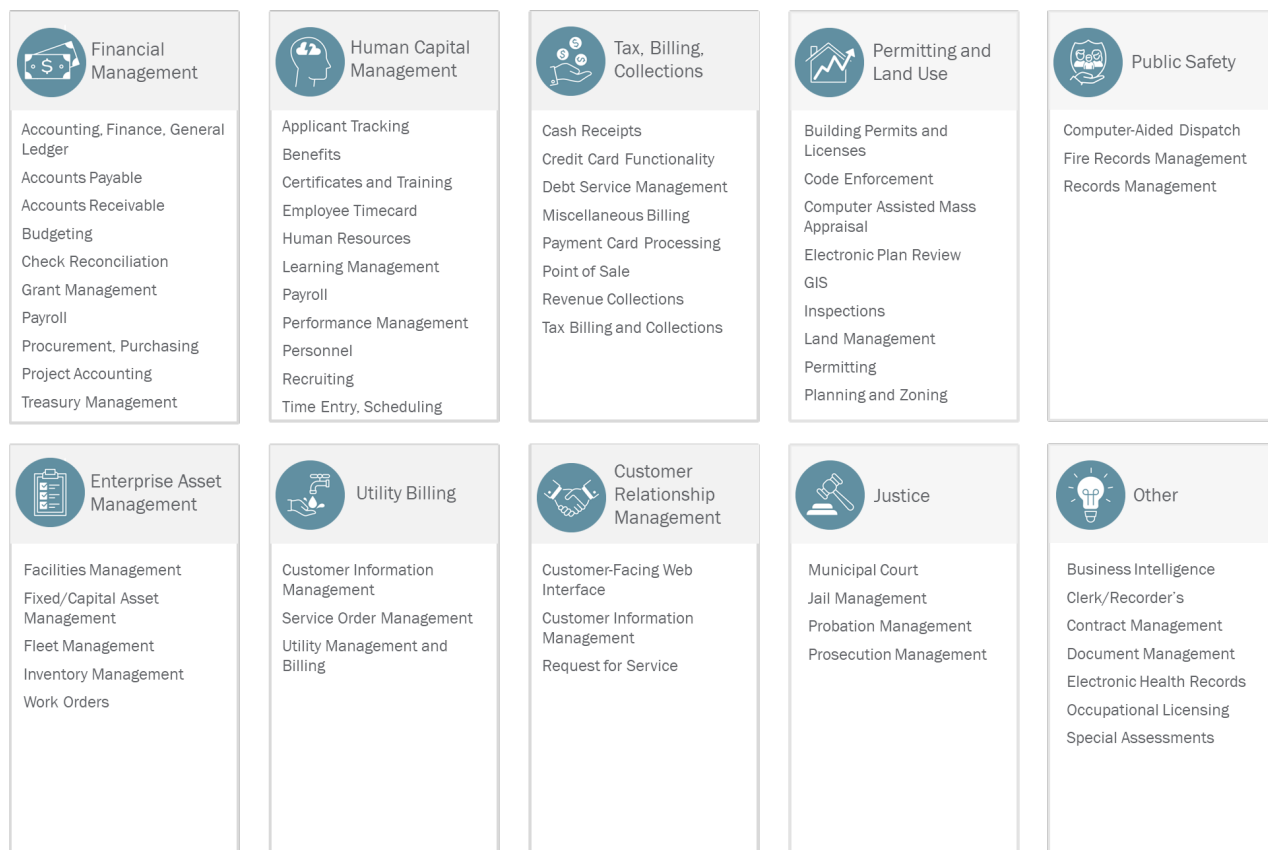
recommend particular systems, we provide clients with the information, education, and tools needed to feel confident in the decision they make for moving forward with future solutions.

Figure 3: Enterprise System Vendors



The City will be pleased to notice that we have experience with all in-scope modules, described in Figure 4, thereby helping ensure a thorough and insightful process.

Figure 4: Functional Modules



iii. Our Experience with Tyler Incode

Please refer to **Sections c.i and c.ii** for select projects that involved Tyler Incode.

4. Proposed Methodology

Project Understanding

The City delivers a wide range of municipal services that depend on effective financial, HR, permitting, and operational systems. While the City’s current ERP environment supports core functions, system limitations have resulted in manual work-arounds, fragmented processes, and limited reporting. As these challenges affect efficiency, data access, integration between systems, and access to timely information, the City is now evaluating how its enterprise systems can better support day-to-day operations and long-term needs.

The City recognizes that a modern ERP environment can help ensure stronger integration across finance, HRIS and permitting—with possible consideration of additional modules while reducing reliance on paper-driven processes and disconnected systems. Improved workflows, standardized time entry, and more accessible data can help ensure staff focuses on service delivery rather than work-arounds. At the same time, enhanced reporting and budgeting capabilities can help ensure leadership has the information needed to make informed decisions.

BerryDunn understands that the City seeks a vendor-neutral partner to help assess its current environment and define a clear path forward. Working closely with City leadership and staff, BerryDunn would document current-state processes, identify opportunities for optimization, and define future requirements grounded in operational realities. This approach helps ensure that technology recommendations are informed by business needs and that the City is positioned to move forward confidently with ERP procurement and implementation planning.

How BerryDunn Can Help

With the City’s goals and objectives in mind, we feel certain that we are well-positioned to partner with the City on this engagement. Below, we outline several attributes that we hope the City will consider as it determines the best path forward.



Deep municipal Finance and HRIS Experience. BerryDunn brings extensive experience supporting municipal Finance and Human Resources functions across the full enterprise system life cycle, from current-state assessment and business process analysis through system selection and implementation support. Our consultants have worked with cities, counties, and other public-sector organizations to modernize core financial management, payroll, budgeting, and human capital systems, and many of our

team members bring firsthand experience from serving in municipal finance and HR leadership roles. This depth of functional and operational understanding allows us to quickly grasp the interdependencies between Finance and HRIS processes, identify opportunities for improvement, and help ensure future systems are aligned with public-sector requirements, internal controls, and workforce needs.



Experience with Tyler Technologies migrations, including Incode/ERP Pro.

BerryDunn has supported numerous public-sector organizations as they plan for and transition away from Tyler Technologies environments, including Incode/ERP Pro, as part of broader system replacement initiatives. We understand the operational, data, and integration considerations unique to Tyler-based Finance and HR environments and have applied this knowledge in assessments, requirements development, and

migration planning efforts. Our familiarity with Tyler solutions such as Incode, combined with our independent, vendor-neutral advisory role, allows us to objectively evaluate replacement options and help

clients plan for a successful transition that minimizes disruptions and supports long-term operational and reporting needs.



Our demonstrated independence and vendor-neutral ERP selection approach.

Central to our identity is the preservation of our independence and objectivity. Our team has many years of large-scale enterprise business process, system advisory, and implementation experience, but our firm does not sell, develop, or provide staff augmentation services for software, hardware, or implementation vendors. We do not have any preferred vendors, and the City will not find our name listed as partners, affiliates, or sponsors of any vendor, nor does BerryDunn sell hardware or software products. This—along with our BerryDunn Bridge program—allows us to provide unbiased system selection consulting services and work in the City’s best interests. Our ability to objectively advise the City on considerations related to evaluating system functionality will be critical to the City’s initiative to migrate to a more connected and integrated ecosystem.



Our commitment to local government and demonstrated commitment to serving clients in the State.

All our project team members exclusively serve local government clients, and the majority have prior experience working in local government organizations prior to joining BerryDunn. Having served hundreds of local governments across the country, our team has a deep understanding of local government organizations and government accounting standards, as well as the opportunities and constraints associated with the region’s public-sector landscape. Further, we have developed a strong understanding of the State’s municipal landscape through recent and/or ongoing engagements with numerous clients, including work with the Cities of Janesville, Waukesha and Wausau and the Counties of Calumet, Outagamie, and Waukesha. We are also actively supporting the City of Superior in its migration to a new software solution after supporting the City through a comparable ERP assessment and selection process, which Corey, Kate, and Ryan led. This will help ensure we bring firsthand insights, as well as industry, regional, and national best practices to this project.

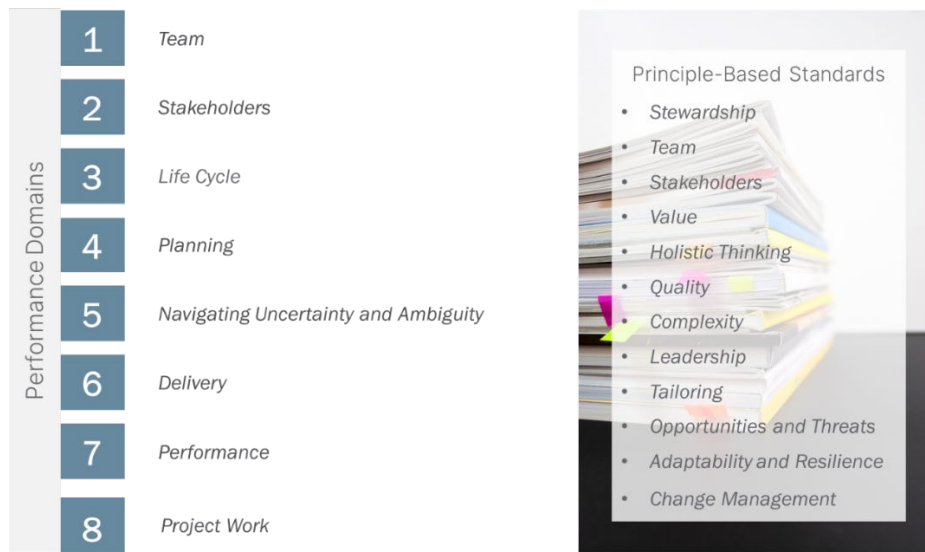
a. Providing and Managing Services

Project Management

To help ensure that project objectives are met, and initiation and completion of project work are conducted in a timely manner, each BerryDunn project is led by an experienced project manager who understands and utilizes project management best practices. Our Consulting Services Team employs project management best practices from the Project Management Institute®’s (PMI®’s) A Guide to the Project Management Body of Knowledge (PMBOK® Guide).

Figure 5 illustrates the standards of project management as defined by performance domains and project delivery principles that are critical for effective delivery of project outcomes.

Figure 5: Performance Domains and Project Management Guiding Principles | PMBOK® Guide

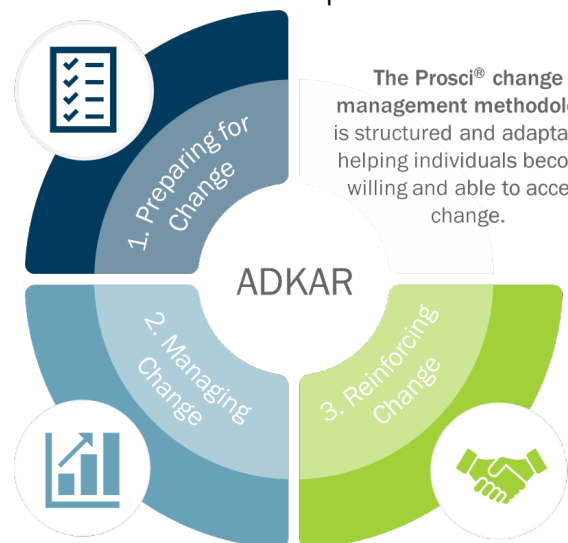


Change Management

Stakeholders' willingness to adopt new processes and tools plays a significant role in the success—or failure—of system replacement projects. BerryDunn has observed resistance to change in virtually all our engagements. As such, our project management approach is carefully integrated with change management methodologies to promote buy-in and consensus for the project. We will work with you to proactively address resistance by:

- Engaging stakeholders at the right level throughout the project—from initial planning through implementation—to build understanding for the need for change and gain support from the people who will be using the future solutions and who are most familiar with current processes
- Developing and executing a communications plan that considers the information needs of each stakeholder group
- Documenting business processes and working with stakeholders to understand how their work will be performed in the future environment
- Monitoring training activities to help ensure that users will be prepared on day one

We have adopted the Prosci® change management methodology and trained **over 100 consultants to become Prosci® Certified Change Practitioners (CCPs)**. A central focus of the Prosci® change management approach is the belief that, in order for change to work in an organization, individuals must be willing to change and understand change. Based on this belief, Prosci® developed the awareness, desire, knowledge, ability, and reinforcement (ADKAR) change management approach, defined above.



Consistent with the Prosci® methodology, the City can expect our change management approach to involve three stages, as described on the following page.

1: Preparing for Change

Involves developing of change management strategies, based on input from the City stakeholders on the existing environment.

2: Managing Change

Involves overseeing assigned roles and tasks, providing training and coaching, using tools effectively, and executing a clear communication plan.

3: Reinforcing Change

Involves evaluating action plans, reviewing the sustainability of change management activities, and promoting individual and team successes.

The City can be confident in our flexibility while developing and executing our change management approach. We understand that no two engagements are exactly alike, and we believe that one of the primary reasons we have been successful with similar projects is our willingness to be flexible in adapting to our clients' unique needs.

Additionally, according to research conducted by Prosci®, the likelihood of project success increases significantly and in alignment with the level of change management focus applied to the project. Figure 6, below, shows that even small increases in focus on change management, from “poor” to “fair,” are likely to have a positive impact on system adoption and project success.

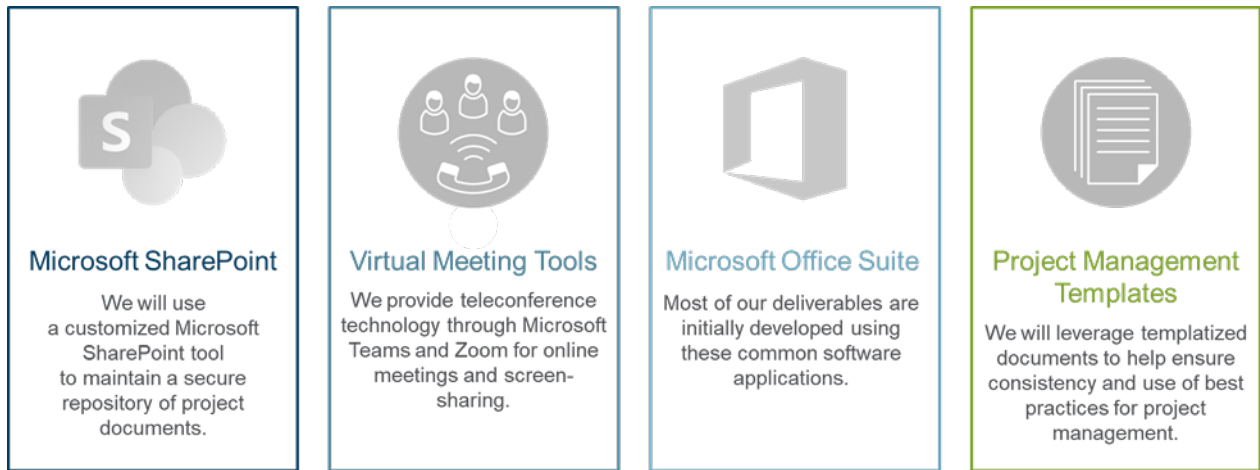
Figure 6: Change Management's Impact on Project Success



b. Coordination and Communication with City Staff

For the daily management and undertaking of project tasks, we strive to avoid unnecessary delays, enhance productivity, promote collaboration, and minimize barriers to participation. To that end, we utilize technology that is familiar or intuitive to most users in addition to our project resources assembled from years of public-sector consulting, as detailed in Figure 7.

Figure 7: BerryDunn’s Tool Kit for Daily Project Management



c. Expected Involvement from City Staff

Commitment from all project participants is critical to producing a successful outcome; however, we understand that the project participants have regular commitments outside this project. Therefore, we will work as independently as possible, plan and communicate well, and bring in City staff and stakeholders as needed and in a manner that facilitates tangible contributions and results.

Table 2, on the following pages, outlines the roles, responsibilities, and estimated time commitments we anticipate from City personnel in this system selection process. We will be able to better estimate City involvement in the eventual implementation effort when the City nears closer to selecting its preferred vendor.

Table 2: Estimate of Expected Participation of City Personnel

Role	Description/Responsibilities	Hours	Involvement in Major Activities
Project Sponsor	<ul style="list-style-type: none"> Provide executive support, sponsorship, and overall direction and tactical vision for the project Commit/assign resources to the project Participate in project kickoff meeting and stress goals and objectives for the project to City staff Provide executive-level decision-making when needed and maintain overall responsibility for the project Distribute communications, as necessary, that support the project and 	6 – 10	Project Charter, Project Management Plan, and Schedule Acceptance Project Kickoff

Role	Description/Responsibilities	Hours	Involvement in Major Activities
	<p>provide it with adequate visibility and priority</p>		
Project Manager	<ul style="list-style-type: none"> • Maintain overall responsibility for the project and act as main point of contact between BerryDunn and the City • Circulate deliverables for review and collect feedback, and provide signoff • Participate in the project kickoff meeting and stress goals and objectives for the project to City constituents • Participate in key work sessions • Assist in collecting background documentation and share with BerryDunn in advance of our work • Provide names and contact information for City employees involved in project 	70 – 100	<p>Project Charter, Project Management Plan, and Schedule</p> <p>Project Kickoff</p> <p>Procurement Strategy and Market Analysis Memo review</p> <p>ERP Functional and Technical Requirements RFP Release and Planning Meeting</p> <p>Finalization and Review of District’s RFP Package</p> <p>Proposal Executive Summary Memo and Round-One Scoring</p> <p>Demonstration Facilitation and Round-Two Scoring</p> <p>Preferred Vendor Identification</p> <p>Contract Negotiations</p>
Project Team	<ul style="list-style-type: none"> • Provide necessary feedback and subject matter expertise to help inform BerryDunn’s project deliverables • Participate in project meetings and work sessions • Review project deliverables 	30 – 60	<p>Project Charter, Project Management Plan, Project Schedule</p> <p>Project Kickoff</p> <p>ERP Functional and Technical Requirements RFP Scoring and Evaluation Team Preparation</p> <p>Finalization and Review of District’s RFP Package</p> <p>Proposal Executive Summary Memo and Round-One Scoring</p>

Role	Description/Responsibilities	Hours	Involvement in Major Activities
			Demonstration Facilitation and Round-Two Scoring Preferred Vendor Identification
Subject Matter Experts	<ul style="list-style-type: none"> • Complete the web survey • Provide necessary feedback and subject matter expertise to help inform BerryDunn’s project deliverables • Assist with compiling requested documentation • Participate in related fact-finding meetings, joint requirements planning sessions, and software demonstrations 	20 – 30	ERP Functional and Technical Requirements Demonstration Facilitation and Round-Two Scoring
Technical Team	<ul style="list-style-type: none"> • Participate in related fact-finding meetings, joint requirements planning sessions, and software demonstrations • Review project deliverables associated with the analysis phase 	10 – 20	ERP Functional and Technical Requirements Proposal Executive Summary Memo and Round-One Scoring Demonstration Facilitation and Round-Two Scoring
Contract/Legal Team	<ul style="list-style-type: none"> • Participate in contract strategy discussions • Participate in contract negotiations 	40 – 60	Contract Negotiation and Approval Assistance

d. Additional Resources Network

BerryDunn’s Consulting Services Group includes more than 400 consultants, including more than 80 Local Government Practice Group consultants who specialize in supporting public-sector clients. As needed, our project team will draw on the support of our vast pool of business analysts and SMEs. These consultants will provide in-depth knowledge of various aspects of local government and support the project team with efforts related to fact-finding, research, and deliverable development.

e. Work Plan, Deliverables, Project Schedule and Milestones

Overview

BerryDunn strives to be flexible when it comes to developing and executing an effective work plan, and our past clients have appreciated our willingness to adapt to their needs. BerryDunn will drive the project forward while balancing the constraints of the City stakeholders. This mindset plays a foundational role in how we measure the success of our portfolio of similar projects.

Our approach to executing the City's project is outlined below and designed to incorporate consistent project management best practices with each of the City's key deliverables and tasks. Our intent is to work with staff to help ensure we make the best use of your time. Ultimately, consistent collaboration can help promote buy-in and understanding for final recommendations.

The overarching benefits the City can expect of our approach include:

- A methodology based on our extensive experience conducting similar projects
- Quality assurance processes that incorporate the City's review and approval of all deliverables and key milestones
- Built-in project and OCM best practices that focus on keeping the project on time, on budget, and progressing at a healthy pace for the City's stakeholders to give input in the information gathering and fact-finding process and understand final recommendations
- A needs assessment that will include all functional areas within scope and focus on how those areas interact with each other and integrate with existing systems
- A focus on taking full advantage of the newest technology and harnessing efficiencies by reviewing business practices or implementing technology to enhance existing business processes performed by individual departments and those performed across the City
- An ability to satisfy all requirements set forth in the City's scope of work

Figure 8 presents an overview of our proposed approach to completing the City's desired scope of work.

Figure 8: BerryDunn's Proposed Approach



Details

Below and on the following pages, we provide details of our work plan to conduct the City's project effectively and efficiently as described in Figure 8.

Phase 0: Project Planning and Ongoing Project Management

The BerryDunn Difference:

- ▲ *We leverage best practices from the PMBOK® Guide to initiate and plan the project to help ensure successful execution.*
- ▲ *We establish an open and consistent line of communication for the duration of the project so that we can effectively manage the project scope, timeline, and mitigate risks and issues.*

0.1 Conduct initial project planning. We will conduct an initial project planning work session with the City's project management team to:

- Introduce key team members
- Clarify project scope, goals, objectives, and known project constraints
- Determine what work will take place on-site
- Refine dates and/or tasks, as appropriate
- Identify risks and issues
- Develop an MS Teams and/or SharePoint Collaboration site
- Schedule and plan for a project kickoff meeting and introductory meetings with departmental staff
- Develop the Project Charter, Project Management Plan, and Project Schedule

We will discuss our approach for managing communications between BerryDunn and the City, as well as our approach to scope, risk, and resource management. We will also establish a governance structure including a project steering committee and working groups and assist the City in identifying stakeholders and/or stakeholder groups to include in the assessment process. These discussions will help us to refine our currently proposed Project Charter, Project Management Plan, and Project Schedule, as well as inform introductory meetings with departmental staff. A component of the Project Management Plan is a detailed communication plan that will define the role of BerryDunn and City staff.

0.2 Develop Project Charter, Project Management Plan, and Project Schedule. Based on the information gathered from initial project planning, we will draft a Project Charter, Project Management Plan, and Project Schedule. The plan will define the organizational structure of the project, the project team's responsibilities and reporting relationships, and project approach, tasks, milestones, deliverables, and timelines for scope of work for the management of cost, schedule, and resources. The Project Work Plan and Project Schedule will also include agreed-upon procedures between BerryDunn and the City related to project control, including quality management and deliverable submission/acceptance management. After providing draft versions of these materials in advance, we will facilitate a work session with the City's project team to review the drafts and solicit feedback. We will incorporate the City's feedback and finalize the documentation before distributing it in final form.

Phase 0: Project Planning and Ongoing Project Management

▲ *Deliverable 0A. Project Charter, Project Management Plan, and Proposed Schedule*

1.5 Develop Project Status Updates. Throughout the project, our project team will provide Biweekly Status Updates that describe the activities and accomplishments for the reporting period, plans for the upcoming month, risks or issues encountered during the reporting period, and anticipated problems that might impact any project deliverable. We will meet with the City's project manager to review the status updates. Should there be times in the project where an increased meeting frequency is required, BerryDunn will facilitate those meetings inclusive of our fixed-fee pricing.

▲ *Deliverable 0B. Ongoing Biweekly Status Updates*

Phase 1. ERP Needs Assessment

The BerryDunn Difference:

- ▲ *We utilize multiple methods of engagement to seek feedback and provide staff and stakeholders with meaningful opportunities to participate, fostering stronger buy-in.*
- ▲ *Our Needs Assessment Report will provide detailed analysis and key considerations that will inform the Technical and Functional Requirements*

1.1 Initiate Project Management Toolkit and Planning Documents. Based on the initial planning meeting with the City, our team will immediately set out to begin development of the structure and framework for organizing the process of collecting documentation and ongoing collaboration on project deliverables between our teams. This will include provisioning a SharePoint project portal to facilitate management of project documentation and to serve as a primary repository of draft and final work products, mitigating against the confusion that may occur over versioning control as compared to the use of email. To initiate the gathering of preliminary information that will serve as an input into our assessment process, and to facilitate the announcement of the project to a broader section of City staff, we will produce the following initial documentation:

- **Information Request:** We will provide the City with an information request sheet to gather available documentation that will be helpful to us during the project (such as policies, procedural documentation, documentation on existing systems, and available labor/union memoranda of understanding).
- **Functional Area Listing:** We will prepare a functional area listing based on the City's scope of work, expanding upon the related business processes for each functional area to gain alignment and consistency in the use of nomenclature on the project. This will also serve to confirm the scope of business processes that are included in the assessment process.
- **Draft a strengths, weaknesses, opportunities, and threats (SWOT) web survey:** We will prepare a draft SWOT survey that will be used as one of many inputs into our information gathering and assessment process. This SWOT survey is intended to be issued to staff early in the process as a way to both introduce the project and also prompt staff to begin thinking critically about current-state processes, training needs, and areas for future improvements.
- **Project Announcement Memo:** We will prepare a draft project announcement memo that is intended to formally announce the project to City staff, introduce BerryDunn and our role in the

Phase 1. ERP Needs Assessment

project, and request participation in both the SWOT survey and the fact-finding process described later in our work plan.

Once prepared, we will review these documents in draft format with the City's project management team (PMT) in a work session to solicit feedback before updating them to final.

1.2 Facilitate kickoff meeting. We will prepare for and facilitate a project kickoff meeting with all project participants to outline the project schedule, expected participation, discuss intended outcomes, and gain initial feedback and perspectives from the group prior to beginning the in-depth fact-finding meetings.

1.3 Facilitate fact-finding workshops. Following the project kickoff meeting, we will conduct a series of interviews with the City's departmental representatives across agreed-upon functional areas to gain a detailed understanding of the systems, strengths and challenges, reporting needs, and tools that currently support the City's operations.

We will provide the City's staff with an outline of topics to be prepared to discuss during the fact-finding meetings, prompting staff to be prepared to discuss system functionality that may not exist in the current environment but they feel should exist in the future environment; impediments created by the current system; potential opportunities for improvement in the use of technology as well as policies and procedures, as well as other topics. Our team is experienced in examining business processes through the lens of identifying root cause factors that contribute to an end user's perspective of a legacy software product—delineating between technology and process or policy factors. This provides us the opportunity to educate our clients, including your staff, on where future-state processes may be more streamlined, while also allowing for sound approaches to current work to be appropriately brought forward into the future ERP system.

We will explore a multitude of business and functional topics with City staff, exploring needs surrounding accounts payable, accounts receivable, building projects, check reconciliation, cash collection, general ledger, payroll, time entry, administration, and other topics as defined in the initial project planning process.

These discussions will inform our analysis of the current environment and lay the groundwork for identifying high-impact opportunities and prioritizing future system requirements that align the City's operational objectives, strategic vision, and available resources.

Where appropriate, we will observe staff conducting business process routines. This can include, but not be limited to, observing back-office and front-office processes, daily and monthly processes, and process workflows in action. We will also meet with representatives from the City's IT staff who support the existing applications to review available system documentation, existing data elements, and data reporting needs. When necessary, the BerryDunn team will accommodate unanticipated scheduling challenges of the City's personnel to make the best use of time. Our approach is to do what we can to accommodate such needs, providing the opportunity for all stakeholders to contribute their thoughts and ideas.

1.4 Facilitate procurement planning and strategy session. The goal of this session is to define selection and evaluation team roles for the procurement process, clarify the anticipated time and resource commitments, and establish a clear, strategic approach to managing the procurement process.

Phase 1. ERP Needs Assessment

1.5 Facilitate an interface and data conversion planning session with the City's stakeholders.

During the initial fact-finding process, we will facilitate an interface session and data conversion discussion. This technical session is to review the third-party systems in place today, such as those listed on page 3 of the City's RFP, and review the potential integrations to the future environment. In our experience, new technology procurements often replace or consolidate multiple legacy solutions. For systems that will be retained or in areas where best-of-breed systems are in place, BerryDunn will review the functionality needed to inform leadership about these potential integration needs and how they will be incorporated into a future RFP.

We will also facilitate a discussion on the approach to data conversion, including:

- Initiating the discussion on what legacy data must be converted in order to support live transaction processing in the future system. The key distinguishing feature is that the City is not defining what data must be converted to align with record retention requirements, but rather what data is required to support transactions within the new system.
- Identifying which items, of those must be converted items, are static and which are dynamic. This will help to determine the quantity of data (e.g., years, counts) that will be converted, and to inform the scoping, analysis, and, later, the proofing process.
- Discussing the City's intended approach to the final disposition of legacy data following the possible migration to a new ERP system.

Early identification of the planned interface and data conversion scope will allow for clearly articulated language and thus more accurate pricing and scoping provided by vendors in later steps of the project.

1.6 Develop a Needs Assessment Report. Drawing on the information gathered through our review of documentation, web survey results, and fact-finding sessions, we will prepare a draft Needs Assessment Report. This report will provide a high-level summary of the processes and inputs that contribute to the City's current business processes, use of technology, and future-state functionality needs, and it will identify process-related challenges and opportunities for improvement that should be addressed through the adoption of moving to a new enterprise system. This report will include but not be limited to:

- An inventory and high-level summary description of the current-state business processes, including an assessment on the use of technology and where future-state processes may be optimized through automation
- Primary challenges and areas for improvement provided by a new enterprise system showing how departments could benefit from new technology
- Recommendation of appropriate integration and other applications to capture financial data and document management capabilities
- Recommended key decision points including overall project timeline, implementation phasing considerations, and City goals and objectives for the selection of a new ERP system.

Additionally, key items in the report will confirm technology and system utilization and identify options for the future systems environment.

We will provide a draft of the Needs Assessment Report to the City's project team for review and facilitate a work session to discuss the report, gain feedback, and build consensus related to the presented decision points. We believe that it is important to obtain the City's validation and approval of

Phase 1. ERP Needs Assessment

these findings, as this information will serve as the basis for future requirements. We will then revise the report and update it to final.

▲ *Deliverable 1. Needs Assessment Report*

Phase 2. RFP Development Assistance and Selection Assistance

The BerryDunn Difference:

- ▲ *We develop a Procurement Strategy and Market Analysis Memo providing a proactive, end-to-end procurement roadmap that blends market insight, realistic resourcing, and flexible evaluation strategies to help the City align stakeholders and make well-informed, unbiased technology decisions.*
- ▲ *We combine our proven requirements library with focused joint requirements planning (JRP) work sessions to help ensure requirements are prioritized and written to support accurate vendor scoping and pricing.*
- ▲ *We develop a clear, well-structured RFP Package with objective evaluation criteria and scoring tools that promote fair, defensible comparison of vendor proposals.*
- ▲ *We actively support the procurement process by managing vendor questions, addenda, and pre-proposal activities to help ensure transparency and consistency.*
- ▲ *We facilitate proposal review, demonstrations, scoring, and reference checks to help the City confidently identify a preferred vendor aligned with functional, technical, and strategic priorities.*
- ▲ *We provide experienced, independent support during contract negotiations to help ensure terms, scope, pricing, and implementation commitments align with the City's requirements and long-term objectives.*
- ▲ *We collaborate with the City's project team, legal counsel, and vendor to support efficient approval and award decisions while helping protect the City's interests and positioning the project for a successful implementation.*

2.1 Develop a Procurement Strategy and Market Analysis Memo. Large, complex software procurements often carry significant financial, operational, and organizational risk. The detailed evaluation of proposals received in response to a comprehensive and broad-scoped RFP such as that contemplated by the City requires thorough planning, clear guidance, and active participation of all parties.

Our firm leverages its deep presence in the public-sector technology marketplace and extensive procurement planning experience to design an approach that maximizes market responsiveness and strategic clarity based on the findings of our Needs Assessment Report. The City is seeking a trusted partner that will help lend best practices, recommendations, and tailored guidance that fits the specific needs of the City and not generalities. BerryDunn will create a Procurement Strategy and Market Analysis Memo, something we feel is unique to our approach for the City. This Memo will include the go-to-market strategy for the procurement of new technology, anticipated timelines and phasing for functional area sets, expected roles and responsibilities for City participants during the RFP solicitation

Phase 2. RFP Development Assistance and Selection Assistance

process, proposed evaluation criteria for the RFP against which we will collaboratively arrive at point allocations, preliminary budget information, and staffing considerations and resource requirements (hours) for each step in the RFP evaluation process.

This memo will also discuss the intended approach to evaluating best-of-breed (point solution) software proposals that are likely to be submitted. Based on our experience with similarly sized clients that wish to issue a single RFP for all defined areas of need, the RFP should be crafted to allow vendors to submit on specific areas of scope and the resulting proposals should be reviewed based on what the vendor did submit on, and not penalized for what they did not submit on. This memo is intended to help best prepare the City for the software evaluation process and gain consensus on the necessary steps and sequencing of the evaluation, in an effort to adhere to agreed-upon timelines and position the City for meeting its target timelines for the eventual implementation process.

▲ *Deliverable 2. Procurement Strategy and Market Analysis Memo*

2.2 Develop Preliminary Functional and Technical Requirements. BerryDunn has developed a database of functional and technical requirements based on our experience with other governmental agencies and our knowledge of software system functionality and best practices. Drawing from this database, we will make refinements for those processes that are critical or unique to the City to help formally and thoroughly capture the functions that will need to be addressed using a new ERP system. These requirements will be a critical component to translating the City's current and future needs effectively and allow the new vendor to scope the pricing and technical proposal to align with the City's expectations.

These requirements will support supplemental functionality requirements with key reporting, interface, and conversion enhancements. In our recent experience, those areas have significantly differentiated vendors' solutions and required a specific focus in the selection activities. Our analysis typically results in about 75% of the requirements being defined up front for most of our clients.

These requirements will be provided to the City in a draft format using Microsoft Excel, along with tailored guidance on how to review the requirements, how the requirements will fit into the process, and how to prepare for sessions to review the requirements with our project team.

▲ *Deliverable 3. Preliminary Functional and Technical Requirements*

2.3 Facilitate JRP work sessions. We will facilitate a series of JRP work sessions with the City's stakeholders and our project team members to review the preliminary requirements. We will reconvene many of the same stakeholders, organized by system/functional area that met during fact-finding activities to discuss the future system capabilities. These sessions will also include one focused on the technical aspects involved with the City's project. Using the preliminary list, we will review and confirm each item and assign a relative criticality to communicate to vendors responding to the list as part of their RFP responses. We will also facilitate similar meetings to review potential interfaces and data conversion objects. Once these have been reviewed, we will update the list to final.

Our role in facilitating the JRP work sessions is to contribute our focused knowledge of the vendor marketplace and align the items requested in the list with the goals and objectives of the project. For example, we might comment that functionality being requested is beyond the core capabilities of vendors and might represent a cost increase. Conversely, we can help recommend requirements to include that might be commonplace today, but beyond the familiarity of the City's stakeholders.

Phase 2. RFP Development Assistance and Selection Assistance

Similarly, we will challenge staff to not only think about how things are done today, but to reimagine how new software may be able to drive increased efficiencies.

▲ *Deliverable 4. Final Functional and Technical Requirements*

2.4 RFP Release and Planning Meeting. We will facilitate a session with the evaluation committee to define selection/evaluation team roles for the procurement process, clarify time and resource commitments, go through the release schedule, and establish a clear, strategic approach to managing the procurement process.

2.5 Develop an RFP Package. We will develop a draft RFP Package using a proven format that incorporates information pertaining to the history of the project; a high-level description of the City's current environment, desired approach to implementing a new ERP solution, and functional and technical requirements; and a structured list of points for vendors to address in their responses. Our project team will also work with the City to develop objective evaluation criteria to include in the RFP. We will then prepare a scoring matrix to track significant strengths and limitations of each proposal reviewed. Upon completion, we will coordinate a work session with the City's project team to review the draft RFP Package and collect any feedback or additional terms for inclusion before updating to final. We will provide the final RFP to the City's project for distribution through standard channels. For added guidance in distribution, we will provide a list that includes most of the major vendors in the market.

▲ *Deliverable 5: RFP Package*

2.6 Assist with responding to vendor questions and developing addenda. Once the RFP has been posted, our team will align with City procurement on our role and responsibility in assisting with the questions and answers process. We have planned to take an active role in reviewing vendor questions submitted in response to the RFP, developing draft responses for the City's project team to review, and helping to develop any corresponding addenda.

2.7 Assist with facilitating a vendor pre-proposal conference. Our project team will coordinate, plan, and lead a pre-proposal teleconference for interested vendors, facilitating the question-and-answer portion of the meeting. We will compile a list of questions raised and prepare suggested responses. These will be provided in a format that the City's project team can review, revise, and publish as an addendum to the RFP, as determined by procurement staff.

2.8 Perform an initial completeness review of vendor proposals received, identify items for clarification, and develop a Proposal Executive Summary Memo. Our project team will perform an initial completeness review of vendor proposals to confirm required information has been submitted and identify any initial items requiring clarification. We will facilitate the proposal review process and synthesize results into a single Proposal Executive Summary Memo. The memo will highlight key areas for consideration by the City's evaluation team, including each vendor's ability to meet minimum requirements and their alignment with the evaluation criteria within the RFP. This memo will also include a comparison of vendor responses to the Functional and Technical Requirements.

2.9 Facilitate round-one scoring meeting to identify short-listed vendors and items needing clarification. We will meet with the evaluation team to review the proposal summaries, discuss each proposal received, assist in the scoring process, and collect scores to identify the top preferred

Phase 2. RFP Development Assistance and Selection Assistance

vendors to invite for demonstrations. We will clarify any open items with these short-list vendors before issuing invitations for demonstrations.

▲ *Deliverable 6. Proposal Executive Summary Memo and Vendor Short-List*

2.10 Assist the City's PMT in planning for demonstrations and writing demonstration scripts.

We will facilitate a demonstration planning work session with the City's project team to discuss the format of vendor demonstrations and software demonstration scripts. We will develop a tailored demonstration script template designed to highlight functionality most relevant to the project goals and evaluation criteria. The draft script will be reviewed with the City's project team and finalized prior to distribution to participating vendors.

2.11 Develop demonstration scenarios based on the meeting with City staff. These structured scenarios will be used to help guide the demonstrating software providers with the flow of presentations as well as the scope of what should be shared with the City. This will help mitigate against an open sales presentation and focus the evaluation on as comparable presentations as feasible.

2.12 Facilitate vendor demonstrations. One of our project team members will attend demonstrations and assist the City's PMT with facilitation for a period of up to six days. Our project team's extensive background in the demonstration process will provide the City's PMT with a unique perspective on how to score, prepare, evaluate, and participate in vendor demonstrations.

2.13 Facilitate a round-two scoring meeting to identify preferred vendors. We will participate in the second round of vendor scoring immediately following the final demonstration to identify the vendor or vendors that the City's PMT should perform its reference checks on.

2.14 Assist in planning for reference checks and site visits. We will assist the City's project team with identifying tasks that should be accomplished prior to meeting at each site visit. We will also coordinate with the City's PMT to discuss the suggested approach for the reference checks.

▲ *Deliverable 7: Demonstration Facilitation*

2.15 Facilitate a final scoring meeting. We will participate in the final scoring meeting via teleconference following the completion of reference checks and site visits. The objective will be to identify a preferred vendor and a second-choice vendor should contract negotiations with the first be unsuccessful.

▲ *Deliverable 8: Preferred Vendor Identification*

2.16 Support the City in the contract negotiations and approval process with its preferred vendor. At the conclusion of final scoring activities, should the City desire, we are able to support the City with the contract negotiations and approval process when and where it will benefit the City most. We have been involved in this process from the client, vendor, and independent consultant perspectives and understand how the associated support needs vary and how the contract impacts the eventual implementation process. In conducting contract approval and negotiations activities, we will

Phase 2. RFP Development Assistance and Selection Assistance

draw on these experiences to help ensure the City's best interests are met and project goals and objectives are achieved.

Working collaboratively with the City's project team, legal counsel, and preferred vendor, among other stakeholders, we will take part in various activities, including but not limited to:

- Developing a draft contract, using the City's contracting procedures and the vendor's proposal as starting points
- Reviewing the contract documents with the City's PMT to help ensure that requirements are clearly defined and to establish that the City agrees to the schedule, implementation process, fee arrangement, scope of services, vendor resources, deliverables, costs, acceptance criteria, and terms and conditions
- Participating during negotiations with the preferred vendor
- Supporting presentation development and delivery to City leadership as it relates to receiving approval and contract execution

Should it become clear at any point during contract approval and negotiations that the preferred vendor's solution or contract terms will not meet the needs of the City we might recommend halting the process with that vendor and commencing efforts with the second-choice vendor.

In recognition of the many variables not yet known related to the contract approval and negotiation timeline and work effort, should the City desire this optional task, we plan to commit up to 40 hours toward this effort on a fixed-fee basis.

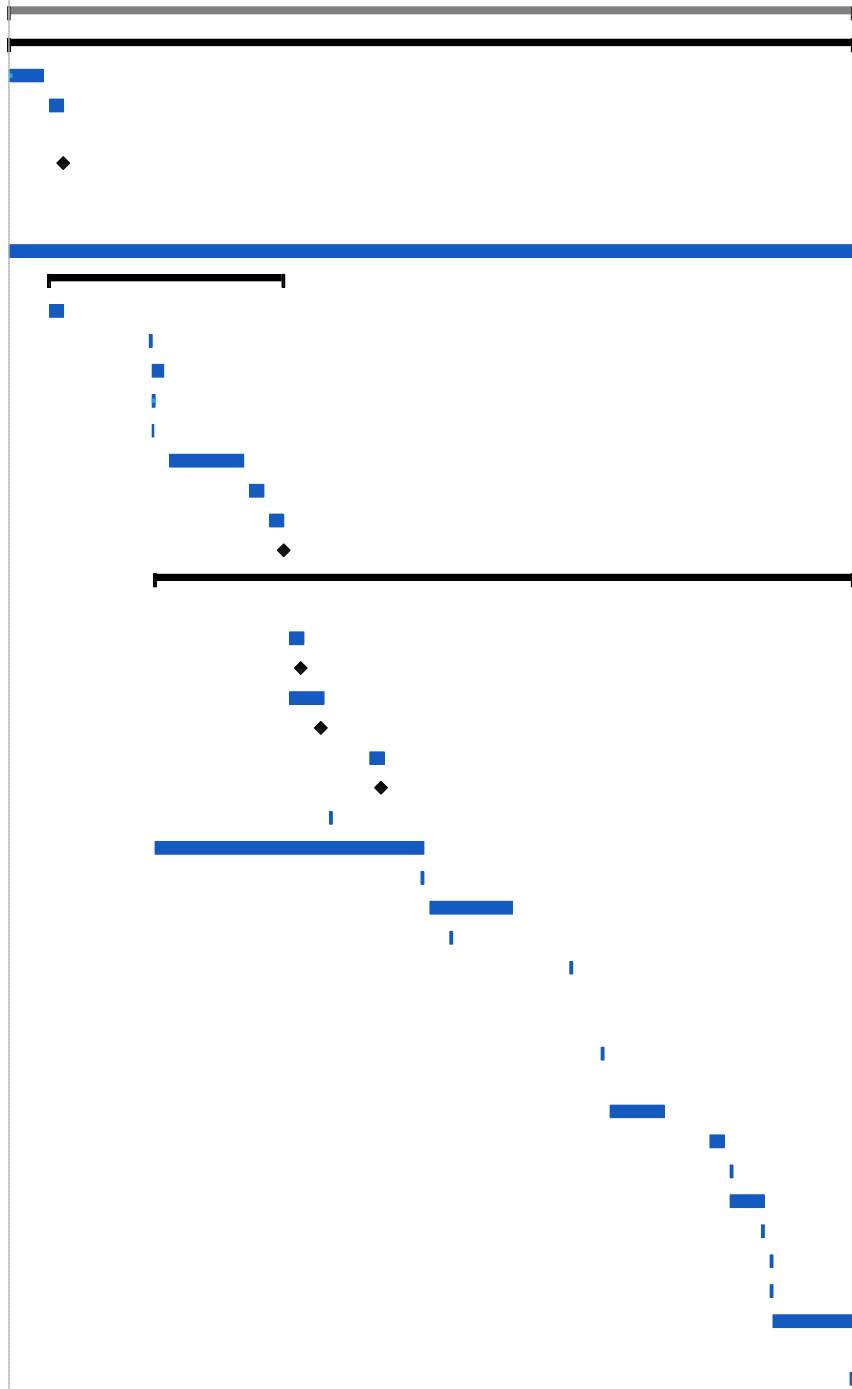
▲ *Deliverable 9. Contract Negotiations and Approval Assistance*

Anticipated Schedule

On the following page, we provide a detailed project schedule with project milestones. We have developed our project approach and schedule to accommodate the City's timeline, and we will confirm key project dates in collaboration with the City during Project Planning and Ongoing Management.

City of De Pere, WI
ERP Consulting Services

ID	Task Name	Start	Finish	Predecessors	May '26	Jun '26	Jul '26	Aug '26	Sep '26	Oct '26	Nov '26	Dec '26	Jan '27	Feb '27	Mar '27
0	DePere Draft Project Schedule	Mon 5/25/26	Mon 3/15/27												
1	Phase 0 : Project Planning and Ongoing Project Management	Mon 5/25/26	Mon 3/15/27												
2	Conduct initial project planning.	Mon 5/25/26	Fri 6/5/26												
3	Develop draft Project Charter, Project Management Plan, and Project Schedule.	Mon 6/8/26	Fri 6/12/26	2											
4	D0A. Project Charter, Project Management Plan, and Project Schedule	Fri 6/12/26	Fri 6/12/26	3											
5	Develop Project Status Updates	Mon 5/25/26	Mon 3/15/27	2SS											
6	D0B. Ongoing Biweekly Status Updates	Mon 5/25/26	Mon 3/15/27												
7	Phase 1. ERP Needs Assessment	Mon 6/8/26	Fri 8/28/26												
8	Initiate Project Management Toolkit and Planning Document	Mon 6/8/26	Fri 6/12/26	2											
9	Facilitate kickoff meeting.	Mon 7/13/26	Mon 7/13/26												
10	Facilitate fact-finding workshops.	Tue 7/14/26	Fri 7/17/26	9											
11	Facilitate procurement planning and strategy session.	Tue 7/14/26	Tue 7/14/26	9											
12	Facilitate an interface data conversion planning session.	Tue 7/14/26	Tue 7/14/26	9											
13	Develop a Needs Assessment Report.	Mon 7/20/26	Fri 8/14/26	10											
14	City review of draft Needs Assessment Report.	Mon 8/17/26	Fri 8/21/26	13											
15	Finalize Needs Assessment Report.	Mon 8/24/26	Fri 8/28/26	14											
16	D1. Needs Assessment Report	Fri 8/28/26	Fri 8/28/26	15											
17	Phase 2. RFP Development Assistance and Selection Assistance	Wed 7/15/26	Mon 3/15/27												
18	Develop a Procurement Strategy and Market Analysis Memo	Mon 8/31/26	Fri 9/4/26	16											
19	D2. Procurement Strategy and Market Analysis Memo	Fri 9/4/26	Fri 9/4/26												
20	Develop Preliminary Functional and Technical Requirements	Mon 8/31/26	Fri 9/11/26	16											
21	D3. Preliminary Functional and Technical Requirements	Fri 9/11/26	Fri 9/11/26												
22	Facilitate JRP work sessions.	Mon 9/28/26	Fri 10/2/26	20FS+10 day											
23	D4. Preliminary Functional and Technical Requirements	Fri 10/2/26	Fri 10/2/26												
24	RFP Release and Planning Meeting.	Mon 9/14/26	Mon 9/14/26	20											
25	Develop an RFP Package.	Wed 7/15/26	Fri 10/16/26	11											
26	D5. RFP Package	Fri 10/16/26	Fri 10/16/26												
27	Assist with responding to vendor questions and developing a	Mon 10/19/26	Mon 11/16/26	26											
28	Assist with facilitating a vendor pre-proposal conference.	Mon 10/26/26	Mon 10/26/26	26FS+5 days											
29	Perform an initial completion review of vendor proposals received, identify items for clarification, and develop a Proposal Executive Summary Memo.	Mon 12/7/26	Mon 12/7/26	26FS+35 days											
30	Facilitate round-one scoring meeting to identify short-listed vendors and items needing clarification.	Fri 12/18/26	Fri 12/18/26	29FS+8 days											
31	Develop demonstration scenarios based on the meeting with	Mon 12/21/26	Fri 1/8/27	30											
32	Facilitate vendor demonstrations.	Mon 1/25/27	Fri 1/29/27	30FS+25 day											
33	Facilitate a round-two scoring meeting to identify preferred v	Mon 2/1/27	Mon 2/1/27	32											
34	Assist in planning for reference checks and site visits.	Mon 2/1/27	Fri 2/12/27	32											
35	D7. Demonstration Facilitation	Fri 2/12/27	Fri 2/12/27												
36	Facilitate a final scoring meeting.	Mon 2/15/27	Mon 2/15/27	32FS+10 day											
37	D8. Preferred Vendor Identification	Mon 2/15/27	Mon 2/15/27	35											
38	Support the City in the contract negotiations and approval process with its preferred vendor.	Tue 2/16/27	Mon 3/15/27	37											
39	D9. Contract Negotiations and Approval Assistance	Mon 3/15/27	Mon 3/15/27												



5. Proposed Fee

Our costs to complete the City’s project are broken down by deliverable below in Table 3. These fees are based on our experience conducting projects of similar size and scope, and the assumption that satisfying a deliverable is based on the City’s signed acceptance. That said, the City will not incur any additional costs associated with the process of reaching deliverable acceptance. We will submit monthly progress invoices based on the work completed toward each deliverable.

Table 3: Fixed-Fee Project Costs for Phases 0 - 2

Phase	Fixed-Fee
Phase 0: Project Planning and Ongoing Project Management	
Estimated hours: 95	
Deliverable 0A. Project Charter, Project Management Plan, and Project Schedule	\$4,000
Deliverable 0B. Ongoing Biweekly Status Updates 9 Months at \$1,750 per month	\$15,750
Phase 0 Total	\$19,750
Phase 1: ERP Needs Assessment	
Estimated hours: 120	
Deliverable 1. Needs Assessment Report	\$29,900
Phase 1 Total	\$29,900
Phase 2: RFP Development Assistance and Selection Assistance	
Estimated hours: 270	
Deliverable 2. Procurement Strategy and Market Analysis Memo	\$2,600
Deliverable 3. Preliminary Functional and Technical Requirements	\$5,500
Deliverable 4. Final Functional and Technical Requirements	\$19,500
Deliverable 5. RFP Package	\$5,500
Deliverable 6. Proposal Summary Memo and Vendor Short-List	\$6,500
Deliverable 7. Demonstration Facilitation	\$17,800
Deliverable 8. Preferred Vendor Identification	\$5,200

Phase	Fixed-Fee
Deliverable 9. Contract Negotiations and Approval Assistance	\$12,000
Phase 2 Total	\$74,600
Total Cost	\$124,250
<i>Travel expense estimation allocation*</i>	<i>\$10,000</i>

*Travel expense will only be billed as incurred.

Table 4: Proposed Travel Expenses

Expense Category	Cost	Units per Trip	Total
Airfare	\$750	1	\$750
Lodging	\$150	3	\$450
Ground Transportation	\$100	4	\$400
Incidental Expenses	\$100	4	\$400
Estimated Per Trip Travel Expense Total			\$2,000

6. Work Sample

“BerryDunn” is the brand name under which Berry, Dunn, McNeil & Parker, LLC and BDMP Assurance, LLP, independently owned entities, provide professional services in an alternative practice structure in accordance with the AICPA Code of Professional Conduct. BDMP Assurance, LLP is a licensed CPA firm that provides attest services, and Berry, Dunn, McNeil & Parker, LLC, and its subsidiary entities provide tax, advisory, and consulting services.

The entities falling under the BerryDunn brand are independently owned and neither entity is liable for the services provided by the other entity. Our use of the terms “our firm” and “we” and “us” and terms of similar import denote the alternative practice structure of Berry, Dunn, McNeil & Parker, LLC and BDMP Assurance, LLP.

We will be utilizing generative AI programs where appropriate and permissible under client contracts and relevant laws. These AI tools are designed to support our team in various aspects of our work, including data analysis and project management. The integration of AI enables us to provide more accurate insights and streamline our processes, ultimately benefiting our clients through enhanced service delivery.

This proposal is the work of Berry, Dunn, McNeil & Parker LLC and is in all respects subject to negotiation, agreement, and signing of specific contracts.



City of De Pere

Enterprise Resource Planning Consulting Services

Berry, Dunn, McNeil & Parker, LLC

April 29, 2026

A photograph of a person with long blonde hair, wearing a light-colored long-sleeved shirt, sitting at a desk and writing in a spiral notebook with a blue pen. The background is softly blurred, showing another person and a laptop. The image is positioned on the left side of the slide, partially overlapping a dark blue vertical bar.

Agenda

- 01** Team Introductions and Firm Overview
- 02** Project Approach
- 03** Why BerryDunn?
- 04** Addressing the City's Questions
- 05** Additional Questions and Answers



a. Who will be assigned to our project, and what are their roles? What do they bring to the table that will make this process successful?



Our proposed project team is complemented by access to the breadth and depth of the BerryDunn network. We have more than **400 additional, highly specialized consulting resources** whose support and expertise can be leveraged as needed to benefit the City's project.



g. What do you see as industry best practices or shifts in ERP software for local government?

- Legacy Data - Conversion vs Data Retention
- Process change not just technology acquisition
- Configuration over Customization
- Shift to Cloud: Security and Integration
- Focus on User Experience and Adoption of Software
- Embedded Analytics and Data Transparency



Enterprise Digital Transformation Practice

- Full range of technological and operational modernization services
- 200+ system life cycle projects
- Independent and objective advisors
- Unique insights and industry best practices at every step

Inspiring Organizations to Transform and Innovate

Bringing proven strategies and a customized approach that has been refined and perfected over decades of relevant experience, we thoroughly assess our clients' current environments and develop realistic and actionable recommendations that yield sustainable, long-term change and support enhanced service delivery.

Unparalleled Expertise to Local Governments



Community Development and Utility Operations



Parks, Recreation, Libraries



Enterprise Organizational Developments



Technology Management



Health and Community Services



Justice and Public Safety

Project Work Plan Overview

Project Planning and Ongoing Project Management

D0A. Project Charter, Project Management Plan, and Proposed Schedule

D0B. Ongoing Biweekly Status Updates

ERP Needs Assessment

D1. Needs Assessment Report

RFP Development Assistance and Selection Assistance

D2. Procurement Strategy and Market Analysis Memo

D3. Preliminary Functional and Technical Requirements

D4. RFP Package

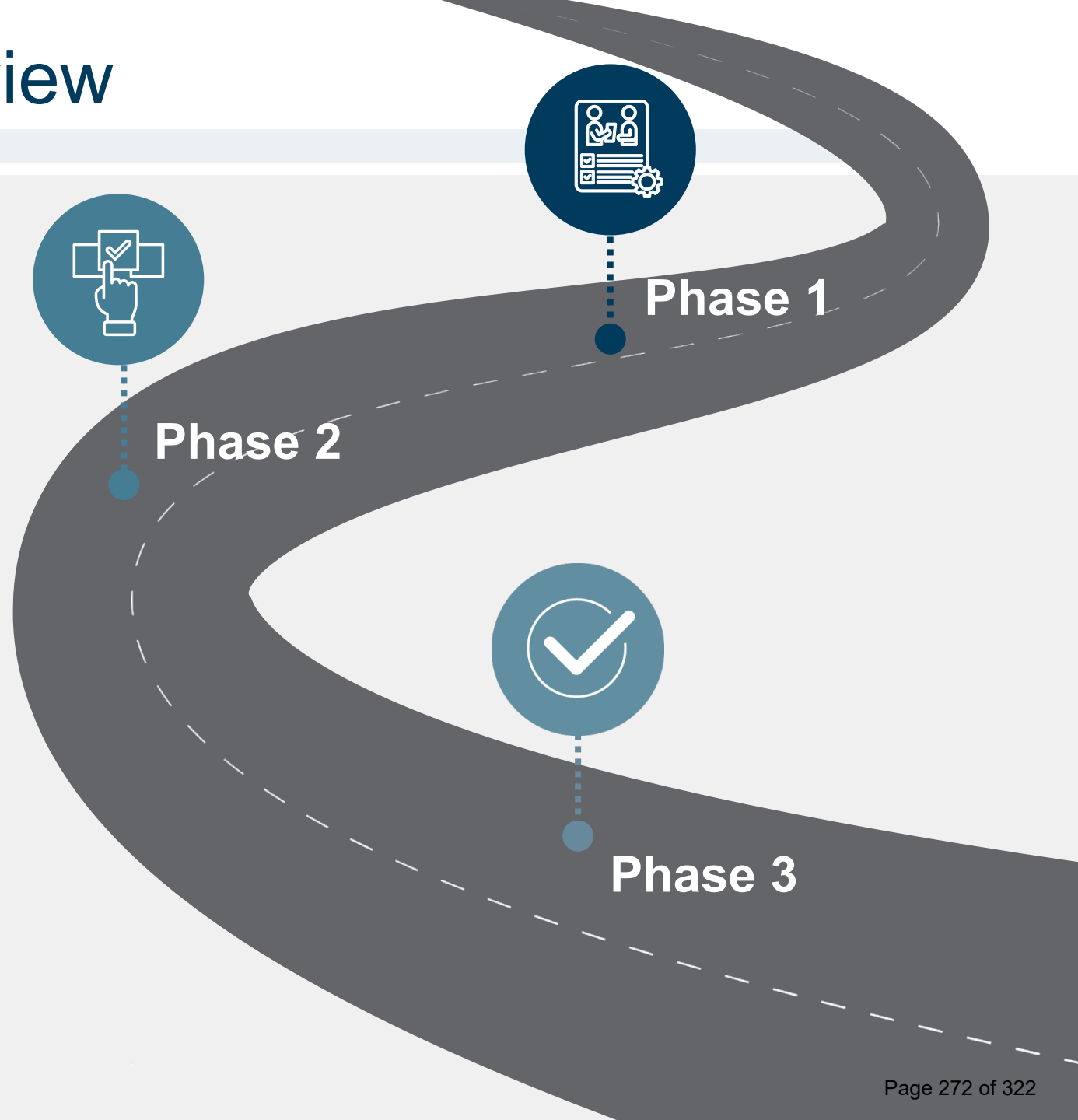
D5. Final Functional and Technical Requirements

D6. Proposal Executive Summary Memo and Vendor Short-List

D7. Demonstration Facilitation

D8. Preferred Vendor Identification

D9. Contract Negotiations and Approval Assistance





b. In your experience, what role does the needs assessment play in the selection of an ERP. What are critical components of a needs assessment? What do you see as the biggest risks or challenges for an organization like ours during ERP selection?

- Establishes a clear, shared understanding of current-state processes and future needs
- Translates business goals into prioritized ERP requirements
- Critical components include stakeholder/process input, requirements prioritization, and data conversion/integration needs
- Risks include stakeholder availability, lack of project governance, and change management/adoption challenges/key person dependency

Phase 1: ERP Needs Assessment

The BerryDunn Difference: *We utilize multiple methods of engagement to seek feedback and provide staff and stakeholders with meaningful opportunities to participate, fostering stronger buy-in. Our Needs Assessment Report will provide detailed analysis and key considerations that will inform the Technical and Functional Requirements.*



d. Tell us about a similar scale/scope project that your team has completed that went very well. What factors influenced success?

Project Spotlight



City of Superior, WI
ERP Software Selection and Implementation
Assistance

Critical success factors:

- Detailed discovery and fact-finding activities
- Market research activities
- Structured procurement approach
 - Highly disciplined evaluation process
- Clear project management and change-focused support model

Common Challenges



e. Now tell us about a similar scale/scope that did not go as smoothly as planned. What factors made the situation challenging?

Challenges	Resolutions
Change resistance	<ul style="list-style-type: none"> • Continuous stakeholder involvement including cross-collaboration • Leverage and embed change management services provided by BerryDunn and the ERP provider
City resource availability	<ul style="list-style-type: none"> • Identify resources by functional area • Identify necessary time commitments based on project planning activities • Review options for augmentation (short-term/long-term)
Lack of sponsorship/ownership	<ul style="list-style-type: none"> • Define leadership's role early • Define communication expectations, governance structure, and decision-making model
Project Schedule	<ul style="list-style-type: none"> • Align project goals with realistic timelines provided by vendors • Explore deployment methodologies that impact timeline(big bang, phased, etc.)
Lack of decision-making	<ul style="list-style-type: none"> • Help ensure decision-making is time-bound • Ensure a scoring method is discussed and confirmed early to gather consensus (vendor selection)
Scope Creep	<ul style="list-style-type: none"> • Create a well-defined scope during contract negotiation • Establish a good formal change control process and use it • Avoid over-engineering processes



f. Our team has limited technical experience related to implementing new ERP software systems. We also have budget limitations that are likely more stringent than other organizations. What advice would you have for us to help craft the best process for this endeavor?



Three decades of experience serving the public sector, including deep municipal Finance and HRIS Experience



Our approach is designed on a fixed fee. Many changes occur during ERP selection and our price should not be one of them.



We don't just execute—we guide, teach, and help build internal capacity for long-term success



Integrated change management best practices that focus on collaborative preparation for new systems and processes and prioritize staff buy-in



Experience with Tyler Technologies migrations, including Incode/ERP Pro



Our commitment to local government and demonstrated commitment to serving clients in the State



Additional Questions and Answers

BerryDunn's Alternative Practice Structure

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CITY OF DE PERE MEMO



To: Honorable Mayor and Members of the Finance Committee
 Kim Flom, City Manager

From: Pam Manley, Finance Director

Date: May 12, 2026

RE: Consideration and Possible Action to select and award a contract to BerryDunn for Enterprise Resource Planning (ERP) Consulting Services

The City issued a Request for Proposals (RFP) for Enterprise Resource Planning (ERP) Consulting Services in March. This is the first step to replacing our current financial and HRIS systems as we have outgrown our current system, Incode. The selected consultant will work with the City to prepare a Needs Assessment and Request for Proposals in order to solicit the best software solution. In 2024, the Finance Department budget included \$60,000 for this service. Those funds have been requested and approved to be carried forward in the past two years.

We received 13 responses, all varying in pricing, see below:

ArtifexIT	\$189,000 + Travel
Avero Advisors	\$120,150 + Travel
BerryDunn	\$105,800 + Travel +\$10,000 Option
CLA	\$68,560 + Technology Fee (5%)
Data Climb	\$229,178
Engineering Solutions	\$58,535
Executive Option	\$255,000 + Travel
Hiten	Not Provided
Integrated Technology Partners	\$185,600 + Travel
Q&A Consulting	\$60,000
Raftelis	\$70,702
Sapot Systems	\$185,000
Soft Resources	\$97,450

The review team—City Manager Flom, HR Director Metzler, Assistant Finance Director Pearson, and me—narrowed the list to the four firms highlighted in grey above for interviews. Following those interviews, our team unanimously recommends entering into a professional services agreement with BerryDunn, pending the Law Department’s review. Their extensive experience,

including work with several Wisconsin clients, along with their depth of resources and proposed methodology, will benefit the City in its selection of a new ERP. Please see revised pricing for BerryDunn below:

Deliverable	Fixed-Fee
Deliverable 0A. Project Charter, Project Management Plan, and Project Schedule	\$4,000
Deliverable 0B. Ongoing Biweekly Status Updates 9 Months at \$1,500 per month \$1,750 per month	\$13,500 15,750
Deliverable 1. Needs Assessment Report	\$29,500 29,900
Deliverable 2. Procurement Strategy and Market Analysis Memo	\$2,600
Deliverable 3. Preliminary Functional and Technical Requirements	\$5,500
Deliverable 4. Final Functional and Technical Requirements	\$17,500 19,500
Deliverable 5. RFP Package	\$5,500
Deliverable 6. Proposal Summary Memo and Vendor Short-List	\$6,500
Deliverable 7. Demonstration Facilitation	\$16,000 17,800
Deliverable 8. Preferred Vendor Identification	\$5,200
Total Cost	\$105,800 124,250
Travel expense estimate (billed only if/as incurred)	\$10,000
Optional Deliverable 9. Contract Negotiations and Approval Assistance	\$10,000 12,000

To finance this project, we would also like to request the use of unassigned reserves to cover the fixed fee and potential travel expenses, not to exceed \$56,000. In addition, \$10,000 would be added to our 2027 budget for Optional Deliverable 9-Contract negotiations and Approval Assistance.

Please feel free to contact any of us prior to the meeting with any questions.



City of De Pere, Wisconsin

9.H

Request for Common Council Action

Meeting Date: May 19, 2026
Department: Police

From:

Subject: Resolution #26-44 Authorizing donation of abandoned bicycles to Counting Stars, Inc.

Recommendation: Motion to Approve.

Section 130-5 of the city municipal code allows for the disposal of abandoned bicycles via donation to an area nonprofit or governmental entity. This abandoned bicycle donation to Counting Stars, Inc., a local nonprofit, is made by resolution under the municipal code.

Attachments:

Reso26-44, Council Bike Donation Memo May 2026, Letter to De Pere PD

RESOLUTION #26-44

AUTHORIZING DONATION OF ABANDONED BICYCLES TO COUNTING STARS, INC.

WHEREAS, the De Pere Police Department (DPPD) recovers numerous unclaimed/abandoned bicycles throughout the City of De Pere on an annual basis, typically sold at a bicycle auction at the Brown County Fairgrounds, following unsuccessful efforts to reunite the bicycles with the proper owners; and

WHEREAS, Counting Stars, Inc. (Counting Stars), a local nonprofit organization, has approached DPPD and requested the donation of abandoned bicycles for provision to the families served by Counting Stars to promote not only recreation and exercise, but to provide experiences and opportunities to foster independence, confidence, inclusion and community involvement for its clients; and

WHEREAS, as a result of the cancellation of the 2026 multi-jurisdictional bicycle auction due to insufficient inventory, DPPD would like to pursue donation of the abandoned bicycles to Counting Stars, authorized by the Council approval required under §130-5 of the De Pere Municipal Code, to free up valuable storage space in the department upon the terms and conditions outlined below.

NOW THEREFORE, BE IT HEREBY RESOLVED:

1. The Police Department may, after meeting the holding time and record keeping requirements of Wis. Stat. §66.0139, donate such abandoned bicycles to Counting Stars as may be needed and available.
2. Such donated bicycles shall be in an “as is” condition, with Counting Stars agreeing to assume all liability associated with the condition of the bicycles.

BE IT FURTHER RESOLVED:

Resolution #26-44

Page 2 of 2

That all City officials, officers, and employees are authorized and directed to take such steps as are lawful and necessary in furtherance thereof.

Adopted by the Common Council of the City of De Pere, Wisconsin, this 19th day of May, 2026.

APPROVED:

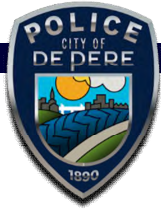
James G. Boyd, Mayor

ATTEST:

Carey E. Danen, City Clerk

Ayes: _____

Nays: _____



To: Mayor Boyd, City Manager Kim Flom, and De Pere City Council

From: Jeremy A. Muraski, Chief of Police

Subject: Surplus Bike Donation Approval

Date: 5/12/2026

Each year the De Pere Police Department recovers, or has delivered to us lost, found, and abandoned bicycles. Our past practice has been to attempt to reunite them with their proper owners whenever possible based on serial numbers, bicycle licensing information, or by matching them up with previous police case reports of lost or stolen bicycles. When we were unsuccessful in doing so we have held onto the bicycles until the next bicycle auction at the Brown County Fairgrounds. The multi-jurisdictional bicycle auction was cancelled for 2026 due to insufficient bike inventory among Brown County agencies.

We have a number of bicycles that are taking up valuable storage space and we are looking into alternative ways of doing away with them. Recently, a non-profit organization approached us asking if we would be able to donate any surplus bicycles to their organization. Please see the attached letter from Counting Stars.

Under City Ordinance Section 130-5, and pursuant to Wisconsin Statute §66.0139, I am requesting council approval and a resolution permitting the police department to dispose of the bicycles to Counting Stars.

Thank you for your consideration,

Sincerely,

A handwritten signature in black ink that reads "Jeremy A. Muraski".

Jeremy A. Muraski

Chief of Police



Dear De Pere Police Department,

On behalf of Counting Stars, we would like to introduce ourselves and share an opportunity for community partnership and support.

Counting Stars is a nonprofit organization proudly located within the De Pere community and dedicated to supporting children, teens, adults, and families through individualized services, advocacy, life skills support, community integration, and family-centered care. Our mission is rooted in creating safe, supportive, and empowering environments where individuals of all abilities can grow, build confidence, and experience meaningful opportunities within their communities.

As a local organization serving many families throughout De Pere and surrounding areas, we are passionate about building strong community connections and ensuring individuals have access to experiences and opportunities that promote independence, confidence, recreation, and inclusion.

As we continue expanding opportunities for the families we serve, we are currently seeking donations of bicycles and helmets of all sizes for both children and adults. Bikes provide not only recreation and exercise, but also opportunities for skill-building, confidence, social engagement, and community involvement for many of our clients.

As a nonprofit organization, we do not always have the funding available to purchase these items directly and rely heavily on the generosity of community donors and partnerships to help meet the needs of the individuals we support.

We are reaching out to ask if the De Pere Police Department may have knowledge of available donated bicycles, recovered unclaimed bikes, community resources, or other partnership opportunities that could help support this need. Any support, guidance, or collaboration would be greatly appreciated.

Thank you for taking the time to learn more about Counting Stars and the work we do within our community. We appreciate your service and commitment to supporting local families and individuals, and we are grateful to be part of the De Pere community alongside organizations working to make a positive impact.

Sincerely,

The Counting Stars Team

Counting Stars Point of Contact: *Billy Steeno* maintenance@countingstarsgb.org / 920-857-5771

Executive Director: *Jen Bourget* info@countingstarsgb.org / 920-940-8393



Request for Common Council Action

Meeting Date: May 19, 2026
Department: Fire
From: Lea Taylor, Executive Assistant
Subject: Resolution #26-45 Approving intergovernmental agreement terms with the Town of Ledgeview for the provision of interim fire chief support services.
Recommendation: Approve Interim Fire Chief Services to the Town of Ledgeview.

Consideration and Possible Action to Provide Interim Fire Chief Services to the Town of Ledgeview.

Attachments:
Reso26-45, 20260513090927766

RESOLUTION #26-45

APPROVING INTERGOVERNMENTAL AGREEMENT TERMS BETWEEN
THE CITY OF DE PERE AND THE TOWN OF LEDGEVIEW FOR THE
PROVISION OF INTERIM FIRE CHIEF SUPPORT SERVICES

WHEREAS, the Town of Ledgeview is in need of interim chief-level administration and incident management support services during its evaluation of a long-term organizational chief position; and

WHEREAS, De Pere Fire Rescue, through the implementation of the Fox River Fire District has been a demonstrated leader in regional collaboration and the City has collaborated with the Town of Ledgeview in the past under other cooperative agreements for the receipt of or furnishing of services for the joint exercise of power or duty required or authorized by law for the individual and mutual best interest of each municipality pursuant to §66.0301 of the Wisconsin Statutes; and

WHEREAS, during this gap-period, the Town of Ledgeview desires to enter into an Intergovernmental Agreement with the City to obtain interim chief-level administration and incident management support in accordance assistance in accordance with the attached Memorandum dated May 19, 2026, submitted by Fire Chief Brett Jansen for consideration by the Common Council; and

WHEREAS, the Common Council has reviewed the terms and conditions presented to it and recommends approval thereof.

NOW, THEREFORE, BE IT HEREBY RESOLVED THAT:

The City Manager and the City Clerk are authorized and directed to execute an Intergovernmental Agreement, incorporating the terms and conditions of the

Memorandum dated May 19, 2026, as is attached hereto, subject to such changes as deemed necessary by the Fire Chief and City Attorney.

BE IT FURTHER RESOLVED THAT:

All City officials, officers, and employees are authorized and directed to take such steps as are lawful and necessary in furtherance thereof.

Adopted by the Common Council of the City of De Pere, Wisconsin, this 19th day of May,
2026.

APPROVED:

James G. Boyd, Mayor

ATTEST:

Carey E. Danen, City Clerk

Ayes: _____

Nays: _____

Memo



To: Honorable Mayor James Boyd
Members of the Common Council

From: Brett Jansen, Fire Chief *BJ*

Date: May 19, 2026

Re: Approval to Provide Interim Chief Services to the Town of Ledgeview

Purpose:

This memo requests City Council approval for De Pere Fire Rescue to enter into an Intergovernmental agreement (IGA) with the Town of Ledgeview to provide temporary interim chief leadership and operational support services.

Background and Objectives:

On April 15, 2026, the Town of Ledgeview contacted De Pere Fire Rescue to explore options for obtaining temporary interim chief-level administrative and incident-management support services. Ledgeview is seeking immediate leadership continuity to cover a gap while evaluating a long-term organizational chief position.

De Pere Fire Rescue has a proven record of regional collaboration, most notably through its leadership role in the development and implementation of the Fox River Fire District. This shared-services model, spanning nine communities, has demonstrated measurable benefits that include reduced operational barriers, unified policies and training, and streamline incident response.

De Pere Fire Rescue is pleased to offer interim chief services to the Town of Ledgeview Fire Department with the following objectives:

1. Provide leadership support and administrative oversight for the Ledgeview Fire Department; and
2. Enhance the consistency and effectiveness of incident management.

To meet these objectives, De Pere Fire Rescue proposes the following services:

- Provide administrative chief leadership, including department management, strategic planning, and training guidance, along with on-scene incident command support as needed.

- Deploy De Pere Fire Rescue Battalion Chiefs to respond to fire incidents, ensuring consistent incident command and reducing communication barriers. The Battalion Chief will be dispatched to all fire incidents to help supplement Ledgeview Duty Chief response.
- Support Ledgeview Fire Department staff in established areas of training, public education, inspections, investigations, incident response, and operational assignments.
- Provide a monthly administrative report to the Ledgeview Town Board outlining activities, progress, and key initiatives.

Pricing and Timeline:

Chief services will be offered to the Town of Ledgeview at a monthly fee of \$3,500, with flexibility to adjust based on the duration, scope of services, or additional needs. The IGA will have a maximum timeline of three (3) months.

If Council approves the proposed terms as noted above, the City will prepare an Intergovernmental Agreement (IGA) for the Town of Ledgeview to formalize services.

De Pere Fire Rescue appreciates the opportunity to partner with the Town of Ledgeview and welcomes continued discussion. We remain committed to collaboration in pursuit of our shared goal: delivering the highest quality emergency services to the communities we serve.

Thank you for your consideration. If you have any questions, please do not hesitate to ask.



Request for Common Council Action

Meeting Date: May 19, 2026
Department: City Attorney

From: Angela Zills, Paralegal

Subject: Resolution #22-46 Approving Letter of Retainer for professional services with Stafford Rosenbaum LLP (public service utility infrastructure expansion).

Recommendation: Motion to approve.

This resolution relates to Item 8D under New Business. It is the approving resolution for the retainer of Stafford Rosenbaum LLP.

Attachments:
Reso26-46, Retainer ltr for De Pere 4931-9487-9402 v.1 4938-6813-0730 v.1

RESOLUTION #22-46

APPROVING LETTER OF RETAINER FOR PROFESSIONAL SERVICES
BETWEEN THE CITY OF DE PERE AND STAFFORD ROSENBAUM LLP
(Public Service Utility Infrastructure Expansion)

WHEREAS, the City is in need of retaining outside counsel that specializes in the areas of law related to public service utilities infrastructure expansion and required representation before the Public Service Commission (PSC); and

WHEREAS, Stafford Rosenbaum LLP has available and offers to provide legal counsel necessary to facilitate the filing of a municipal petition and application to the PSC, under the management of the Law Department for legal strategies involved in order to best represent the City's interests throughout the pendency of the matter, pursuant to the attached Letter of Retainer.

NOW, THEREFORE, BE IT HEREBY RESOLVED THAT:

The City Attorney is authorized and directed to enter into such Letter of Retainer for professional services between the City of De Pere and Stafford Rosenbaum LLP, as is attached hereto.

BE IT FURTHER RESOLVED THAT:

All City officials, officers, employees, and agents are further authorized and directed to take such steps as are lawful and necessary in furtherance thereof.

Adopted by the Common Council of the City of De Pere, Wisconsin, this 19th day of May, 2026.

APPROVED:

James G. Boyd, Mayor

ATTEST:

Carey E. Danen, City Clerk

Ayes: _____

Nays: _____

Board/Committee Approval: 05/12/2026

Vanessa D. Wishart
222 West Washington Avenue, Suite 900
P.O. Box 1784
Madison, WI 53701-1784
vwishart@staffordlaw.com
608.210.6307

May 11, 2026

VIA EMAIL
jbungert@deperewi.gov

Joanne Bungert
City Attorney
335 S Broadway
De Pere, WI 54115

RE: Retainer letter

Dear Ms. Bungert:

This letter is to confirm that you wish to retain us to represent you with respect to water utility infrastructure expansion through an adjacent town. Our representation is limited to this issue and we are not representing you with respect to other matters at this time. Please sign this letter and return a copy to us via email.

Fees and Charges

As we discussed, you have agreed to pay for our services based on the number of hours we spend working on this matter. Our hourly rates are:

Partners/Of Counsel	\$ 325.00
Associate Attorneys	\$ 275.00
Law Clerks/Paralegals/Legal Assistants	\$ 150.00

The above hourly rates are the rates in effect for the current year (2026) and are subject to change on an annual basis. We will notify you in writing prior to a change in our rates.

You also agree to pay for all expenses. These expenses include, but are not limited to, filing fees, computer-aided research, travel expenses, document filing and certification and express delivery. We may forward some invoices for expenses directly to you for payment.

We will bill you monthly during the course of our work. Each bill is payable in full upon receipt.

A 1% per month (12% per year) interest charge may be assessed on any unpaid balance remaining 30 days after the date of any bill we send to you. The interest charge will continue to be assessed until the balance is paid in full.

Conclusion of Representation

To enable us to represent you effectively, you agree to cooperate fully with us in all aspects of the representation. You understand that we do not make any promise or guarantee about the outcome of this matter. You agree to pay all fees and expenses regardless of the outcome. We reserve the right to withdraw as your lawyers if you do not meet the terms of this agreement with respect to fees and advances.

At the conclusion of this matter, we will return to you any original documents you request. We will keep your file in electronic format only for 7 years, at which point we will destroy the file without additional notice to you. Please contact us at any time before the retention period expires if you would like us to provide you with a copy of all or any portion of the file before it is destroyed.

You may discharge us as your attorneys at any time by written notice. If you do so, you remain responsible for paying all fees and expenses incurred before we receive the notice. We may terminate our representation of you if we conclude that we may do so consistent with the Rules of Professional Conduct for Attorneys. If we do so, you remain responsible for paying all fees and expenses incurred before termination. This letter states our entire agreement and supersedes any previous discussions.

If the terms outlined in this letter are satisfactory to you, please confirm your agreement with the arrangements stated above by signing one copy of this letter and returning it to us. Please review the enclosed Billing Information Statement. If you have any questions now or at any time regarding the status of your account or our billing procedures, please do not hesitate to ask us.

Best regards,

STAFFORD ROSENBAUM LLP



Vanessa D. Wishart

VDW/mai

Enc.

AGREED TO:

CITY OF DE PERE, WISCONSIN

By _____
Joanne Bungert, City Attorney

_____, 2026
Date

BILLING INFORMATION STATEMENT

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR STATEMENT

If you think your Statement is wrong, if you object to a disbursement from our trust account or if you need more information about a transaction on your Statement, write us at:

Stafford Rosenbaum LLP
Attention: Accounting
222 West Washington Ave., Suite 900
P. O. Box 1784
Madison, WI 53701-1784

Write to us as soon as possible. We must hear from you no later than 30 days after we sent you the first Statement on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In your letter, give us the following information:

- Your name.
- The dollar amount of the suspected error.
- Describe the error and explain why you believe there is an error. A generalized objection may not be sufficient to preserve your rights.
- If you need more information, describe the item you are not sure about.

We will either correct the error or explain why we believe the Statement was correct. You do not have to pay any questioned amount while we are investigating, but you are still obligated to pay the parts of your Statement that are not in question.

If we find that we made a mistake on your Statement, you will not have to pay any Finance Charge related to any questioned amount. If we did not make a mistake, you may have to pay Finance Charges, and you will have to make up any missed payments on the questioned amount. In either case, we will send you a notification of the amount you owe and the date that it is due.

LIMITED LIABILITY LAW PRACTICE

Our law firm has registered as a limited liability partnership (LLP) with the Wisconsin Department of Financial Institutions. In order to operate as an LLP, our firm is required (by Wisconsin Supreme Court Rule) to carry professional liability insurance providing at least \$1,000,000 in combined indemnity and defense cost coverage per claim and \$2,000,000 in aggregate combined indemnity and defense cost coverage per policy period. Our firm's coverage will meet or exceed these requirements.

Each partner who renders services to you may be personally liable for his or her acts or conduct. However, partners who have no involvement with a matter are not subject to personal liability with respect to that matter.



Request for Common Council Action

Meeting Date: May 19, 2026
Department: Parks, Recreation & Forestry
From: Marty Kosobucki, Parks, Recreation and Forestry
Director
Subject: 2026 Aquatic report - informational presentation.
Recommendation:

Parks Director Marty Kosobucki will provide an informational presentation reviewing the 2025 Aquatic Report and status of Legion Pool.

Attachments:
Aquatic Annual Report - 2025, Summer Pools Update



Aquatic Annual Report 2025

Completed by:
Chelsea Moberg

Table of Contents

Season Summary.....	3
Daily Usage Data	3
Staffing	4
Recruitment & Retention Strategies	4
Staffing Levels	4
Inservice Training	4
Staffing Plan Changes.....	4
Aquatic Offerings.....	5
Concessions.....	5
Facility Rentals.....	6
Programs	6
Swim Lesson Data	6
Adult Aquatic Fitness Programming.....	7
Pool Passes.....	7
Special Events.....	7
Safety	8
Water Rescues.....	8
Total Rescues by Month	8
Total Rescues by Age	8
Total Rescues by Location	8
Total Rescues by Facility	8
Historic Water Rescue Data.....	8
Incidents.....	9
Budget	10
Overall Budget Comparison	10
Historic Budget Data	10

Season Summary

Overall, the 2025 season was consistent with prior seasons facility usage levels, program registrations, and trended positively for most areas like pool rentals and daily admission levels. Staffing levels were excellent. Our overall numbers would be higher for concessions sales and attendance if the first couple weeks of the season had better weather.

Daily Usage Data

This data gives an overview of the season attendance in comparison to the most recent season.

	2025		2024	
	Legion	VFW	Legion	VFW
Daily Average Attendance	176	309	182	330
Highest Attendance Day	6/17/25 519	6/17/25 688	6/18/24 462 Daily Total	6/18/24 797 Daily Total
Total Season Attendance	12,703	22,250	13,081	23,741
Baby Daily Admissions	233	748	183	744
Single Daily Admissions	3,550	10,608	3,260	10,430
Senior Daily Admissions	199	469	212	443
Lap Swim Daily Admissions	124	24	32	84
Season Pass Daily Scans	8,597	10,401	9,394	12,040
Max Rental Attendees	1,524	3,845	1,552	2,464
Days in Season	72	72	72	72
Facility Closures	21	15		

Historic Attendance Data

Year	Legion		VFW		Notes
	Daily Attendance	Days in Season	Daily Attendance	Days in Season	
2025	12,703	72	22,250	72	
2024	13,081	72	23,741	72	
2023	14,449	72	25,357	72	
2022	12,604		24,240	72	Legion – delayed opening due to leak
2021	16,320	72	25,331	72	
2020	6,146	69	NA	0	VFW Closed
2019	15,493	72	NA	0	VFW Closed
2018	15,690	69	11,656	69	
2017	16,718	68	10,864	68	

Staffing

Recruitment & Retention Strategies

Staff retention and recruitment was actively started for the 2025 season during the 2024 summer season. Re-hire letters were issued in December of 2024, management positions interviewed for in January and February of 2025, and lifeguard/pool facility attendant positions interviewed for starting in January and February of 2025. Most positions were filled by the end of February with most onboarding paperwork being completed in March and April.

Staffing Levels

This year staffing levels were excellent. There were no instances of closure or significantly reduced offerings due to staffing levels. Compared to prior seasons this is a monumental achievement. Our most challenging role to fill was Lifeguards. A small number of applicants / staff dropped off early in the season, but we over hired anticipating this issue.

Positions Hired

Senior Pool Manager - 1

Pool Managers – 5-8

Assistant Pool Managers – 2-4

Lifeguards / Swim Instructors – 38

Pool Facility Attendants - 21

Inservice Training

We collaborated with a variety of departments to create a robust training plan for this summer season. This included partnering with the police department (active threat response), HR (sexual harassment videos), maintenance (pump room training), and the fire department (EMS activation training).

- **Pre-Season:** 5/27-6/5/2025 various topical trainings including: orientation, skills polishing, emergency action plans, concessions/point of sale, cleaning, swim lessons, CPR/first aid, pool maintenance, and a soft opening at VFW.
- **Main Season:** Lifeguards trained for an hour each week throughout the summer season and cycled through a variety of relevant topics including seizures, EAPs, first aid, CPR, and more. Pool facility attendants had 3 trainings throughout the summer season to touch base, review procedures and troubleshoot ongoing issues. Pool management met weekly to discuss ongoing issues, upcoming events, and coordinate tasks. We partnered with the Fire Department to run full EAP scenarios (including 911 calls and a follow-up debrief with the responding fire fighters).
- **Additional Training:** De Pere participated in the New Pro Lifeguard Competition. One of our two participating teams took second place at the event. We were one of the planning municipalities and spent time prior to the season preparing activities for the competitions.

Staffing Plan Changes

This year we implemented roving staff at VFW during the busiest times of the day. This helped address a variety of issues including reduced impact on pool operations for staff call outs, increased lifeguard

coverage on busiest parts of pool, increased support in concessions or admissions, and a way to rotate staff in for a break during extreme heat or poor air quality index days. Staff were also able to find and address the “shower slip and slide” culprits preventing further damages to the facilities. We will continue to fine tune this adjustment but see it as a positive change for the department and community.

Aquatic Offerings

Concessions

Concession sales were excellent. Pulled pork nachos were added to our menu and a quick favorite for many guests. Two freezers were replaced at VFW to address prior issues with melting ice cream. They performed better than expected and we had no instances of the freezers causing product losses this season. Leftover products were sold at the Beer Gardens and at the Community Center / MSC at a discount post season.

Product Type	Sale Price	QTY Sold Legion	QTY Sold VFW	Qty Sold Grand Total	Best Seller
Candy	\$1.00	291	366	657	Airheads (3 for \$1)
	\$2.25	154	278	432	Charleston Chew - Vanilla
	\$3.50	56	129	185	Cotton Candy – Blue
	\$4.00	27	95	122	Freeze Dried Skittles
	ALL Candy	1526	2688	4214	
Drinks	\$1.50	148	550	698	Bottled Water
	\$2.50	56	179	235	Bubbl’r Triple Berry
	\$3.00	0	1556	1556	Slush Puppies
	\$4.00	0	19	19	Iced Coffee
	ALL Drinks	697	3900	4597	
Food	\$0.75	176	826	1002	Extra Cheese
	\$2.75	0	188	188	Hot Dog Bagel Bites
	\$3.50	272	1089	1361	Pretzel
	\$6.00	10	86	96	Pulled Pork Nachos
	\$11.00	0	110	100	Pepperoni Pizza
	ALL Food	614	3146	3760	
Frozen	\$1.25	426	753	1179	Giant Freezie Pop
	\$2.25	212	312	524	Ice Cream Sandwich
	\$2.75	200	418	618	Sponge Bob Bar
	\$3.25	222	614	836	M&M Cookie Sandwich
	ALL Frozen	2098	4004	6102	
Snacks	\$0.75	45	124	169	Welches Fruit Snack
	\$1.00	126	302	428	Ruffles Cheddar & SC
	\$2.25	60	180	240	Pickle Bites
	\$3.00	5	24	29	Beef Stick
	ALL Snacks	445	1624	2069	

Facility Rentals

In 2025 we offered traditional facility rentals to the community on most of the operating weekends. Opening weekend, Fourth of July, and closing weekends were not offered as reservable due to consistent difficulties staffing additional hours those weekends. We continued offering rentals on Friday mornings and party packages during evening open swim. Bookings were processed via online application. We had 4 Legion Pool Parties and 9 VFW Pool Parties in 2025.

Summary			Legion Pool			VFW Pool				
Year	Rental Revenue	Total Renters	Main Pool	Tot Pool	Inflatables	Main Pool	Tot Pool	Party Room	Slides	Concessions
2025	\$24,411	63	18	4	9	35	13	10	29	6
2024	\$17,277	54	19	6	3	28	9	10	27	6
2023	\$16,465	52	14	7	6	35	19	10	31	2
2022	\$10,832	41						NA		
2021	\$12,970	62								
2020	\$0	0	<i>NA – no traditional rentals due to COVID</i>							
2019	\$803	4								
2018	\$1,368	7								

Programs

At our summer seasonal facilities, we offered a variety of regular programs including group swim lessons, private swim lessons, water fitness classes, and a Masters Swim program. In 2025 we added a competitive swim program with 23 participants joining for the season. We also offered a mermaid experience in conjunction with existing youth programming.

Swim Lesson Data

Year	Total Enrolled	Group Lessons	Private Lessons	Est. Total Revenue	Budgeted
2025	953	692	261	\$59,086	\$45,500
2024	858	694	164	\$52,016	\$44,632
2023	708	621	87	\$37,392	\$35,000

Year	Total Enrolled
2025	953
2024	858
2023	708
2022	
2021	160
2020	88
2019	533
2018	722
2017	721

Adult Aquatic Fitness Programming

Year	Water Fitness – Summer	Water Fitness – Syble Hopp	Masters Swimming
2025	57	420	14
2024	53	479	9
2023			13

Pool Passes

Multiple pass options were available to residents and non-residents this year. Offerings included: Legion pool passes, VFW & Legion pool passes, individual passes, family passes, and senior passes. Sales for those passes started with the summer brochure registration opening date and included a pre-season discount. Registration was offered online with an in-person validation. Staff noted challenges with verifying family status and transferring prior season ID numbers to new registrations.

Year	VFW & Legion					Legion Only		
	Individual	Family	Senior	Lap	Lap - Senior	Individual	Family	Senior
2025	103	2,343	34	4	11	10	348	17
2024	143	2,618	38	9	10	25	420	20
2023	145	3,169	45	7	11	21	369	22
2022	153	2,905	47	11	20	26	292	13

Historic Season Pass Data

Data updated to reflect each individual user with a pass for consistent comparisons.

Year	Total Passes Issued
2025	2870
2024	3148
2023	3789
2022	3467
2021	3478
2020	NA
2019	1558
2018	2470
2017	2520
2016	2568

Special Events

This season a variety of family and youth focused events were offered throughout the season. They were typically offered in conjunction with open swim as a perk of attending during lower attendance times.

- Floating Family Bingo – 4 times, twice at each pool.
- 4th of July Games – 2 times, once at each pool
- Boat Races – 2 times, once at each pool
- Mermaid Meet & Greet – 1 time, at Legion Pool during tot swim hours

- Giveaways – 8 times, four times at each pool
- Flotation Fridays – 3 times at Legion Pool during open swim hours

Safety

All rescues, first aid instances, patron discipline issues and similar issues were tracked through our standard reports. A few trends have been noticed, and staff are considering plans to ensure those are addressed in future seasons.

- Diving Board (high dive) injuries while attempting to climb down the ladder
- Non-swimmers on the lily pads

Water Rescues

Total Rescues by Month

	June	July	August
2025	24	12	11
2024	16	14	4
2023	10	12	8
2022	15	15	12

Total Rescues by Age

	0-5 Years	6-12 Years	13-17 Years	18+ Years
2025	10	35	1	1
2024	5	25	0	4
2023	10	18	2	0
2022	12	24	2	4

Total Rescues by Location

	Lily Pads	Deep End	Shallow End	Other
2025	31	8	7	2
2024	22	9	3	0
2023	19	10	1	0
2022	27	15	0	0

Total Rescues by Facility

	Legion	VFW
2025	2	46
2024	2	32
2023	5	25
2022	4	38

Historic Water Rescue Data

Staff would like to make note that the significant overall increase in rescues is not a poor reflection on the seasonal staff skills or attention. This increase is directly related to the nature of the amenities at VFW Aquatic Facility along with the magnitude of attendees per day at that facility. Most rescues have

been either distressed swimmers or active drowning victims, which indicates the quick recognition and response of staff members.

Year	Total Rescues	Notes
2025	48	Significantly more lily pad specific rescues this season
2024	34	
2023	30	Added standard swim testing, coordinated with day camp staff on skill assessments
2022	42	Added adult supervision requirement for children aged 8 & under, allowed coast guard life jackets
2021		<i>Unsure – data not found</i>
2020	1	(1 pool)
2019	2	(1 pool)
2018	5	
2017	3	
2016	4	
2015	9	
2014	6	

Incidents

Incident reports are incidents that did not require a save to be performed. These incidents required the patron to receive First Aid for things such as cuts, bruises, bloody noses, etc.

Year	Legion	VFW
2025	1	6
2024	2	8
2023	4	2
2022	1	11
2021		
2020	2	NA
2019	11	NA
2018	6	4

Budget

Overall Budget Comparison

Expenses	2025 Budgeted	2025 Actuals	2024 Budgeted	2024 Actuals
Salaries	\$27,319	\$26,575	\$26,258	\$26,756
Hourly Wages	\$69,092	\$41,551	\$55,963	\$38,702
OT Wages	\$4,000	\$5,939	\$1,700	\$4,996
Seasonal Wages	\$280,285	\$292,933	\$257,461	\$266,153
Benefits				
- FICA	\$11,746	\$9,739	\$10,153	\$9,126
- Pension	\$6,979	\$5,000	\$5,791	\$4,859
- Insurance	\$37,675	\$28,748	\$50,369	\$31,899
Training	\$4,000	\$4,273	\$4,000	\$2,765
Telephone	\$2,050	\$1,424	\$2,050	\$2,014
Conferences	\$2,200	\$855	\$2,166	\$929
Data	\$750	\$0	\$750	\$0
Rentals	\$14,000	\$3,569	\$0	\$0
Utilities	\$79,500	\$66,679	\$79,500	\$55,890
Equipment Maintenance	\$44,000	\$29,590	\$44,000	\$31,113
Memberships & Subscriptions	\$55	\$76	\$45	\$56
Operating Supplies	\$14,250	\$16,010	\$17,745	\$15,189
Pool Chemicals	\$64,000	\$47,776	\$40,000	\$38,883
Concessions	\$28,000	\$25,970	\$28,000	\$25,038
Capital Equipment	\$28,000	\$57,829	\$13,600	\$10,719
Total Expenses	\$717,901	\$664,539	\$639,551	\$565,090

Revenues	2025 Budgeted	2025 Actuals	2024 Budgeted	2024 Actuals
Concessions	\$54,574	\$50,041	\$53,534	\$48,130
Swimming	\$276,150	\$284,979	\$254,410	\$283,628
- MISC	^	\$24,411	^	\$19,423
- Season Pass	^	\$91,233	^	\$92,104
- Gen. Admission	^	\$92,911	^	\$91,371
- Swim Lessons	^	\$52,497	^	\$44,621
- Syble Hopp	^	\$44,159	^	\$36,109
Total Revenue	\$330,724	\$355,252	\$307,944	\$331,758

Historic Budget Data

Year	Actual Revenue	Actual Expenses
2025	\$355,252	\$664,539
2024	\$331,758	\$565,090

2023	\$336,266	\$584,858
2022	\$306,284	\$529,933
2021	\$289,637	\$405,560
2020	\$32,585	\$133,952
2019	\$83,380	\$143,126
2018	\$129,814	\$277,328
2017	\$125,210	\$242,391

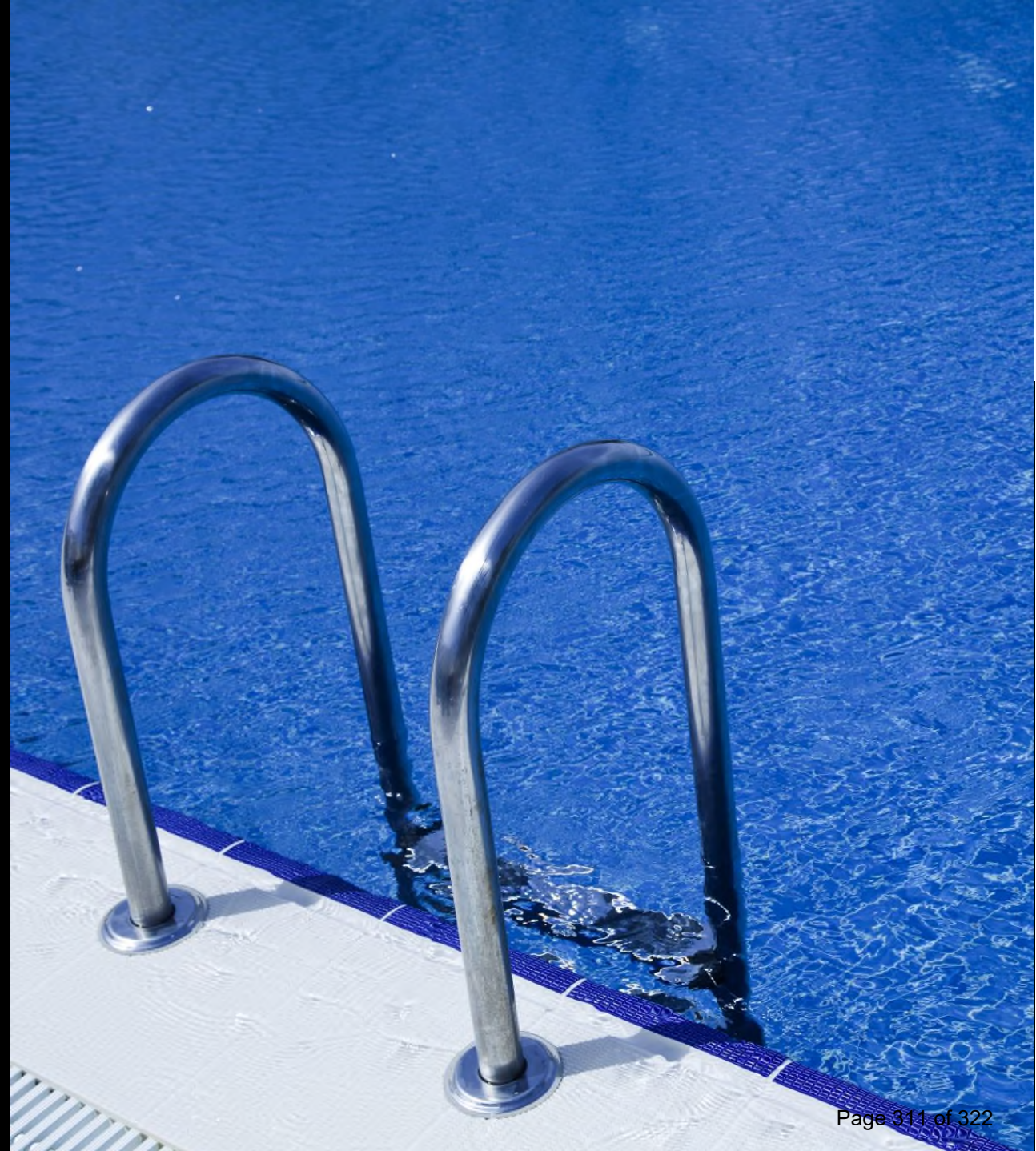


SUMMER POOLS UPDATE

City of De Pere

TOPICS

- How Did 2025 Aquatics Go?
- Condition Status Of Legion Pool
- Status Of Replacing Legion Pool



HOW DID 2025 AQUATICS GO?

- Attendance has declined slowly since 2021, but still very popular.
- Staffing has been very solid, no major shortages.
- Rental revenue has increased since 2022

Year	Legion		VFW	
	Daily Attendance	Days in Season	Daily Attendance	Days in Season
2025	12,703	72	22,250	72
2024	13,081	72	23,741	72
2023	14,449	72	25,357	72
2022	12,604		24,240	72
2021	16,320	72	25,331	72
2020	6,146	69	NA	0
2019	15,493	72	NA	0
2018	15,690	69	11,656	69
2017	16,718	68	10,864	68

Year	Rental Revenue	Total Renters
2025	\$24,411	63
2024	\$17,277	54
2023	\$16,465	52
2022	\$10,832	41
2021	\$12,970	62
2020	\$0	0
2019	\$803	4
2018	\$1,368	7

HOW DID 2025 AQUATICS GO?

-Swim Lessons have increased since 2019.

-Passes have declined slightly

-Resident vs. Non-Resident

-increased NR Fees significantly in 2021

-based on data we are currently 75% R, 25% NR



Year	Total Enrolled
2025	953
2024	858
2023	708
2022	N/A
2021	160
2020	88
2019	533
2018	722
2017	721

Year	VFW & Legion		Legion Only	
	Resident	Non-Resident	Resident	Non-Resident
2025	2000	513	269	111
2024	2265	502	295	90



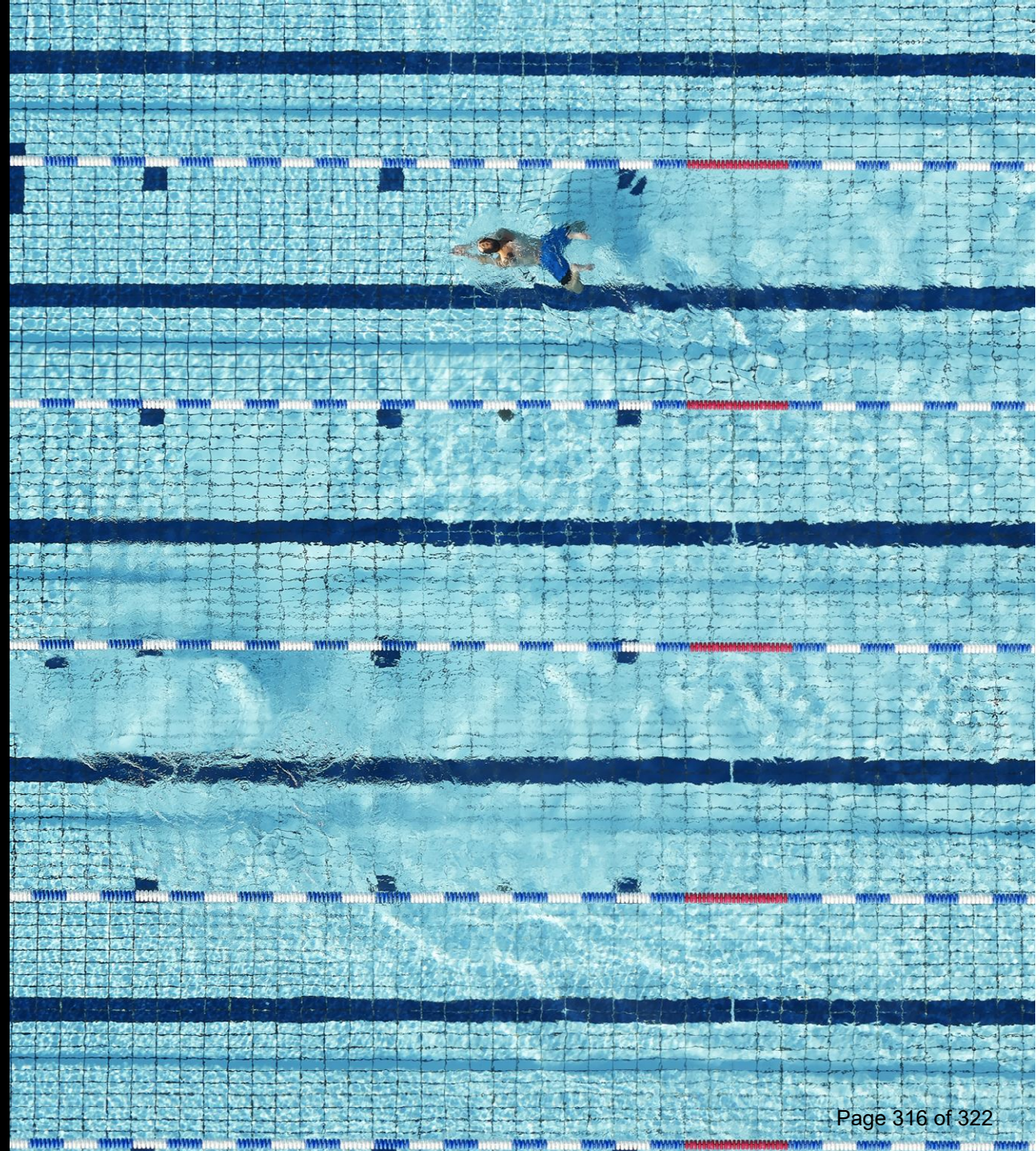
STATUS OF LEGION POOL

**HOW LONG
WILL LEGION
POOL LAST?**



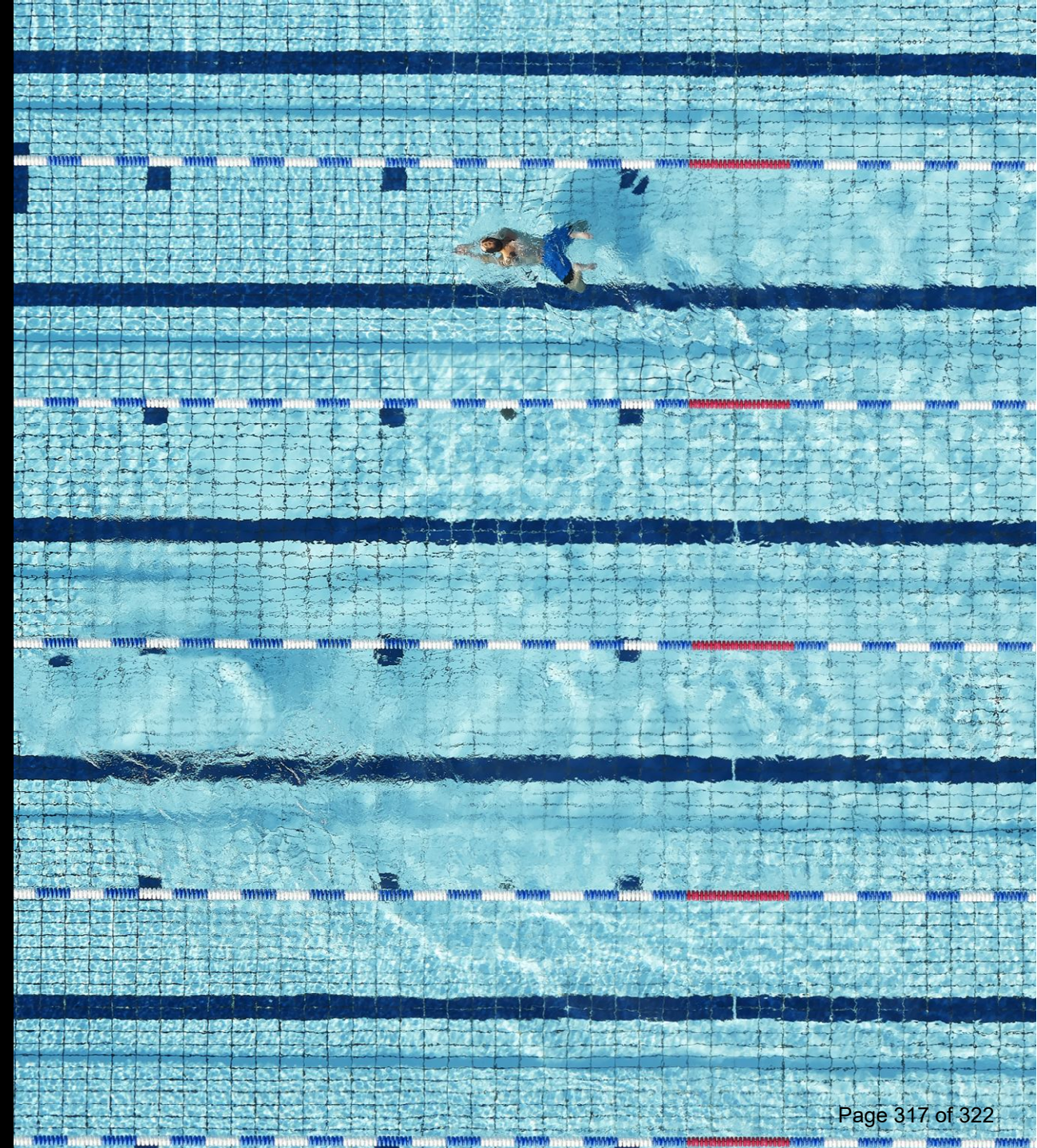
RECENT POOL REPAIRS

- Pool boiler replaced - \$24,000 (2025)
- Sewer line repair - \$15,000 (2025)
- Underground piping repair \$40,000 (2022)
- 5-10 years back are a list of more major repairs (broken pipes)



CURRENT POOL CONCERNS

- Leak in gutter system
- Boiler for building heat
- Electric panels and wiring are old and unpredictable
- Roof is in need of repair
- Plaster in pool basin is cracking and has hollow spots
- Condition of underground piping is unknown





STATUS OF REPLACING LEGION POOL

LEGION POOL - BACKGROUND

- 2019 Referendum - “improving and transforming the pools located at VFW Park and at Legion Park into aquatic facilities and for operating those aquatic facilities”. Voters approved \$900k/Year by a 63% vote.
- In 2022, the Council approved a repair policy. If the facility incurred repair of \$50,000 or more, it would trigger a review of the proposed timeline. If a catastrophic failure occurred (\$200,000 or more) it would trigger the start of technical design for Legion Pool.
- The VFW bonding debt will be paid off in 2029-2030, and the Pool Fund is projected to be in the positive starting in 2030.
- The CIP currently projects Legion Pool design in 2029 and construction in 2030.
 - CIP is just a *plan* and not an approved budget document.
 - Legion Pool is projected to cost \$10.5M with its approved conceptual design. This amount is subject to change due to many variables.

LEGION POOL - BACKGROUND

- **When calculating: projected cost, 2029-2030 timetable, current operating costs, and interest rates.**
 - The current referendum amount of \$900,000 will not cover debt payment for a \$10.5M pool and operating costs for both pools. Current model doesn't include increase in operating costs, which is very possible.
- **Simple Budget breakdown**
 - Expenses: Operating Costs - \$494,000(projected operating expense – 2 pools), Debt Payment - \$406,000 = \$900,000
 - Taking a projected \$406,000 debt payment and translating it into a new bond, would yield \$3.2M (10 years) or \$5.3M (20 years) in capital funding, resulting in an estimated \$5.2M – 7.3M gap to replace Legion Pool.
- **Projected Budget Breakdown**
 - \$10.5M Bonding projection,20 years, 4.5% interest rate.
 - Expenses: Operating Costs - \$494,000, Debt Payment + \$994,000 (first full year) = \$1,488,000 (Debt + Operating)

Replacing Legion Pool will require a solution for the funding gap.

KEY TAKEAWAYS

- Both pools remain very popular community assets, despite a slight decrease in attendance.
- Staffing shortages have leveled off which was major concern post covid.
- Legion Pool – Continue the conversation to map out a solution
 - Not able to accurately predict how long Legion Pool will last.
 - The pool has endured a number of major repairs and has a number of concerns.
 - Increase in operating and construction costs compared to referendum funding, project a funding gap for replacement.
 - We recommend an Ad Hoc Committee and community engagement strategy to update community needs and refine Legion Pool options for the Common Council.



QUESTIONS

De Pere Aquatic Report