

Lincoln



Nebraska's Capital City

January 24, 2002

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 Brackhan Dance Directive, d.b.a. The Delray Ballroom, 817 'R' Street requesting a class I liquor license for this location.

Shelley Brackhan, President requests that she be approved as the manager of this liquor license.

Background information on Shelley Brackhan is as follows:

Shelley Brackhan was born in Seward, Nebraska. She attended the University of Nebraska graduating in 1993.

Shelley Brackhan employment history is as follows:

1994 – present	Owner, Dance Directive	Lincoln, NE.
1985 – 1994	Instructor, Fred Astaire	Lincoln, 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 / Website: www.ci.lincoln.ne.us

A nationally accredited law enforcement agency



Liquor License Investigation

Business (DBA) DELRAY BALLROOM

Manager Owner Other _____

Name: Shelley BRACKHAN

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 NA

How many hours will applicant be at the establishment? 90+

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 LANDLORD / TENANT DISPUTE

Photo Records Check References

Comments _____

Interview Date 1/24/02

Liquor License Business Report / Completed by Inv Fosler Date: _____

DBA: DEL RAY BALLROOM

ADDRESS 817 R ST PHONE 435-3726

TYPE OF INVESTIGATION:

PURCHASE UPGRADE EXPANSION NEW

OWNER MANAGER OTHER _____

TYPE OF BUSINESS Ballroom / Bar

CLASS: A B C D J K CATERING OTHER _____

OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL

PURCHASE PRICE _____ PROPERTY EQUIPMENT VALUE _____

AMOUNT FINANCED 125,000 SOURCE U.S. BANK

COLLATERAL Home - Business COSIGNER(S) NO

LEASE AGREEMENT 10yrs 4260

EST INCOME: %FOOD _____ %LIQUOR _____ - DANCE MAJOR INCOME

COMMERCIAL INDUSTRIAL RESIDENTIAL

TRAFFIC _____ PARKING ON-STREET

READY FOR OPERATION: YES NO, EST DATE _____

FOOD SERVICE NONE / CATERED # OF EMPLOYEES FT 1 PT 6

DOES LICENSE COMPLY WITH LEGAL DISTANCES: YES
 NO _____

EST SEATING 325 EST # DAILY CUSTOMERS -200-

HOURS OF OPERATION 10am - 10pm major

HUMAN RIGHTS COMMISSION CHECKED- YES NO N/A

let date 1-23-02
PH: 2-1402

STATE OF NEBRASKA



Review

5726
21A

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)

January 14, 2002

*Brackhan Dance Directive
817 K St.
dba The Delray Ballroom
Class I*

Mike Johanns
Governor

City Clerk
County/City Bldg
555 S 10th
Lincoln NE 68508

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose NOT to make a recommendation of approval or denial to our Commission.

PER: §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Jill L. Nelson

Licensing Division

Enclosures
Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

I 54274
RECEIVED

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission
 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4254 OF NEBRASKA LIQUOR CONTROL COMMISSION
 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in Triplicate

JAN 11 2002 2/13 + 2/28

Per phone call w/ Brian Will, City Planning - No Special Permit Needed
CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input checked="" type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	\$ 1,000 min.

Type of application being applied for (place appropriate number in box)
 1= Individual License requires Form 1 to be attached.
 2= Partnership License requires Form 2 to be attached.
 3= Corporate License requires Forms 3 and Manager Application to be attached

Bond Company - for Classes L V W X Y only

 Start Date Month/Day/Year Bond Number

Trade Name (name of business)
 THE DELRAY BALLROOM

Telephone Number at premise to be licensed
 402/435-3726

1) Street Address of Proposed licensed premise
 817 R STREET
 LINCOLN NE 68508

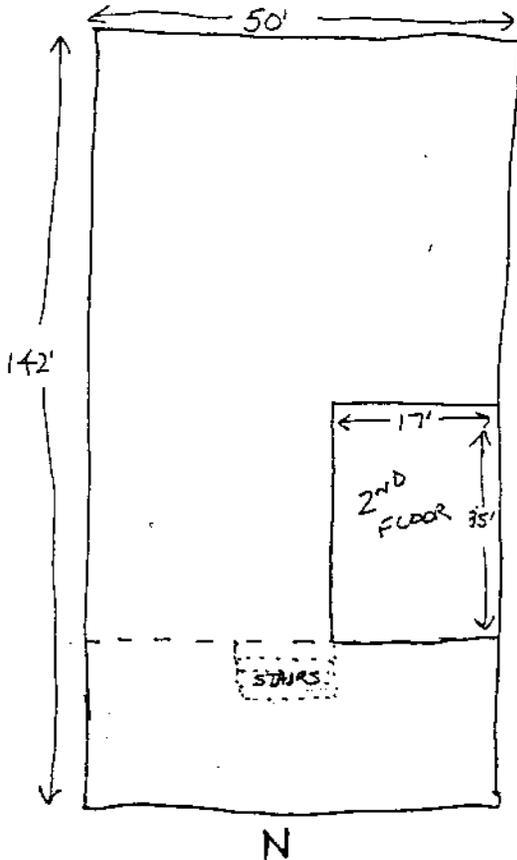
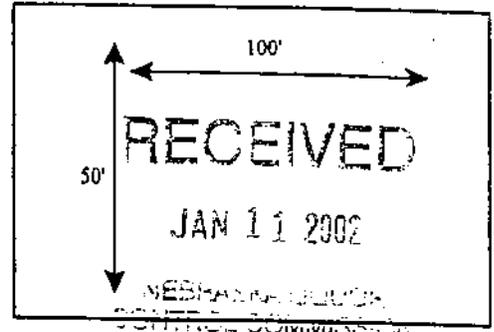
2) Mailing Address for receipt of Liquor Control Commission mailings
 817 R STREET, SUITE A
 LINCOLN NE 68508

City County Zip Code
 LINCOLN LANCASTER 68508

City County Zip Code
 LINCOLN LANCASTER 68508

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement approximately 30' x 50' at the East end.

THE ENTIRE 1ST LEVEL, 50' x 142', AND THE 2ND FLOOR, 17' x 35'. (THIS SHOULD INCLUDE THE ENTIRE BUILDING)

2 story bldg approx 142' x 50'

<p>I. READ CAREFULLY. Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> 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.</p>		
	<p>YES</p>	<p>- TRESPASSING AFTER HOURS AT UTICA SWIMMING POOL SEWARD COUNTY 1980</p> <p>- MINOR IN POSSESSION YORK COUNTY 1981</p> <p>- DRIVING WHILE INTOXICATED YORK COUNTY 1981</p>
<p>THIS WAS SO LONG AGO, I DO NOT REMEMBER THE MONTHS. I CALLED THE COUNTIES; HOWEVER, THEY COULD ONLY GO BACK 15 YRS AND WAS DOUBTFUL ON FINDING RECORDS ON A MINOR.</p>		

2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).	NO	RECEIVED JAN 11 2002
3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.	NO	
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	YES	NEBRASKA LIQUOR CONTROL COMMISSION U.S. BANK
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.	NO	
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner. <i>See attached</i>	YES	FURNITURE - U.S. SIMPLY BUSINESS LEASING SOUND EQUIPMENT - METRO LEASING
7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?	NO	
8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.	NO	
9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.	NO	
10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.	U.S. BANK, MAIN BRANCH, 13 TH & M SHELLEY K. BRACKHAN RICHARD D. SULLIVAN	
11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.	N/A <i>None</i>	
12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.	SHELLEY K. BRACKHAN 60 - 80 HOURS/WEEK	
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	COCKTAIL WAITRESS 1983-1986 YORL - IDAHO COCKTAIL/BARTENDER 1988-1992 LINCOLN - CAMPUS SPORTS - LINCOLN 9711 ST. BUCKS - LINCOLN	
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)	LEASED <i>lease expiration date:</i> 3/31/2011	
15. When do you intend to open for business?	SEPTEMBER 2001	

THE PIZ

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
SHELLEY K. BRACKMAN	8/1992	CURRENT	2342 NORTH 60TH ST. LINCOLN NE 68527
" " "	1933 1964	1992 1985	LINCOLN, NE WACO, NE

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign here *Shelley K. Brackman* sign here _____
 sign here _____ sign here _____
 sign here _____ sign here _____
 sign here _____ sign here _____

Subscribed in my presence and sworn to before me this _____ day of _____

(SEAL)

GENERAL NOTARY-State of Nebraska
 ALLAN J. LACUYE

My Commission expires August 22, 2007

Sign here *Allan J. Lacuye*
 Notary Public Signature

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternative format.

Application for Corporate Manager

Must Be A Nebraska Resident

Please submit in Triplicate

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.nol.org/home/NLCC/>

NAME OF LICENSED CORPORATION BRACKHAN DANCE DIRECTIVE, L.L.C.	CLASS & LICENSE NUMBER I
--	-----------------------------

TRADE NAME OF LICENSED PREMISE THE DELRAY BALLROOM

STREET ADDRESS OF LICENSED PREMISE 817 R STREET	CITY LINCOLN	COUNTY LANCASTER	ZIP CODE 68508
--	-----------------	---------------------	-------------------

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

Signature of Corporate President/CEO: *Shelley Brackhan*

NAME (LAST, FIRST, MIDDLE, MAIDEN) BRACKHAN, SHELLEY KRISTINE	SEX <input checked="" type="radio"/> F <input type="radio"/> M	SOCIAL SECURITY NUMBER	DATE OF BIRTH	PLACE OF BIRTH SEWARD COUNTY
--	---	------------------------	---------------	---------------------------------

HOME STREET ADDRESS 2842 NORTH 60TH STREET	CITY LINCOLN	COUNTY LANCASTER	STATE NE	ZIP CODE 68507
---	-----------------	---------------------	-------------	-------------------

HOME TELEPHONE NUMBER (402) 464-1956	BUSINESS TELEPHONE NUMBER (402) 435-3726	DRIVERS LICENSE NUMBER & STATE
---	---	--------------------------------

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) NOT MARRIED	SOCIAL SECURITY NUMBER	DRIVERS LICENSE NUMBER & STATE
--	------------------------	--------------------------------

DATE OF BIRTH:	PLACE OF BIRTH
----------------	----------------

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

- TRESPASSING AFTER HOURS, UTICA SWIMMING POOL - SEWARD COUNTY 1980.
- MARIJUANA POSSESSION - YORK COUNTY - 1981
- DRIVING WHILE INTOXICATED - YORK COUNTY 1981

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

3. Have you or your spouse ever made a compromise settlement for violation of such laws?

YES NO

4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License? Nebraska Liquor Control Act (§53-131.01)

YES NO

5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

YES NO

APPLICANT: CITY & STATE	YEAR		SPOUSE: CITY & STATE	YEAR	
	FROM	TO		FROM	TO
NACO NE LINCOLN NE	BIRTH 1985	1985			
SEATTLE WA	1987	1988			
LINCOLN NE	1988	CURRENT			

YEAR FROM TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
JUNE 1994 SEPT 2001	SELF-EMPLOYED BRACKHAN DANCE DIRECTIVE - SALE PROPRIETOR	SHELLEY K. BRACKHAN	402/435-3344
SEPT 2001 PRESENT	BRACKHAN DANCE DIRECTIVE, LLC.	" " "	" " "

STATE OF NEBRASKA)
) SS
COUNTY OF Lancaster)

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has NO interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

[Signature]
Signature of Applicant

Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this 7th day of January 2002.

Subscribed in my presence and sworn to before me this _____ day of _____.

[Signature]
Notary Signature & Seal

Notary Signature & Seal



Registered in good standing w/ Sec of State's office per phone call w/ Tammy 1/14/06
 Corporation/LLC Application for License - Form 3
 Nebraska Liquor Control Commission

Total Number of Shares (if corporation)

INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses
- 3) Information regarding spouses must be completed

Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation BRACKHAN DANCE DIRECTIVE, L.L.C.		Total Number of Shares (if corporation)	
Corporate Street Address (1) 817 R STREET		Mailing address for receipt of Liquor Control Commission Mailings • 817 R STREET, SUITE A	Corporate Telephone Number 402/435-3726
City LINCOLN	County LANCASTER	State NEBRASKA	Zip Code 68508
Name of Registered Agent SHELLEY K. BRACKHAN		Name of Proposed Manager SHELLEY K. BRACKHAN	
IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER			
Name SHELLEY K. BRACKHAN	Title OWNER / MANAGER	Date of Birth	Social Security Number
Home Address (1) 2842 NORTH 60TH STREET		State NEBRASKA	
City LINCOLN	State NE	Zip Code 68507	Home Telephone Number 402/464-1956

Corporation/LLC Application for License - Form 3

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES					
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title	Number of Shares/ %	
NAME BRACKHAN, SHELLEY K.			President MEMBER	23.03%	
Spouse Name N/A None					
NAME GANDW, DONALD E.			MEMBER	10.53%	
Spouse Name GANDW, EVGENIA			SPOUSE		
NAME PABIAN, HOWELL D.			MEMBER	7.9	
Spouse Name N/A None					
NAME BUTLER, RONALD D.			MEMBER	6.58	
Spouse Name N/A None					
NAME ROGGE, D. SCOTT			MEMBER	6.58	
Spouse Name N/A None					
NAME TIMMERMAN, KENNETH J.			MEMBER	6.58	
Spouse Name MARGARET			SPOUSE		

(If Necessary, Continue on Separate Sheet)

Corporation/LLC Application for License - Form 3

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES					
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title	Number of Shares/%	
NAME TRABERT, PETER			MEMBER	3.29	
Spouse Name N/A None					
NAME BRACKHANI, DALER.			MEMBER	2.96	
Spouse Name PATRICIA L.			SPOUSE		
NAME HEIDEN, REX			MEMBER	2.96	
Spouse Name NANCY			SPOUSE		
NAME ANDERSON, STEPHEN D.			MEMBER	2.63	
Spouse Name JUNE CAROL			SPOUSE		
NAME LADUKE, ALLAN J.			MEMBER	2.63	
Spouse Name N/A None					
NAME SCHULTZ, JAMES D.			MEMBER	2.63	
Spouse Name					

(If Necessary, Continue on Separate Sheet)

Corporation/LLC Application for License - Form 3

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES					
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title	Number of Shares / %	
NAME BADDY, LARRY A.			MEMBER	1.64	
Spouse Name N/A None					
NAME BECKE, BRYAN R.			MEMBER	1.64	
Spouse Name N/A None					
NAME BRACKHAN, PATRICIA L. (HEIDEN)			MEMBER	1.64	
Spouse Name DALE R.			SPOUSE		
NAME HEIDEN, LULA			MEMBER	1.64	
Spouse Name N/A None					
NAME PIERSON, VIRGINIA L.			MEMBER	1.64	
Spouse Name N/A None					
NAME STOWELL, PEGGY K. ;			MEMBER	1.64	
Spouse Name SIGNIFICANT OTHER ASHEY, WARREN			MEMBER JOINT		

(If Necessary, Continue on Separate Sheet)

Corporation/LLC Application for License - Form 3

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES					
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title	Number of Shares/%	
NAME FROELICH, RICHARD L. Spouse Name LYNETTE			Member	1/32	
NAME WHITEHALL, RODNEY Spouse Name			Member	1/32	
NAME Mc DONALD, JACK Spouse Name			Member	.66	
NAME VANDELHOEF, HAROLD Spouse Name			Member	.66	
NAME Spouse Name					
NAME Spouse Name					

(If Necessary, Continue on Separate Sheet)

Corporation/LLC Application for License - Form 3
Nebraska Liquor Control Commission

Is this Corporation/LLC controlled by another Corporation? YES NO

Name of Control Corporation

IF YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned

Please indicate below your corporate tax year with the IRS

Starting Date: JAN 1ST Ending Date: DEC 31ST

STATE OF Nebraska

Lincoln County

Allan J. Laduke
Notary Public Signature & Seal



By Steve B...

PRESIDENT/MEMBER

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format

SECRETARY/MEMBER