



April 16, 2003

Mayor Wesely and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

+

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Fontenelle Oil, d.b.a. Holiday Stationstore #117, 2200 North 48th Street requesting that Gerri Anderson be approved as the manager of the class B liquor license.

Background information on the applicant is as follows:

Gerri Anderson was born in Pender, Nebraska. She attended Norfolk High School graduating in 1989.

Gerri Anderson employment history is as follows:

1998 - Present	Manager, Holiday Stationstore	Norfolk/Lincoln, NE.
1993 - 1998	Lineworker, Dale Electric	Norfolk, NE.
1989 - 1993	Parts Person, Gillette Dairy	Norfolk, NE.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



Police Department  
575 South 10th Street / Lincoln, Nebraska 68508 / Phone: 402-441-7204 / Fax: 402-441-8492 / Web: [www.ci.lincoln.ne.us](http://www.ci.lincoln.ne.us)  
A nationally accredited law enforcement agency



Liquor License Investigation

Business (DBA) HOLIDAY STATION STORE

Manager       Owner       Other \_\_\_\_\_

Name: GERRI ANDERSON

US Citizen ?       Yes       No

Has applicant ever been cited for liquor law violations ?  No       Yes  
Explain \_\_\_\_\_

Does applicant have an interest in another liquor license ?  No       Yes  
Explain \_\_\_\_\_

Is spouse qualified to hold a license ?      Yes      No       N/A

How is applicant if not an owner to be paid ?       Salary       Hourly

How many hours will applicant be at the establishment ?      50+

Any other employment ?  No       Yes, explain \_\_\_\_\_

Any previous experience with a liquor license ?       Yes       No

Any criminal convictions ?  No       Yes  
Comments \_\_\_\_\_

Is applicant a property owner in Lincoln ?       Yes       No

Is applicant involved in any civil litigation ?      No       Yes  
Comments CAR ACCIDENT

Photo       Records Check       References

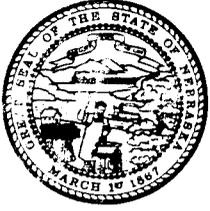
Comments \_\_\_\_\_

Interview Date 4/16/03

# STATE OF NEBRASKA

*Russ*

*let date: 4-14-03  
F/H 4-28-03  
1:30 PM*



**Mike Johanns**  
Governor

*N3-036834  
39*

**NEBRASKA LIQUOR CONTROL COMMISSION**  
**Forrest D. Chapman**  
*Executive Director*  
301 Centennial Mall South, 5th Floor  
P.O. Box 95046  
Lincoln, Nebraska 68509-5046  
Phone (402) 471-2571  
Fax (402) 471-2814  
TRS USER 800 833-7352 (TTY)  
web address: <http://www.nol.org/home/NLCC/>

April 8, 2003

City Clerk  
555 S. 10<sup>th</sup> St., Ste. 103  
Lincoln, NE 68508

*X*

**FILED**  
CITY CLERK'S OFFICE  
CITY OF LINCOLN  
NEBRASKA  
APR 9 AM 11 45

RE: Fontenelle Oil Co. dba Holiday Stationstore #117 LICENSE # B 27845

Dear Clerk:

Enclosed is a copy of a manager application for the following:

Gerri A. Anderson filed in connection with the Class B license of the above-named corporation.

Please present this application for manager to your City/Village Council or County Commissioners Board, and send us the results of their action.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Fami Freeman  
License Division

enc.

**Rhonda R. Flower**  
Commissioner

**Bob Logsdon**  
Chairman

**R.L. (Dick) Coyne**  
Commissioner

An Equal Opportunity/Affirmative Action Employer

ity check

# Application for Corporate Manager RECEIVED

\*Must Be A Nebraska Resident\*

Please submit in Triplicate

RECEIVED

Return to: Nebraska Liquor Control Commission, PO Box 95046  
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571 Fax: (402) 471-2814

Web address: <http://www.nlc.org/home/NLCC/>

MAR 12 2003

NEBRASKA LIQUOR CONTROL COMMISSION

## LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION FONTENELLE OIL CO.		CLASS & LICENSE NUMBER Class B 27845	
TRADE NAME OF LICENSED PREMISE Holiday Stationstore #117			
STREET ADDRESS OF LICENSED PREMISE 2200 North 48th Street	CITY Lincoln	COUNTY Landcaster	ZIP CODE 68504-2822

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO: *Ronald A. Erickson*  
Ronald A. Erickson, CEO

## APPLICANT INFORMATION (MUST BE 21 OR OVER)

NAME (LAST, FIRST, MIDDLE, MAIDEN) Anderson Gerri Ann Schademan	SEX <input checked="" type="radio"/> F <input type="radio"/> M	SOCIAL SECURITY NUMBER	DATE OF BIRTH	PLACE OF BIRTH Pender, NE
HOME STREET ADDRESS 1421 W Commodore	CITY Lincoln	COUNTY Landcaster	STATE Ne	ZIP CODE 68522
HOME TELEPHONE NUMBER (402) 640-2809	BUSINESS TELEPHONE NUMBER (402) 284-2881	DRIVERS LICENSE NUMBER & STATE		

## SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) Anderson Todd Allen	SOCIAL SECURITY NUMBER	DRIVERS LICENSE NUMBER & STATE
DATE OF BIRTH:	PLACE OF BIRTH Norfolk Nebraska	

1. **READ CAREFULLY.** Answer completely and accurately.  
Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law, or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Yes  No

2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? **IF YES**, for what premise give license number and date.

YES  NO

