



March 26, 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 JAN-AL Inc., d.b.a. Simply Paradise Social Hall, 3235 North 35th Street requesting a class I liquor license.

Janet Crosby, President has requested that she be approved as the manager of the liquor license.

Background information on the applicants is as follows:

Janet Crosby was born in Lincoln, Nebraska. She attended Lincoln East High School graduating in 1975.

Janet Crosby employment history is as follows:

Present	Owner, Simply Paradise	Lincoln, NE.
1972 - 2002	Cosmetologist, Fernando's	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.

A handwritten signature in black ink that reads "Thomas K. Casady".

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
A nationally accredited law enforcement agency



Liquor License Business Report / Completed by Inv Fosler Date: 3-26-03

DBA: Simply Paradise

ADDRESS 3235 N 35TH PHONE 416-1701

TYPE OF INVESTIGATION:

PURCHASE UPGRADE EXPANSION NEW

OWNER MANAGER OTHER _____

TYPE OF BUSINESS CATERING / Social Hall

CLASS: A B C D J K CATERING OTHER _____

OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL

PURCHASE PRICE _____ PROPERTY EQUIPMENT VALUE 40,000

AMOUNT FINANCED 40,000 SOURCE Pinnacle Bank

COLLATERAL — COSIGNER(S) PARENTS

LEASE AGREEMENT 18 mo @ 2750

EST INCOME %FOOD — %LIQUOR 100

COMMERCIAL INDUSTRIAL RESIDENTIAL

TRAFFIC moderate PARKING off street

READY FOR OPERATION: YES NO, EST DATE _____

FOOD SERVICE CATERING Hy-Vee # OF EMPLOYEES F/T 1 P/T 3

DOES LICENSE COMPLY WITH LEGAL DISTANCES: YES
 NO

EST SEATING 350 EST # DAILY CUSTOMERS N/A

HOURS OF OPERATION N/A

HUMAN RIGHTS COMMISSION CHECKED YES NO N/A

Liquor License Investigation

Business (DBA) Simply Paradise

Manager Owner Other _____

Name: JANET CROSSY

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 *LOW ENFORCEMENT OFFICER*

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

How many hours will applicant be at the establishment? When open all hours

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 _____

Photo Records Check References

Comments _____

Interview Date 3 / 26 / 03

STATE OF NEBRASKA

Russ

Set date 3-31-03

PH: 4-14-03



Pete Johanns
Governor

FILED
CITY CLERK'S OFFICE

03 MAR 24 PM 4 46

**CITY OF LINCOLN
NEBRASKA**

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/>

A3-030772

113

March 20, 2003

City Clerk
County/City Bldg.
555 So. 10th Street
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

Mary Messman
Licensing Division

Enclosures

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4011
REV. 12/99

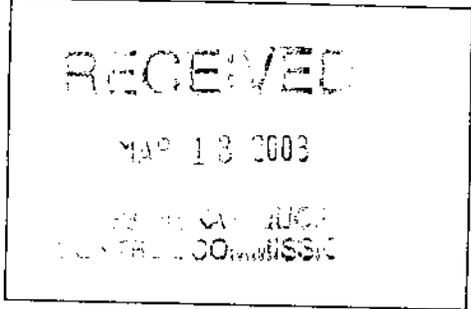
(18)

City - NPO #58798

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission
 PO Box 95046, 301 Centennial Mall South
 Lincoln, NE 68509-5046

<http://www.nol.org/home/NLCC/>
 Phone: (402) 471-2571
 Fax: (402) 471-2814



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 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders/member holding over 25% stock/interest. 6. All applications must be typewritten or printed clearly. 7. Submit in **Triplicate**

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

Class of License (Check applicable class)	Registration Fee	License Fee	Corporate Surety/Bond
<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 - Indicate Inside or 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"/> DI Spirits, Wine, Beer, Off Sale only - within extraterritorial zoning jurisdiction	\$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"/> N 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	Collected at Local Level	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	\$ 50.00	exempt
<input type="checkbox"/> X Wholesale Liquor	\$45.00	Varies \$100 to \$1,000	\$10,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$500.00	\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	\$ 5,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	\$ 1,000 min.

TYPE OF APPLICATION

CORPORATE SURETY BOND INFORMATION

Type of application being applied for (place appropriate number in box)

3

- 1= Individual License requires Form 1 to be attached.
- 2= Partnership License requires Form 2 to be attached.
- 3= Corporate License requires Form 3 and 4 and Manager Application be attached.

Bond Company - for Classes L V W X Y only

Start Date Month/Day/Year

Bond Number

SECTION A - LOCATION INFORMATION - Must be completed by all applicants

Trade Name (name of business)

Sim's Paradise Social Hall

Telephone Number at premise to be licensed

402-416-1701

1) Street Address of Proposed licensed premise

3235 North 35

2) Mailing Address for receipt of

Liquor Control Commission mailings

5014 Valley Forge Road

Is this location inside the city limits

Circle YES/NO

City County Zip Code

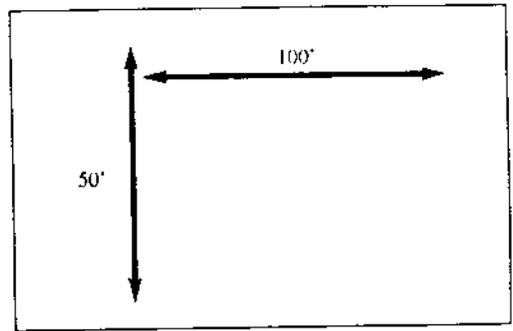
Lincoln, Lancaster 68504

City County Zip Code

Lincoln, Lancaster 68521

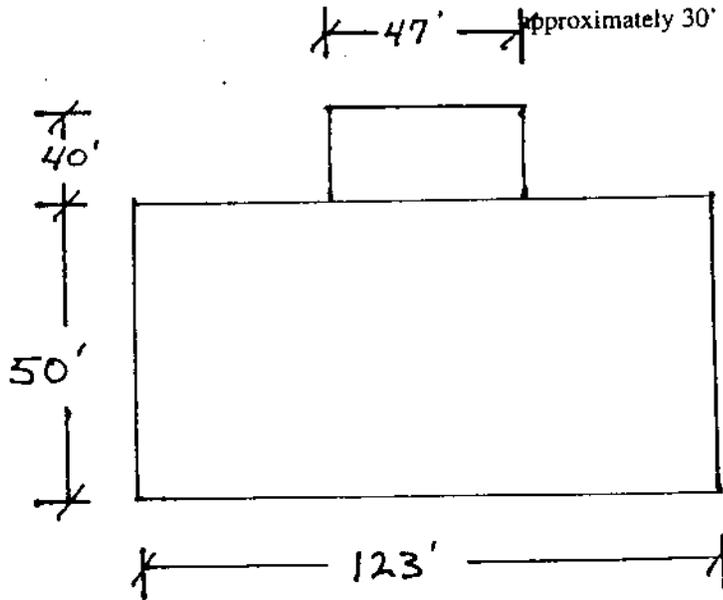
DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

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.



No basement

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



single story

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 or 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.

X

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).	X	
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.	X	
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	X	
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.	X	
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.	X	
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?	X	
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.	X	
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.	X	
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.	Pinnacle Bank Janet Crosby Alan Embury	
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.	None	
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.	Janet Crosby 40 Hrs.	
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	None	
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).	JAN-AL, INC.	
15. When do you intend to open for business?	Jan. 1, 2003	

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Alan Embury	1944	2002	Lincoln, NE
Janet Crosby	1956	2002	Lincoln, 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/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

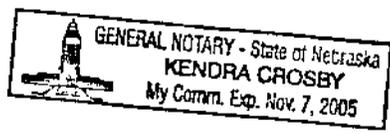
sign here _____
 sign here: Alan Embury _____
 sign here _____
 sign here _____

sign here Janet Crosby _____
 sign here Janet Crosby _____
 sign here _____
 sign here _____

COPY witnessed by:
 Subscribed in my presence and sworn to before me this 10th day of December, 2002.

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 alternate format.

(SEAL)



sign here _____
 Notary Public Signature

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name Crosby, Janet Lea Firestone			President
Spouse Name Crosby, Kerry			
Partner Number of Shares / % 50	Spouse Number of Shares / % 0		

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name Embury, Alan			Partner
Spouse Name			
Partner Number of Shares / % 50	Spouse Number of Shares / %		

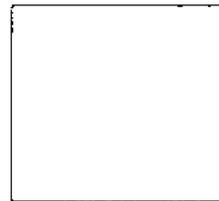
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name			
Spouse Name			
Partner Number of Shares / %	Spouse Number of Shares / %		

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name			
Spouse Name			

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

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
- Required areas marked by a red asterisk (*)



Name of Corporation That Will Hold License. **Attach copy of Articles of Incorporation** Total Number of Shares (corporation)
JAN-AL Inc. 10,000

Corporate Street Address Mailing address for receipt of Liquor Control Commission Mailings
5014 Valley Forge Rd. 5014 Valley Forge Rd.

Corporate Telephone Number City County State Zip Code
402/416-1701 Lincoln Lancaster NE 68521

Name of Registered Agent Name of Proposed Manager
Janet Crosby Janet Crosby

IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER

Name Title Date of Birth
Janet Crosby President

Social Security Number Home Address (1) City
 5014 Valley Forge Rd. Lincoln

State Zip Code Home Telephone Number
NE 68521 402/435-4912

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES

Partner Number of Shares / %			Spouse Number of Shares / %		
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title		
	Name				
Spouse Name					
Partner Number of Shares / %			Spouse Number of Shares / %		

(If Necessary, Continue on Separate Sheet)

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/LCC. 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.

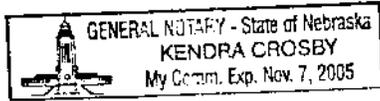
Please indicate below your corporate tax year with the IRS

Starting date: December 1, 20 Ending date: December 31,

State of Nebraska)
) ss.
Lincoln County)

Kendra Crosby
Notary Public Signature & Seal

By Janet Crosby
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.

Janet Crosby
Secretary/Member

RECEIVED

MAR 12 2004

NEBRASKA LOUPO
CONTROL COMMISSION

Verify Form and Print

FORM 35-4183
REV. 02/01

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/ho>

Required areas marked by a red asterisk (*)

LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

Class & License number

JAN-AL Inc.

|

Trade Name of Licensed Premise

Simply Paradise *Social Hall*

Street Address of Licensed Premise

5235 North 35th Street

City

Lincoln

County

Lancaster

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

Signature of Corporate President/CEO:

Janet L Crosby

APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden)

Crosby, Janet L.

Sex

F

M

Social Security Nu

Date of Birth

|

Place of Birth

Lincoln, Nebraska

Home Street Address

City

County

RECEIVED

5014 Valley Forge Rd. Lincoln Lancaster

State NE

Zip Code 68521

Home Telephone Number 402/435-4912

Business Telephone Number 402/416-1701

Drivers License Number

Are You Married? Yes (X) No () If Yes, You must complete the following:

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE

Full Name (Last, First, Middle, Maiden) Crosby, Kerry D.

Social Security Number

Drivers License Number State NE

Date of Birth

Place of Birth Lincoln, 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 to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor of a federal or state law; or a violation of a local law, ordinance or resolution. List the name of the charge, where the charge occurred and the year and month of the conviction or plea. Also list charges pending at the time of this application. If more than one party, please list each individual's name.

Yes No (X)

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

Yes No (X)

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

12/8/02

RECEIVED

MAR 14 2002

NEBRASKA LIQUOR CONTROL ACT

Yes No

4. Do you, as a manager, have all the qualifications required by any person entitled to 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 Patrol), with this application?

Yes No

RESIDENCES SINCE AGE 18, APPLICANT AND SPOUSE MUST COMPLY

Year
From To

Applicant: City & State

Crosby, Janet

56 02

Spouse: City & State

Crosby, Kerry

56 02

Year
From To

Applicant: City & State

Embury, Alan

44 02

Spouse: City & State

Year

	From	To
Applicant: City & State	<input type="text"/>	<input type="text"/>
Spouse: City & State	<input type="text"/>	<input type="text"/>

	Year	From	To
Applicant: City & State	<input type="text"/>	<input type="text"/>	<input type="text"/>
Spouse: City & State	<input type="text"/>	<input type="text"/>	<input type="text"/>

EMPLOYERS - LIST LAST TWO EMPLOYERS

Name of Employer	Year
	From To
Fernandos Beauty Salon	78 02
Name of Supervisor	Telephone Number
Fernando Ortiz	402/489-5846

Name of Employer	Year
	From To
Embury Const. Co.	76 02
Name of Supervisor	Telephone Number
Alan Embury	402/438-1200

PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE BY APPLICANT & SPOUSE

STATE OF NEBRASKA)
) SS
 COUNTY OF *Lincoln*)

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

RECEIVED

MAR 14 2002

NEBRASKA LIQUOR CONTROL ACT

Yes No

4. Do you, as a manager, have all the qualifications required by any person entitled to 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 Patrol), with this application?

Yes No

RESIDENCES SINCE AGE 18, APPLICANT AND SPOUSE MUST COMPLY

Year
From To

Applicant: City & State

Crosby, Janet | 56 | 02

Spouse: City & State

Crosby, Kerry | 56 | 02

Year
From To

Applicant: City & State

Embury, Alan | 44 | 02

Spouse: City & State

| |

Year

35-4013

The undersigned applicant hereby consents to an investigation of his/her background in records of every kind and description including police records, tax records (State and Federal bank or lending institution records, and said applicant and spouse waive any rights or claim that said applicant or spouse may have against the Nebraska Liquor Control Commission 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, if cards are still required to be filed.

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

David L. Crosby
Signature of Applicant

Kerry Crosby
Signature of Spouse (if appl)

Subscribed in my presence and sworn to before me this 13th day of March 2003

Subscribed in my presence and sworn to me this 13th day of March 2003

Patricia A. Thomsen
Notary Signature & Seal

Patricia A. Thomsen
Notary Signature & Seal



Verify and Print



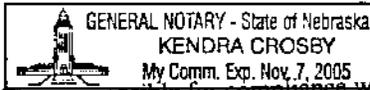
NEBRASKA LIQUOR CONTROL COMMISSION AFFIDAVIT OF NON PARTICIPATION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

[Signature]
Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 10th day of December, A.D., 2002

[Signature]
Signature of Notary Public



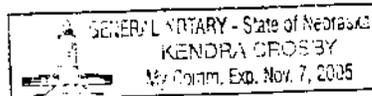
The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

[Signature]
Signature of Licensee/Applicant

Janet L. Crosby
Alan Embury
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 10th day of December, A.D., 2002

[Signature]
Signature of Notary Public



FORM 35-4178
REV 2/01