

Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 16th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR COLEEN J. SENG

www.ci.lincoln.ne.us

January 13, 2004

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

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Ernie's Fast Break, 7000 'O' Street requesting a class B liquor license.

Earnest Shipe has requested that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Earnest Shipe was born in Lincoln, Nebraska. He attended Norris High School graduating in 1978. Mr. Shipe has been self employed since 1982 as the owner of a convenience store.

For Council's information Mr. Shipe has completed the required managers training course.

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



A nationally accredited law enforcement agency





LINCOLN POLICE DEPARTMENT PUBLIC RECORD CRIMINAL HISTORY

This is a list of criminal citations and arrests by the Lincoln Police Department for this person since 1980. Arrests or citations by any other law enforcement agency are not included. Cases not having charges filed are not included. Minor traffic infractions are not included. Cases when the subject was under the age of 16 or cases transferred to juvenile court are not included. Citations and arrests with no final court disposition are not included, except those within the past year for which dispositions are still pending.

If the phrase "****END OF LISTING****" does not appear at the bottom of this report, then this list is not complete.

FOR: EARNEST E SHIPE , Male, DOB: 03-22-1960

Date of listing: 01-15-2004

CODES FOR CRIMINAL HISTORY (M)=Misdemeanor (F)=Felony (O)=Other

Cited on 07-02-1986	for (M)DWI/.10% 1ST OFFENSE	Case 86-52463
Disposed 09-25-1987	as (M).10% 1ST OFFENSE	Cit# LA041073
FOUND GUILTY 1 YEARS PROBATION		
CONVICTION SET ASIDE		
Cited on 08-30-1985	for (M)FAIL TO APPEAR ON CITATION	Case
Disposed 09-17-1985	as (M)FAIL TO APPEAR ON CITATION	Cit# LA003406
FOUND GUILTY Fined \$5.00		
Cited on 07-04-1985	for (M)PARKS:POSSESS OR CONSUME ALCOHOL	Case 85-53448
Disposed 07-26-1985	as (M)PARKS:POSSESS OR CONSUME ALCOHOL	Cit# LA002676
FOUND GUILTY Fined \$25.00		
Cited on 12-21-1983	for (M)DRIVE ON SUSPENDED LICENSE	Case 83-101205
Disposed 03-27-1984	as (M)DRIVE W/O PROPER LICENSE	Cit# F129361
FOUND GUILTY Fined \$100.00		
Cited on 04-30-1982	for (M)ASSAULT,STRIKE, AND BEAT ANOTHER	Case 82-29972
Disposed 05-14-1982	as (M)ASSAULT,STRIKE, AND BEAT ANOTHER	Cit# E851605
FOUND GUILTY Fined \$25.00		

*** END OF LISTING ***

STATE OF NEBRASKA

Net date: 1-12-04

PH: 2-2-04



Mike Johanns
Governor

FILED

CITY CLERK'S OFFICE

04 JAN 2 PM 4 13

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/>

December 30, 2004

001820
45

Office of the City Clerk
555 So 10th Street
Suite #103
Lincoln NE 68508

RE: "Ernie's Fast Break"

7000 'O' St.
Class B.

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

Enclosure
Thomas 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 35-4001
REV. 12/99

City
New

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

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

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NEBRASKA LIQUOR
CONTROL COMMISSION

App # 62043

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 holding over 25% stock **6.** All applications must be typewritten or printed clearly **7.** Submit in **Triplicate** **8.** Required areas marked by a red asterisk (*)

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

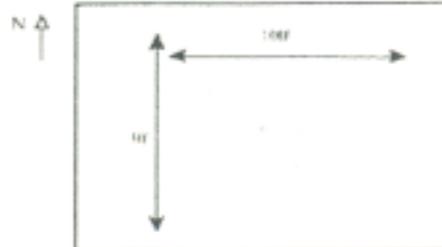
Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input checked="" 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 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"/> 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 *	CORPORATE SURETY BOND INFORMATION
Type of application being applied for (check appropriate 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 _____

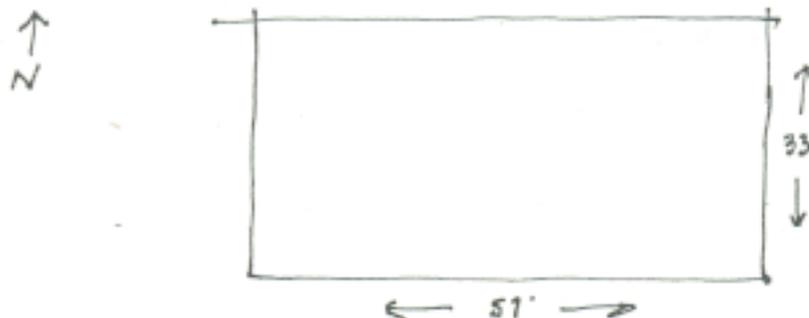
SECTION A – LOCATION INFORMATION – Must be completed by all applicants			
Trade Name (name of business) Ernie's Fast Break		Telephone Number at premise to be licensed 402-488-4818	
1) Street Address of Proposed licensed premise 7000 "O" Street		2) Mailing Address for receipt of Liquor Control Commission mailings P.O. Box 81006	
City Lincoln Zip Code 68510	County Lancaster	City Lincoln Zip Code 68501	County Lancaster

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.



*One story
No basement*

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NEBRASKA LIQUOR CONTROL COMMISSION

SECTION B		OTHER INFORMATION REQUIRED *		Explanation/Comments Note: Only what is visible on screen will be printed						
	Yes	No								
<p>* 1. READ CAREFULLY. Answer completely and accurately.</p> <p>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. Include any DWIs or DUIs. 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>					Yes	<input checked="" type="radio"/>	<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">RECEIVED</div> <div style="font-size: 1.2em; margin-bottom: 10px;">DEC 29 2003</div> <div style="font-size: 1.2em; font-weight: bold;">NEBRASKA LIQUOR CONTROL COMMISSION</div>			
<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).</p>					Yes	<input checked="" type="radio"/>				
<p>* 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.</p>					Yes	<input checked="" type="radio"/>				
<p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>					<input checked="" type="radio"/>	No			Cornhusker Bank Lincoln, NE	
<p>* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>					Yes	<input checked="" type="radio"/>				

<p>* 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.</p>	Yes	<input checked="" type="radio"/> No	
<p>* 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?</p>	Yes	<input checked="" type="radio"/> No	
<p>* 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.</p>	Yes	<input checked="" type="radio"/> No	
<p>* 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.</p>	Yes	<input checked="" type="radio"/> No	
<p>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.</p>	<p>Cornhusker Bank Charles R. Salem</p>		
<p>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.</p>	<p>1648 South #43562 3100 NW 12th #54995 630 W VanDorn #51960</p>		
<p>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.</p>	<p>Ernie Shipe 50 Hours</p>		

<p>13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.</p>	<p>None</p>
<p>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)</p>	<p>See attached Deed</p>
<p>15. When do you intend to open for business?</p>	<p>1-5-04</p>

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Charles Robert Salem	1945	present	Lincoln, NE
Sherene L. Salem	1945	present	Lincoln, NE
Carolyn Otte	1983	present	Lincoln, NE
Robert R. Otte	1983	present	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 (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign Here Chandra R. Sahu

Sign Here _____

Sign Here Sheena T. Salas

Sign Here _____

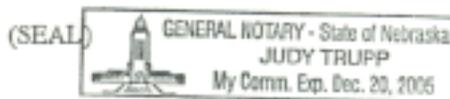
Sign Here Carolyn Otte

Sign Here _____

Sign Here Edgar R. Otte

Sign Here _____

Subscribed in my presence and sworn to before me this 27th day of December, 2003



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.

Sign here Judy Trupp
Notary Public Signature

Verify & Print form

FORM 35-4010
1
REV 1/01

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NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION

DEC 29 2003

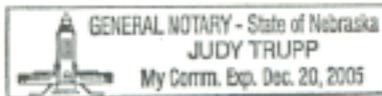
NEBRASKA LIQUOR
CONTROL COMMISSION

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 application.

Sherene Salem

Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 27th day of December, 2003.



Judy Trupp
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.

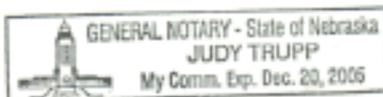
Charles R. Salem

Signature of Licensee/Applicant

Charles R. Salem

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 27th day of December, 2003.



Judy Trupp
Signature of Notary Public

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 (if corporation)

Salem FB, LLC *

100,000 *

Ernie's

Corporate Street Address

Mailing address for receipt of Liquor Control Commission Mailings

1234 North 14th Street *

P.O.Box 81006 *

Corporate Telephone Number
402-476-3333 *

City
Lincoln *

County
Lancaster *

State
NE *

Zip Code
68501 *

Name of Registered Agent

Name of Proposed Manager

Charles R. Salem *

Ernie Shipe *

IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER

Name

Title

Date of Birth

Charles R. Salem *

President *

Social Security Number

Home Address (1)

City

* -

2825 Stratford Avenue *

Lincoln *

State

Zip Code

Home Telephone Number

NE *

68502 * -

402-435-0434 *

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

Name

AIE, Inc.

Member

Spouse Name

Partner Number of Shares / % 50

Spouse Number of Shares / %

Name of Officers, Directors, Members and Spouses.

file

Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name Salem Oil Company			Member
Spouse Name			
Partner Number of Shares / % 50	Spouse Number of Shares / %		
<hr/>			
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 / %		
<hr/>			
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 / %		
<hr/>			
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^X No

Name of control Corporation

AIE, Inc. 50%, Salem Oil 50%

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.

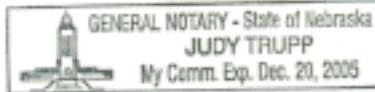
Please indicate below your corporate tax year with the IRS

Starting date: January Ending date: December

State of Nebraska)

Lancaster County) ss.

Judy Trupp
Notary Public Signature & Seal



By Chris R. Nelson
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.

Sherena Salem
Secretary/Member

Verify Form and Print

FORM 35-4183
REV. 02/01

Salem FB, LLC - Organization chart

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Salem FB, LLC

JUN 27 2003

- Salem Oil Company, A Nebraska Corporation
Manager / Member - Owns 50% of Salem FB, LLC
Charles R. Salem, Pres. 100% Owner
- AIE, Inc., A Nebraska Corporation
Manager / Member - Owns 50% of Salem FB, LLC
Robert R. Otte, Pres 50% owner
Carolyn S. Otte, Sec/Trea 50% owner

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/>

Required areas marked by a red asterisk (*)

LIQUOR LICENSE INFORMATION

Name of Licensed Corporation _____ *
Ernie's FB, LLC

Class & License number _____ *
B

Trade Name of Licensed Premise _____ *
Ernie's Fast Break

Street Address of Licensed Premise _____ *
7000 "O" Street

City _____ *
Lincoln

County _____ *
Lancaster

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

Signature of Corporate President/CEO: _____

Charles R. John

APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden) _____ *
Shipe, Earnest E.

Sex *	
F	M
	X

Social Security Number _____ *

Date of Birth _____ *

Place of Birth _____ *

Lincoln

Home Street Address _____ *
1509 SW 15th Street

City _____ *
Lincoln

County _____ *
Lancaster

State _____ *
NW

Zip Code _____ *
68522

Home Telephone Number _____ *
402-435-4490

Business Telephone Number _____ *
402-488-4818

Drivers License Number _____ *

State _____ *
NE

Are You Married? * Yes No If Yes, You must complete the following:

<http://www.ims.state.ne.us/LCCtemp/35-4013.html>

12/24/2003

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

Full Name (Last, First, Middle, Maiden)

Social Security Number

Drivers License Number

State

Date of Birth

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DEC 29 2003

Place of Birth

**NEBRASKA LIQUOR
CONTROL COMMISSION**

* 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

* 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

RESIDENCES SINCE AGE 18, APPLICANT AND SPOUSE MUST COMPLETE

		Year	
		From	To
Applicant: City & State			
Lincoln, NE		1980	pres
Spouse: City & State			

		Year	
		From	To
Applicant: City & State			
Spouse: City & State			

		Year	
		From	To
Applicant: City & State			
Spouse: City & State			

		Year	
		From	To
Applicant: City & State			
Spouse: City & State			

EMPLOYERS - LIST LAST TWO EMPLOYERS

		Year	
		From	To
Name of Employer			
Self employed		1982	pres.
Name of Supervisor		Telephone Number	
self			

		Year	
		From	To
Name of Employer			
Star Service		1977	1982
Name of Supervisor		Telephone Number	
No longer in business		none	

PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY

