



## License Committee Regular Meeting Agenda

Tuesday, September 15, 2026 at 7:00 PM

### Council Chambers and Virtual

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**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

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**1. Call to Order**

**2. Roll Call**

**3. Public Comments**

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

**4. New Business**

- A. Approval of the minutes of the July 21, 2026 License Committee meeting.
- B. Request by Nicholas Madsen to appear before the License Committee regarding the denial of his operator license application.\*
- C. Renewal application for a Class "B" Fermented Malt Beverage license for De Pere Deacons Hockey Team, Inc. (DBA De Pere Deacons Hockey), 1450 Ft Howard Av. Agent: David Lepp, Green Bay WI.\*

**5. Future Agenda Items**

**6. 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 License Committee, 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 available on demand at <https://deperewi.portal.civicclerk.com/>.***



## City of De Pere, Wisconsin

4.A

### Request for License Committee Action

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|                        |                                                                         |
|------------------------|-------------------------------------------------------------------------|
| <b>Meeting Date:</b>   | September 15, 2026                                                      |
| <b>Department:</b>     | City Clerk                                                              |
| <b>From:</b>           | Carey Danen, City Clerk                                                 |
| <b>Subject:</b>        | Approval of the minutes of the July 21, 2026 License Committee meeting. |
| <b>Recommendation:</b> | Motion to approve.                                                      |

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**Attachments:**

7-21-26 License Committee minutes\_draft



# License Committee

## Regular Meeting

### Minutes

335 South Broadway  
De Pere, WI 54115  
[www.deperewi.gov](http://www.deperewi.gov)

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Tuesday, July 21, 2026

7:00 PM

City Hall, Council Chambers 335 S.  
Broadway

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#### 1. Call to Order

The meeting was called to order at 7:00PM by Alderperson Pamela Gantz.

#### 2. Roll Call

**Present:** Pamela Gantz, Devin Perock, Dustin Thill

Also present: City Attorney Joanne Bungert and City Clerk Carey Danen.

#### 3. Public Comments

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

None.

#### 4. New Business

A. Approval of the minutes of the July 7, 2026 License Committee meeting.

|                  |                                          |
|------------------|------------------------------------------|
| <b>RESULT:</b>   | <b>APPROVED [UNANIMOUS]</b>              |
| <b>MOVER:</b>    | Pamela Gantz                             |
| <b>SECONDER:</b> | Devin Perock                             |
| <b>AYES:</b>     | Pamela Gantz, Devin Perock, Dustin Thill |

B. Request by Sandra Rodriguez to appear before the License Committee regarding the denial of her operator license application.\*

Alderperson Perock moved, seconded by Alderperson Thill to open the meeting. Upon vote, motion carried unanimously. Applicant Sandra Rodriguez addressed the Committee and answered questions. Alderperson Gantz moved, seconded by Alderperson Perock to close the meeting. Upon vote, motion carried unanimously.

|                  |                                          |
|------------------|------------------------------------------|
| <b>RESULT:</b>   | <b>APPROVED [UNANIMOUS]</b>              |
| <b>MOVER:</b>    | Pamela Gantz                             |
| <b>SECONDER:</b> | Dustin Thill                             |
| <b>AYES:</b>     | Pamela Gantz, Devin Perock, Dustin Thill |

- C. Request by Chelsea Cure to appear before the License Committee regarding the denial of her operator license application.\*

Aldersperson Gantz moved, seconded by Aldersperson Perock to open the meeting. Upon vote, motion carried unanimously. Applicant Chelsea Cure addressed the Committee and answered questions.

|                  |                             |
|------------------|-----------------------------|
| <b>RESULT:</b>   | <b>APPROVED [UNANIMOUS]</b> |
| <b>MOVER:</b>    | Pamela Gantz                |
| <b>SECONDER:</b> | Dustin Thill                |
| <b>AYES:</b>     | None                        |

- D. Consideration and approval of a Producer Full-Service Retail Sales Application for One Barrel Brewing Company, 303 Reid Street.\*

|                  |                                          |
|------------------|------------------------------------------|
| <b>RESULT:</b>   | <b>APPROVED [UNANIMOUS]</b>              |
| <b>MOVER:</b>    | Pamela Gantz                             |
| <b>SECONDER:</b> | Devin Perock                             |
| <b>AYES:</b>     | Pamela Gantz, Devin Perock, Dustin Thill |

## 5. Future Agenda Items

None.

## 6. Adjournment

Aldersperson Gantz moved, seconded by Aldersperson Thill to adjourn the meeting at 7:18PM. Upon vote, motion carried unanimously.

Respectfully submitted,  
Carey Danen, City Clerk



## City of De Pere, Wisconsin

4.B

### Request for License Committee Action

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**Meeting Date:** September 15, 2026  
**Department:** City Clerk  
**From:** Carey Danen, City Clerk  
**Subject:** Request by Nicholas Madsen to appear before the License Committee regarding the denial of his operator license application.\*  
**Recommendation:**

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**Attachments:**

N Madsen hearing request, N Madsen, Alcohol Beverage Licenses - Enforcement Policy Guidelines - final copy

CITY OF DE PERE  
ALCOHOL BEVERAGE LICENSES  
ENFORCEMENT POLICY GUIDELINES

**Intent.** It is the responsibility of the License Committee (“Committee”) of the De Pere Common Council to screen applications for alcohol beverage licenses within the City of De Pere (“City”) and to make recommendations to the Common Council for its decision under the City’s licensing authority in Chapter 125 of the Wisconsin Statutes and Chapter 7 of the De Pere Municipal Code. The Committee adopts the following guidelines in order to specify the reasons for denying, non-renewing or revoking an alcohol beverage license. If a decision is made to deny, revoke, suspend or non-renew a license, the Council is required to provide that person with a written reason for the denial. These guidelines are adopted to assist the Committee in its reviews and recommendations and the Common Council in its decision-making, to meet that requirement.

The following guidelines are established by the Committee to provide a framework for determining which persons are eligible for issuance of an alcohol beverage license (*i.e.* grounds for denial) and a framework for suspension, revocation or non-renewal. **Broad discretion is retained by both the Committee and the Common Council to consider each case on an individual basis. Deviation from the guidelines is permitted if unusual, exaggerated or mitigating circumstances exist, which may include, but are not limited to, the particular circumstances documented or the length of time that has expired since the offense.**

Alcohol beverage license holders must act in cooperation with law enforcement to enforce the alcohol beverage laws, drunk driving laws, and assist with minimizing disturbances of the peace and maintaining the safety of the community. Individuals with a past history of negative or uncooperative contacts with police agencies should be scrutinized to determine if their past behavior is compatible with these expectations; provided, however, that the Committee and the Common Council shall not discriminate against applicants based on a prior arrest or conviction record, pursuant to Wis. Stat. §§ 111.321, 111.322, 111.335 and 125.12(1)(b), unless the arrests or convictions substantially relate to the circumstances of the licensed activity. It is with these goals in mind that these guidelines are adopted.

For purposes of these guidelines, an “alcohol beverage license,” “license” or “permit” constitutes a retail license or an operator’s license. Additionally, the definition of “person” is as defined in Wis. Stat. § 125.02(14). Therefore, these guidelines also apply to corporations, limited liability companies, agents, and partnerships. A corporation or limited liability company with an arrest or conviction record may be issued a license if the corporation or limited liability company has terminated its relationship with all the individuals whose actions directly contributed to the conviction. **Furthermore, to the extent Wis. Stat. Ch. 125 or De Pere Ordinances provide additional grounds for denial, suspension, revocation or non-renewal, the Committee may also rely on those provisions.**

**The Common Council will only deny renewal of, suspend or revoke a current alcohol beverage license under these guidelines, or other justification provided by law, if the person committed an offense substantially related to the licensed activity within the license year period immediately preceding the year for which the person is seeking renewal or within the license year period in which suspension or revocation is sought, unless the Police Chief demonstrates that previous offenses were not considered in the approval of the current license.** In the event the person is considered for non-renewal, suspension or revocation as the result of such an offense, the Committee and Common Council shall consider all offenses,

regardless of when they occurred, to determine application of these guidelines.

Additionally, with respect to a non-natural person, such person's license may be revoked, suspended or non-renewed in the event a new officer, director, member, or manager, is named and such person does not qualify under these guidelines; with the exception that a corporation or limited liability company may retain its license if it terminates its relationship with all the individuals whose actions directly contributed to the conviction. With respect to successor agents, see Wis. Stat. § 125.04(6).

Notwithstanding the above, the following violations may not be used as grounds for suspension, revocation or non-renewal of an existing license:

1. Furnishing alcohol beverages to underage persons (unless the licensee has committed more than one (1) violation within a one (1) year period, or has committed a single violation in two consecutive years); or
2. Violations punishable under Wis. Stat. § 945.03(2m), 945.04(2m) or 945.05(1m) (relating to commercial gambling and gambling devices).

**A copy of these guidelines shall be provided to each person who applies for a license.**

## GUIDELINES

**Guideline 1.** If the offense is **substantially related to the circumstances of the licensed activity**, any person who has been convicted of any felony, unless duly pardoned, does not qualify for an alcohol beverage license. (To the extent the other guidelines reference a specific offense, this guideline shall apply if the offense constitutes a felony.)

**Guideline 2.** If the offense is **substantially related to the circumstances of the licensed activity**, any person who has been convicted of, released from incarceration in a State or Federal Prison System, or a county jail for, or released from parole or probation status, for two (2) or more offenses, **arising out of separate incidents**, within the last ten (10) years in the following subcategories, does not qualify for an alcohol beverage license:

- (a) Violent crimes against the person of another, including but not limited to homicide, aggravated battery, sexual assault, injury by negligent use of a weapon, injury by negligent use of a vehicle, or injury by intoxicated use of a vehicle.
- (b) Crimes involving cooperation (or lack thereof) with law enforcement officials, including but not limited to, obstructing a police officer, resisting arrest, bribery of public officers or employees, misconduct in public office, bomb scares, or acts or threats of terrorism.
- (c) Manufacturing, distributing, delivering a controlled substance or a controlled substance analog; possessing with intent to manufacture, distribute or deliver, a controlled substance or a controlled substance analog.

**Guideline 3.** Provided the offense is **substantially related to the circumstances of the licensed activity**, any person who has been convicted of, released from incarceration in a State or Federal Prison System, or a county jail for, or released from parole or probation status, for two (2) or more offenses, **arising out of separate incidents**, within the last seven (7) years in the following subcategories, does not qualify for an alcohol beverage license:

- (a) Disorderly conduct, criminal damage to property, solicitation of prostitution or other prostitution related offenses, wherein the offense involves an incident at a place that is, or should have been licensed under Wis. Stat. Ch. 125.

- (b) Alcohol beverage offenses (under Wis. Stat. Ch. 125 or De Pere Ordinance Ch. 7 - excluding administrative violations such as “failure to frame license”) **(furnishing alcohol beverages to underage persons shall not be used as grounds for suspension, revocation, or non-renewal of an existing license unless the licensee has committed two (2) violations within a one (1) year period, or committed a single violation in two consecutive years).**
- (c) Perjury or false swearing, wherein the offense involves an incident at a place that is or should have been licensed under Wis. Stat. Ch. 125.
- (d) Possessing a controlled substance, controlled substance analog or drug paraphernalia.
- (e) Operating a motor vehicle while under the influence of intoxicants or drugs.
- (f) Operating a motor vehicle with a BAC in excess of .08% by weight.
- (g) Open intoxicants in public places or in a motor vehicle.

**Guideline 4.** Provided the offenses are **substantially related to the circumstances of the licensed activity**, any person who is a habitual law offender does not qualify for an alcohol beverage license. To constitute a habitual law offender there need not have been a trial or conviction for each or any offense. What is required is that the offenses were committed, that the law has been violated, and that the fact of such violations can be shown. *See Smith v. City of Oak Creek*, 139 Wis. 2d 788 (1987). For purposes of these guidelines, a habitual offender includes, but is not limited to a person who has committed two (2) or more offenses, each a separate incident, within the immediately preceding five (5) years.

**Guideline 5.** Provided the offenses are **substantially related to the circumstances of the licensed activity**, a pending criminal charge for any of the following offenses may be the basis for denial, non-renewal, suspension or revocation of an alcohol beverage license:

- (a) Any violation of Wis. Stat. Chapter 940, Crimes Against Life and Bodily Security.
- (b) The following violations of Wis. Stat. Chapter 948: sexual assault of a child, repeated sexual assault of the same child, physical abuse of a child, sexual exploitation of a child, trafficking of a child, causing a child to view or listen to sexual activity, incest with a child, child enticement, use of a computer to facilitate a child sex crime, soliciting a child for prostitution, sexual assault of a child placed in substitute care, sexual assault of a child by school staff person or a person who works or volunteers with children.
- (c) A violent crime against a child.
- (d) A violation of the law of another jurisdiction that would be a violation of (a), (b), or (c) if committed in this state.

**Guideline 6.** In addition to the other provisions under these guidelines, pursuant to Wis. Stat § 125.12, a person’s alcohol beverage license may be denied, non-renewed, suspended or revoked if the person:

- (a) Keeps or maintains a disorderly or riotous, indecent or improper house.
- (b) Sold or has given away alcohol beverages to known habitual drunkards.
- (c) Does not possess the qualifications under Chapter 125 of the Wisconsin Statutes and Chapter 7 of the De Pere Municipal Code to hold a license.
- (d) Was issued a license in conjunction with a warning letter as to any future law violations, regardless of whether the basis for the warning letter was conduct occurring earlier or outside of any of the time limits set forth in Guidelines 2, 3 and 4 above, and has committed a law violation subsequent to the issuance of the warning letter.

**Guideline 7.** Any person who materially falsifies an application for an alcohol beverage license will not be eligible to re-apply for an alcohol beverage license for a period of twelve (12) months from the **date of denial** of such application. The Committee within its review and recommendation process and the Common Council may waive the provisions of this paragraph, allow the applicant to submit a corrected application, with the appropriate fee, and grant an alcohol beverage license to the person, if it appears to the Common Council that any falsifications on the application were the result of inadvertence, excusable neglect or mistake.

**Guideline 8.** In the event that any person's alcohol beverage license is denied, non-renewed, suspended or revoked based upon the person's conviction record, the person shall be allowed the opportunity to show evidence of rehabilitation and fitness to engage in the licensed activity. If the person shows competent evidence of sufficient rehabilitation and fitness to perform the licensed activity, the Committee may not refuse to license the person or bar or terminate the person from licensing based on that conviction record unless the conviction is for an exempt offense under Wis. Stat. § 111.335(4). Competent evidence of sufficient rehabilitation and fitness to perform the licensed activity may be established by the production of any of the following:

- (a) The person's most recent certified copy of a federal department of defense form DD-214 showing the person's honorable discharge, or separation under honorable conditions, from the U.S. armed forces for military service rendered following conviction for any offense that would otherwise disqualify the person from the license sought, except that the discharge form is not competent evidence of sufficient rehabilitation and fitness to perform the licensed activity if the person was convicted of any misdemeanor or felony subsequent to the date of the honorable discharge or separation from military service.
- (b) A copy of the local, state, or federal release document; and either a copy of the relevant department of corrections document showing completion of probation, extended supervision, or parole; or other evidence that at least one year has elapsed since release from any local, state, or federal correctional institution without subsequent conviction of a crime along with evidence showing compliance with all terms and conditions of probation, extended supervision, or parole.
- (c) In addition to the above documentary evidence, the Committee will consider any of the following evidence presented by the individual:
  - i. Evidence of the nature and seriousness of any offense of which he or she was convicted.
  - ii. Evidence of all circumstances relative to the offense, including mitigating circumstances or social conditions surrounding the commission of the offense.
  - iii. The age of the person at the time the offense was committed.
  - iv. The length of time that has elapsed since the offense was committed.
  - v. Letters of reference by individuals who have been in contact with the person since the person's release from any local, state, or federal correctional institution.
  - vi. All other relevant evidence of rehabilitation and present fitness presented.

**Severability.** If any section, subsection, sentence or phrase of this Policy is for any reason held to be invalid or unconstitutional by reason of a decision of any court of competent jurisdiction, such

decision shall not affect the validity of any other section, subsection, sentence, clause or phrase.

**Conflict.** Any impermissible conflict between Wis. Stat. Ch. 125, Ch. 7 of the De Pere Municipal Code and this policy shall be decided on the order of precedence which shall be the order listed in this sentence.

This policy will go into effect on the 3rd day of March, 2020.



## City of De Pere, Wisconsin

4.C

### Request for License Committee Action

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|                        |                                                                                                                                                                                              |
|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Meeting Date:</b>   | September 15, 2026                                                                                                                                                                           |
| <b>Department:</b>     | City Clerk                                                                                                                                                                                   |
| <b>From:</b>           | Carey Danen, City Clerk                                                                                                                                                                      |
| <b>Subject:</b>        | Renewal application for a Class "B" Fermented Malt Beverage license for De Pere Deacons Hockey Team, Inc. (DBA De Pere Deacons Hockey), 1450 Ft Howard Av. Agent: David Lepp, Green Bay WI.* |
| <b>Recommendation:</b> | Motion to approve.                                                                                                                                                                           |

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#### **Attachments:**

De Pere Deacons Hockey Team - Redacted

Form  
AB-200

# Alcohol Beverage License Application

|                                       |
|---------------------------------------|
| For Municipal Use Only                |
| Municipality                          |
| License Period<br>12.01.26 - 04.30.27 |

## 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 per 2/20/16 |
| Total Fees           | \$                |

## Part A: Premises/Business Information

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

DEPERE DEACONS HOCKEY TEAM, INC

2. Business Trade Name or DBA

3. FEIN

760893404

4. Wisconsin Seller's Permit Number

EXEMPT

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

12.20.12

9. Wisconsin DFI Registration Number

2049911

10. Premises Address

1450 FT. HOWARD DR

11. City

DEPERE, WI

12. State

WI

13. Zip Code

54115

14. County

BROWN

15. Governing Municipality: ☒ City ☐ Town ☐ Village  
of: \_\_\_\_\_

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. ☐

1ST AND 2ND FLOORS OF DEPERE ICE ARENA

21. Mailing Address (if different from premises address)

1408 ALGONQUIS DR

22. City

GREEN BAY

23. State

WI

24. Zip Code

54304

## 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<br><b>LEPP</b>         |                     | First Name<br><b>DAVID</b> |                        | M.I.<br><b>E</b> |
| Title<br><b>MEMBER</b>           | Email<br>[REDACTED] |                            | Phone<br>[REDACTED]    |                  |
| Signature<br><b>David E Lepp</b> |                     |                            | Date<br><b>7.13.26</b> |                  |

### 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 AgentDate 7.13.26

## 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)

DEPERE DEACONS HOCKEY TEAM, INC.

2. Business Trade Name or DBA

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

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

## Part B: Agent Information

1. Last Name

LBAP

2. First Name

DAVID

3. M.I.

E

4. Email

5. Phone

6. Home Address

1408 ALGONNE DR

7. City

GENEEO BAY

8. State

WI

9. Zip Code

54304

10. Date of Birth

01.15.59

11. Driver's License/State ID Number

12. Driver's 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<br><i>LEPP</i>         |                     | First Name<br><i>DAVID</i> |                        | M.I.<br><i>E</i> |
| Title<br><i>MEMBER</i>           | Email<br>[REDACTED] |                            | Phone<br>[REDACTED]    |                  |
| Signature<br><i>David E Lepp</i> |                     |                            | Date<br><i>7.13.26</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<br><i>LEPP</i>         |  | First Name<br><i>DAVID</i> |                        | M.I.<br><i>E</i> |
| Signature<br><i>David E Lepp</i> |  |                            | Date<br><i>7.13.26</i> |                  |

Alcohol Beverage  
Individual QuestionnaireDate 7.13.26

All individuals involved in the alcohol beverage business must complete this form, including:

- sole proprietor
- all officers, directors, and agent of a corporation or nonprofit organization
- all partners of a partnership
- members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

|                                                                                                        |                                      |                                                    |                                                            |
|--------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------|------------------------------------------------------------|
| <b>Part A: Business Information</b>                                                                    |                                      |                                                    |                                                            |
| 1. Legal Business Name (individual name if sole proprietor)<br><u>ROPERE DRAGONS HOCKEY TEAM, INC.</u> |                                      |                                                    |                                                            |
| 2. Business Trade Name or DBA                                                                          |                                      |                                                    |                                                            |
| 3. Entity Type (check one)                                                                             |                                      |                                                    |                                                            |
| <input type="checkbox"/> Sole Proprietor                                                               | <input type="checkbox"/> Partnership | <input type="checkbox"/> Limited Liability Company | <input checked="" type="checkbox"/> Nonprofit Organization |

|                                                      |  |                               |                                                             |                                     |  |
|------------------------------------------------------|--|-------------------------------|-------------------------------------------------------------|-------------------------------------|--|
| <b>Part B: Individual Information</b>                |  |                               |                                                             |                                     |  |
| 1. Last Name<br><u>LEPP</u>                          |  | 2. First Name<br><u>DAVID</u> |                                                             | 3. M.I.<br><u>G</u>                 |  |
| 4. Relationship to Business (Title)<br><u>MEMBER</u> |  | 5. Email<br>[REDACTED]        |                                                             | 6. Phone<br>[REDACTED]              |  |
| 7. Home Address<br><u>1408 ARGONNE DR</u>            |  |                               |                                                             |                                     |  |
| 8. City<br><u>GREEN BAY</u>                          |  | 9. State<br><u>WI</u>         | 10. Zip Code<br><u>54304</u>                                | 11. Date of Birth<br><u>1.15.59</u> |  |
| 12. Drivers License/State ID Number<br>[REDACTED]    |  |                               | 13. Drivers License/State ID State of Issuance<br><u>WI</u> |                                     |  |

|                                                                                                                      |                        |       |        |       |        |                    |          |
|----------------------------------------------------------------------------------------------------------------------|------------------------|-------|--------|-------|--------|--------------------|----------|
| <b>Part C: Address History</b>                                                                                       |                        |       |        |       |        |                    |          |
| 1. Do you currently reside in Wisconsin? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No         |                        |       |        |       |        |                    |          |
| If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application? ....          |                        |       |        |       |        | Years<br><u>47</u> | Months   |
| 2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary. |                        |       |        |       |        |                    |          |
| Previous Address 1<br><u>SAME AS ABOVE</u>                                                                           |                        |       |        | City  |        | State              | Zip Code |
| Previous Address 2                                                                                                   |                        |       |        | City  |        | State              | Zip Code |
| Previous Address 3                                                                                                   |                        |       |        | City  |        | State              | Zip Code |
| Previous Address 4                                                                                                   |                        |       |        | City  |        | State              | Zip Code |
| Previous Address 5                                                                                                   |                        |       |        | City  |        | State              | Zip Code |
| 3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.                |                        |       |        |       |        |                    |          |
| State<br><u>WI</u>                                                                                                   | County<br><u>BROWN</u> | State | County | State | County | State              | County   |
| State                                                                                                                | County                 | State | County | State | County | State              | County   |

Continued →

**Part D: Criminal History**

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? . . . . . ☐ Yes ☐ No

If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

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

2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances? . . . . . ☐ Yes ☒ No

If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

**Part E: Attestation**

**READ CAREFULLY BEFORE SIGNING:** Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. 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.

|                                                                                                  |                 |
|--------------------------------------------------------------------------------------------------|-----------------|
| Signature<br> | Date<br>7.13.26 |
|--------------------------------------------------------------------------------------------------|-----------------|

Alcohol Beverage  
Individual QuestionnaireDate  
8.25.26

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- sole proprietor
- all officers, directors, and agent of a corporation or nonprofit organization
- all partners of a partnership
- members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

## Part A: Business Information

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

DEBENS DRAGONS HOCKEY TEAM, INC

2. Business Trade Name or DBA

3. Entity Type (check one)

☐ Sole Proprietor ☐ Partnership ☐ Limited Liability Company ☐ Corporation ☒ Nonprofit Organization

## Part B: Individual Information

1. Last Name

NOTHALLS

2. First Name

GREGORY

3. M.I.

F

4. Relationship to Business (Title)

MEMBER

5. Email

6. Phone

7. Home Address

1064 9th ST

8. City

GREEN BAY

9. State

WI

10. Zip Code

54304

11. Date of Birth

6-18-59

12. Drivers License/State ID Number

13. Drivers License/State ID State of Issuance

WI

## Part C: Address History

1. Do you currently reside in Wisconsin? ☒ Yes ☐ No

If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application? . . . .

Years

67

Months

2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary.

| Previous Address   | City | State | Zip Code |
|--------------------|------|-------|----------|
| Previous Address 1 |      |       |          |
| Previous Address 2 |      |       |          |
| Previous Address 3 |      |       |          |
| Previous Address 4 |      |       |          |
| Previous Address 5 |      |       |          |

3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.

| State | County | State | County | State | County | State | County |
|-------|--------|-------|--------|-------|--------|-------|--------|
| WI    | BROWN  |       |        |       |        |       |        |
| State | County | State | County | State | County | State | County |

Continued →

**Part D: Criminal History**

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? . . . . . ☐ Yes ☐ No

If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

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

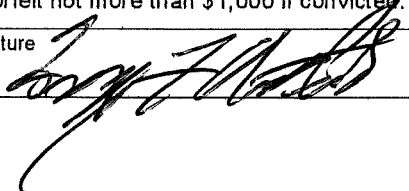
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Signature



Date

8-25-26