



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

lincoln.ne.gov

September 14, 2006

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 Sesostris Temple, 1717 Yolande requesting that Charles Heinke be approved as the manager of the class C liquor license.

Background information on the applicant is as follows:

Charles Heinke was born in Sioux City, Iowa. He attended the University of Nebraska, Lincoln graduating in 1973.

Charles Heinke employment history is as follows:

Present	Manager, Sesostris Temple	Lincoln, NE.
1999 - 2006	Sales, Experian	Lincoln, NE.
1993 - 1999	Sales, Equitable Life	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



A nationally accredited law enforcement agency



Liquor License Investigation

Business (DBA) SESOSTRIS Temple

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

Name: CHARLES HEINKE

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 \_\_\_\_\_

Photo       Records Check       References

Comments \_\_\_\_\_

Interview Date 9 / 14 / 06



Dave Heineman  
Governor

PH: 10-2-06

STATE OF NEBRASKA

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.lcc.ne.gov/>

September 7, 2006

AG-098824  
123

FILED

SEP 8 2006

CITY CLERK'S OFFICE  
LINCOLN, NEBRASKA

City Clerk of Lincoln  
City/County Building  
555 S 10 Street  
Lincoln, NE 68508

RE: Manager Application Submittal

Dear Sir/Madam:

The corporation Sesostris Temple Holding Corp submitted the enclosed Application for Corporate Manager. The establishment has the following liquor license(s) Class C #08685. The applicant's name is Charles R Heinke.

Please present this application to your City/County Council and return the results of the action taken to our office. If you have any questions or comments, please give me a call at (402) 471-4881.

Sincerely,

*Jackie B Matulka*

Jackie B. Matulka  
Licensing Division

Enclosure

35

CT's 33564

Rhonda R. Flower  
Commissioner

Bob Logsdon  
Chairman

R.L. (Dick) Coyne  
Commissioner

APPLICATION FOR LIQUOR LICENSE  
CORPORATION MANAGER - FORM 3b  
\*MUST BE A NEBRASKA RESIDENT\*

301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
FAX: (402) 471-2814  
Website: [www.nol.org/home/NLCC/](http://www.nol.org/home/NLCC/)

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NEBRASKA LIQUOR  
CONTROL COMMISSION

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NEBRASKA LIQUOR  
CONTROL COMMISSION

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LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION Sesostais Temple Holding Corp  
CLASS & LICENSE NUMBER C 8685  
TRADE NAME Sesostais Temple  
STREET ADDRESS 1717 Volande Ave CITY Lincoln NE 68521

Steve Hanneman is required to sign here Steve Hanneman Patented  
Sesostais  
8606 Steve

SIGNATURE OF CORPORATION PRESIDENT/CEO

APPLICANT INFORMATION (MUST BE 21 OR OVER AND NEBRASKA RESIDENT)

NAME Charles R. Heinke  
ADDRESS 1856 Pannee  
CITY Lincoln STATE NE ZIP CODE 68502  
HOME PHONE NUMBER 402 421 1527 BUSINESS PHONE NUMBER 402 474 6890  
SEX  MALE  FEMALE SOCIAL SECURITY NUMBER 480 66 1083  
DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH Sioux City, Ia  
DRIVERS LICENSE NUMBER & STATE \_\_\_\_\_ Nebraska

SPOUSES INFORMATION (IF NOT MARRIED INDICATE)

SPOUSE NAME Patricia A Heinke  
SOCIAL SECURITY NUMBER 484 70 4827 DATE OF BIRTH \_\_\_\_\_  
DRIVERS LICENSE NUMBER & STATE \_\_\_\_\_ Nebraska

Spousal

**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 charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; 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

If yes, please explain below or attach a separate page.

**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

*prints enclosed*

**RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE**

APPLICANT: CITY & STATE	YEAR FROM TO	SPOUSE: CITY & STATE	YEAR FROM TO
<i>Charles R Henke</i>		<i>Patricia A Henke</i>	
<i>1856 Lawrence</i>	<i>5-83 Present</i>	<i>1856 Lawrence</i>	<i>5-83 Present</i>
<i>Lincoln NE 68502</i>		<i>Lincoln NE 68502</i>	

**EMPLOYERS - LIST LAST TWO EMPLOYERS**

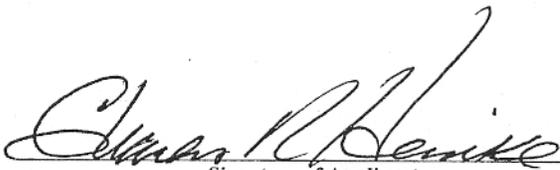
MONTH/YEAR FROM TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
<i>5-2006 Present</i>	<i>Sesostais Shrine Lincoln</i>	<i>Steve Henneman</i>	<i>402 474-6890</i>
<i>5-1999 4-2006</i>	<i>EXPERIAN Lincoln NE</i>	<i>Marta Griffin</i>	<i>402 475 4591</i>
<i>3-1993 1-1999</i>	<i>Equitable Life Assurance</i>	<i>Steve Turkin</i>	<i>402 483 6661</i>

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

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 of non participation may be attached.

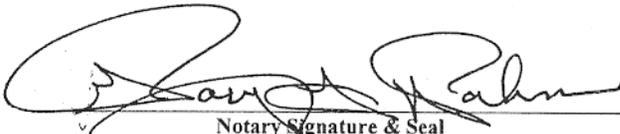
The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent.

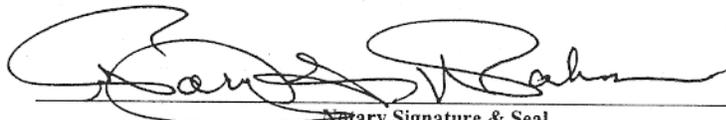
  
\_\_\_\_\_  
Signature of Applicant

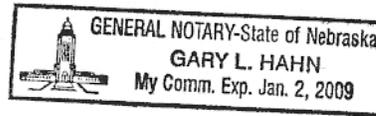
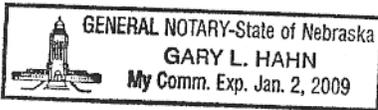
  
\_\_\_\_\_  
Signature of Spouse

Subscribed in my presence and sworn to before me this 1  
day of September, 2006

Subscribed in my presence and sworn to before me this 1  
day of September, 2006

  
\_\_\_\_\_  
Notary Signature & Seal

  
\_\_\_\_\_  
Notary Signature & Seal



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NEBRASKA LIQUOR CONTROL COMMISSION  
AFFIDAVIT OF NON PARTICIPATION

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. The undersigned individual will also be waived of filing fingerprint cards, however, will be required to disclose any violation(s) on all applications and sign all necessary documents.

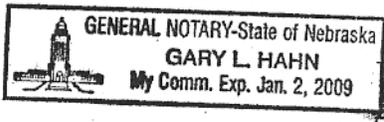
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SEP 06 2006

NEBRASKA LIQUOR  
CONTROL COMMISSION

*Rattho Seimle*  
Signature of Spouse Asking to be Waived

SUBSCRIBED in my presence and sworn to before me this 1 day  
of September, 2006.



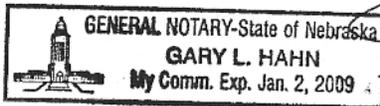
*Gary L. Hahn*  
Signature of Notary Public

The applying individual, whose spouse is requesting to be waived, 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. Heine*  
\*Signature of applying individual  
(spouse of individual listed above)

Charles R. Heine  
Print name of applying individual

SUBSCRIBED in my presence and sworn to before me this 1 day  
of September, 2006.



*Gary L. Hahn*  
Signature of Notary Public

\*spouse of individual listed above is the individual required to sign bottom portion of affidavit