

Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

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



MAYOR COLEEN J. SENG

www.ci.lincoln.ne.us

August 25, 2005

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 Jack's Bar & Grill, 100 North 8th Street requesting that Christy McMahan be approved as the manager of the class C liquor license.

Background information on the applicant is as follows:

Christy McMahan was born in Lincoln, Nebraska. She attended Lincoln High School 1993 - 1995.

Christy McMahan employment history is as follows:

2002 - Present	Manager, Jacks Bar	Lincoln, NE.
2002 - 2003	Bartender, Pit Crew	Lincoln, NE.
1999 - 2002	Manager, Matts Bar / Coaches	Lincoln, NE.
1995 - 1999	Supervisor, Big Red Keno	Lincoln, NE.

For Councils information Ms. McMahan completed the required managers training course on May 12, 2005.

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



Liquor License Investigation

Business (DBA) JACKS BAR

Manager Owner Other _____

Name: Christy McMahon (TISSY)

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 ? 35 - 40

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 8/25/05



RECEIVED
AUG 19 2005
BY: City Clerk

9-19-05

STATE OF NEBRASKA

Dave Heineman
Governor

NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe

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/>

15-092604

21

August 18, 2005

Lincoln City Clerk
555 South 10th Street
Lincoln NE 68508

Re: Jack's Bar & Grill

Dear Clerk:

Enclosed is a copy of a manager application for Christy McMahan in connection with Jack's Bar & Grill, located at 100 N 8th St., Lincoln, liquor license #C-54832.

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

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Holly Erickson
Licensing Division

encl.

cc: file

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

Application for Corporate Manager

Must Be A Nebraska Resident

Please submit in Triplicate

RECEIVED

AUG 15 2005

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>

NEBRASKA LIQUOR CONTROL COMMISSION

Required areas marked by a red asterisk (*)

LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

Ogala Enterprises *

Class & License number

C-54832 *

Trade Name of Licensed Premise

Jack's Bar + Grill *

Street Address of Licensed Premise

100 N. 8th *

City

Lincoln *

County

Lancaster *

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

Signature of Corporate President/CEO:

APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden)

McMahan Christy E. *

Sex *

F	M
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Social Security Number

[Redacted]

Date of Birth

[Redacted] *

Place of Birth

Lincoln, NE. *

Home Street Address

1207 W. Sewell *

City

Lincoln *

County

Lancaster *

State

NE *

Zip Code

68522 *

Home Telephone Number

840-8867 *

Business Telephone Number

438-6288 *

Drivers License Number

[Redacted] *

State

NE *

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

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

Full Name (Last, First, Middle, Maiden)

Social Security Number

~~Christy Elizabeth Mc~~
Daria

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

* 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 95 05

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

Name of Employer

Matt Diers

Year

From To

99 01

Name of Supervisor

Matt Diers

Telephone Number

Name of Employer

Bonnie Charlesworth

Year

From To

01 03

Name of Supervisor

Bonnie Charlesworth

Telephone Number

464-9521

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

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.

Christy McNeil
Signature of Applicant

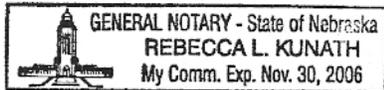
Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this 19th
day of July 2005.

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

Rebecca L. Kunath
Notary Signature & Seal

Notary Signature & Seal



Verify and Print

RECEIVED

AUG 15 2005
FORM 35-4013
REV. 2/01

**NEBRASKA LIQUOR
CONTROL COMMISSION**