

May 29, 2014

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

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of Lincoln Stars Hockey, 1800 State Fair Park requesting a class I liquor license.

The request is due to an LLC change. The current manager on the license will remain.

The required training was completed.

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.


JIM PESCHONG, Chief of Police



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12. List the alcohol related training and/or experience (when and where) of the person(s) making application. These persons required are listed as followed:

- a) Individual, applicant only (no spouse)
- b) Partnership, all partners (no spouses)
- c) Corporation, manager only (no spouse) as listed on form 3c
- d) Limited Liability Company, manager only (no spouse) as listed on form 3c

NEBRASKA LIQUOR CONTROL COMMISSION

NLCC certified training program completed:

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Manager = James Pflug		James Pflug's information is already on file with the NLCC as there is no change in liquor manager, just in the membership interests in the LLC

For list of NLCC certified training programs see: www.lco.ne.gov/traininginfo.html

Experience:

Applicant Name/Job Title	Date of Employment	Name & Location of Business

13. 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 in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed.

- Lease: expiration date April 15, 2031, with a 5-year renewal option
- Deed
- Purchase Agreement

14. When do you intend to open for business? Business opened in April 1998. This application reflects just a change of member interest in the LLC.

15. What will be the main nature of business? Concession sales during games of the Lincoln Stars hockey team, plus other events held at the location.

16. What are the anticipated hours of operation? Hockey games generally run from 7 to 10 pm, with some earlier start times.

17. List the principal residence(s) for the past 10 years for all persons required to sign on page 8, including spouses.

RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE					
APPLICANT: CITY & STATE	YEAR		SPOUSE: CITY & STATE	YEAR	
	FROM	TO		FROM	TO
Ryan Schiff: Glen Ellyn, IL 60137 645 N. PARK BLVD	1999	Present	Kirsten Schiff: Glen Ellyn, IL	1999	Present

If necessary attach a separate sheet.

See corp manager form for James and Yvonne's past residence

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NEBRASKA LIQUOR CONTROL COMMISSION

The undersigned applicant(s) hereby consent(s) to an investigation of his/her background and release present and future records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or proprietor that are needed in furtherance of the application investigation of 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, inaccurate or fraudulent.

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 by applicant(s) and spouse(s). See guideline for required signatures

 _____ Signature Ryan Schiff, Member over 25% _____ Print Name	_____ Signature _____ Print Name
_____ Signature of Spouse James Pflug, Manager _____ Print Name	_____ Signature of Spouse Yvonne Pflug, non-participating spouse of manager _____ Print Name

Prints Submitted

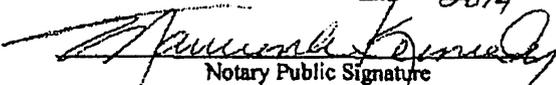
ACKNOWLEDGEMENT

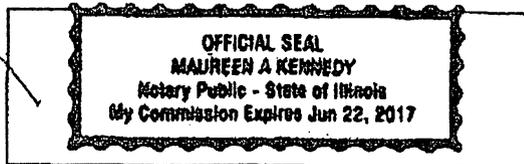
ILLINOIS
State of ~~Nebraska~~
County of COOK

The foregoing instrument was acknowledged before me this

14th day of March by _____
date 2014

RYAN SCHIFF
name of person(s) acknowledged (individual(s) signing)


Notary Public Signature



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

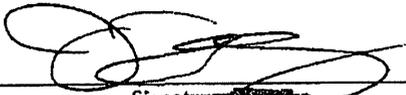
The undersigned applicant(s) hereby consent(s) to an investigation of his/her background and release present and future records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant(s) and spouse(s) waive(s) 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 of 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, inaccurate or fraudulent.

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_____ Signature
Ryan Schiff, Member over 25% _____ Print Name

_____ Signature
_____ Print Name

 _____ Signature
James Pflug, Manager _____ Print Name

_____ Signature of Spouse
Yvonne Pflug, non-participating spouse of manager _____ Print Name

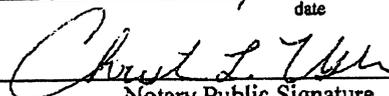
ACKNOWLEDGEMENT

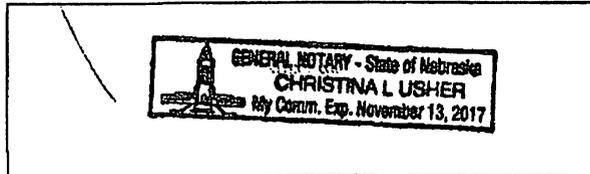
State of Nebraska
 County of Lancaster

March 20, 2014
 date

The foregoing instrument was acknowledged before me this

James Pflug
 name of person(s) acknowledged (individual(s) signing)


 Notary Public Signature



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NEBRASKA LIQUOR CONTROL COMMISSION FORM 100
 REV 12/2013
 PAGE 8

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Signature

Ryan Schiff, Member over 25%

Print Name

Signature

APR 28 2014

NEBRASKA LIQUOR CONTROL COMMISSION

Print Name

Signature of Spouse

James Pflug, Manager

Print Name

Yvonne M Pflug
Signature of Spouse

Yvonne Pflug, non-participating spouse of manager

Print Name

ACKNOWLEDGEMENT

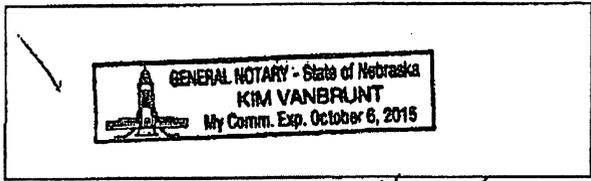
State of Nebraska
County of Douglas

The foregoing instrument was acknowledged before me this

April 24, 2014 date

by Yvonne Pflug name of person(s) acknowledged (individual(s) signing)

Kim VanBunt 4-24-14
Notary Public Signature



4-24-14

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