



LINCOLN POLICE DEPARTMENT
575 South 10th Street Lincoln, NE 68508
402-441-7204 fax: 402-441-8492 lincoln.ne.gov

March 31, 2015

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 Nebraska Entertainment, Inc., DBA East Park Cinema, 220 N 66th Street, requesting a class I-112092 liquor license. Nebraska Entertainment, Inc. currently holds a class I liquor license for Lincoln Grand Cinema.

Lisa Fryda is requesting that she be approved as the manager of the liquor license. Ms. Fryda has not yet completed the required management training. She is scheduled to attend the training on April 9, 2015.

No areas of concern were found.

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 "Jim Peschong".

JIM PESCHONG, Chief of Police



A nationally accredited law enforcement agency



**APPLICATION FOR LIQUOR LICENSE
CHECKLIST - RETAIL**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

RECEIVED		
MAR 25 2015		
Hot List: YES / <u>NO</u>	<u>New</u> / Replacing #:	
Class Type <u>I</u>	112092	Initial <u>mp</u>

Applicant name Nebraska Entertainment, Inc.
 Trade name East Park Cinema
 Previous trade name N/A
 Contact email address carrieamaya@marcuscorp.com

Provide all the items requested. Failure to provide any item will cause this application to be returned or placed on hold. All documents must be legible. Any false statement or omission may result in the denial, suspension, cancellation or revocation of your license. If your operation depends on receiving a liquor license, the Nebraska Liquor Control Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to submitting your application review the application carefully to ensure that all sections are complete, and that any omissions or errors have not been made. You may want to check with the city/village or county clerk, where you are making application, to see if any additional requirements must be met before submitting application to the state.

RECEIPT	DATE <u>3-25-15</u> No. <u>168326</u>
	FROM <u>Marcus Theatre Corp</u>
	FOR <u>New App East Park Cinema</u>
	<input type="checkbox"/> CASH <u>156672</u> <input checked="" type="checkbox"/> CHECK # <u>1479</u> \$400.00 <input type="checkbox"/> MONEY# _____ ORDER _____ Received by <u>Michelle Porter</u>

Office use only	PAYMENT TYPE <u>CK # 156672</u>
	AMOUNT: <u>\$400.00</u>
<u>Rec # 168326</u>	Received: <u>mp</u>


 1500006111

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REQUIRED ATTACHMENTS

prints - Thomas Kissinger
affidavit - Nancy Kissinger
prints at patrol - Lisa Fryda
affidavit prints - Dean Fryda

Each item must be checked and included with application or marked N/A (not applicable)

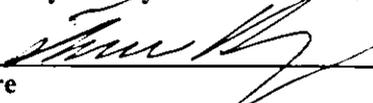
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NEBRASKA LIQUOR CONTROL COMMISSION

1. X OK Fingerprints are required for each person as defined in new application guide, found on our website under "Licensing Tab" in "Guidelines/Brochures". See Form 147 for further information, this form MUST be included with your application.
2. X OK Enclose application fee of \$400, check made payable to the Nebraska Liquor Control Commission.
3. X OK Enclose the appropriate application forms;
 - Individual License (requires insert form 1)
 - Partnership License (requires insert form 2)
 - Corporate License (requires insert form 3a & 3c)
 - Limited Liability Company (LLC) (requires form 3b & 3c)
4. X OK If building is being leased send a copy of signed lease. Be sure the lease reads in the name of the individual(s), corporation or Limited Liability Company making application. Lease term must run through the license year being applied for.
5. n/a If building is owned or being purchased send a copy of the deed or purchase agreement in the name of the applicant.
6. n/a If buying the business of a current liquor license holder:
 - a. Provide a copy of the purchase agreement from the seller (must read applicants name).
 - b. Provide a copy of alcohol inventory being purchased (must include brand names and container size)
 - c. Enclose a list of the assets being purchased (furniture, fixtures and equipment).
7. n/a If requesting to operate on current liquor license; enclose Temporary Operating Permit (TOP)(form 125).
8. n/a Enclose a list of any inventory or property owned by other parties that are on the premise.
9. X OK For citizenship enclose U.S. birth certificate; U.S. passport or naturalization paper
 - a. For residency enclose proof of registered voter in Nebraska
 - b. See guideline for further assistance <http://www.lcc.nebraska.gov/brochures.html>
10. X OK Corporation or Limited Liability Company must enclose a copy of articles of incorporation; as filed with the Secretary of State's Office. This document must show barcode.
11. X OK Submit a copy of your business plan.

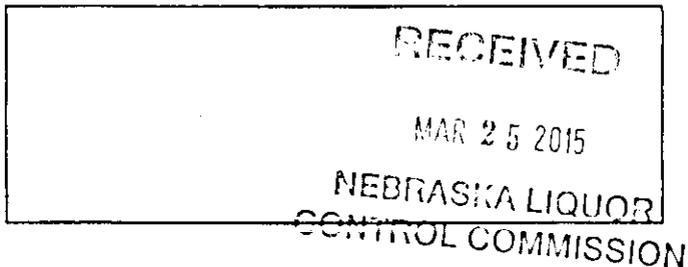
I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 60 days. Furthermore, I understand that all the information is truthful and I accept all responsibility for any false documents.

Signature 

Date March 9, 2015

**APPLICATION FOR LIQUOR LICENSE
RETAIL**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov/



**CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES
CHECK DESIRED CLASS**

RETAIL LICENSE(S) Application Fee \$400 (non refundable)

- A BEER, ON SALE ONLY
- B BEER, OFF SALE ONLY
- C BEER, WINE, DISTILLED SPIRITS, ON AND OFF SALE
- D BEER, WINE, DISTILLED SPIRITS, OFF SALE ONLY
- I BEER, WINE, DISTILLED SPIRITS, ON SALE ONLY
- AB BEER, ON AND OFF SALE
- AD BEER ON SALE ONLY, BEER, WINE, DISTILLED SPIRITS OFF SALE
- IB BEER, WINE, DISTILLED SPIRITS ON SALE, BEER OFF SALE ONLY
- ID BEER, WINE, DISTILLED SPIRITS ON AND OFF SALE

Class K Catering license (requires catering application form 106) \$100.00

Additional fees will be assessed at city/village or county level when license is issued

Class C license term runs from November 1 – October 31
All other licenses run from May 1 – April 30
Catering license (K) expires same as underlying retail license

CHECK TYPE OF LICENSE FOR WHICH YOU ARE APPLYING

- Individual License (requires insert form 1)
- Partnership License (requires insert form 2)
- Corporate License (requires insert form 3a & 3c)
- Limited Liability Company (LLC) (requires form 3b & 3c)

NAME OF ATTORNEY OR FIRM ASSISTING WITH APPLICATION (if applicable)

Commission will call this person with any questions we may have on this application

Name Tim O'Neill Phone number: (402) 434-3000

Firm Name O'Neill, Heinrich, Damkroger, Bergmeyer & Shultz, P.C., L.L.O.

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PREMISE INFORMATION

Trade Name (doing business as) East Park Cinema

Street Address #1 220 North 66th Street

Street Address #2 _____

City Lincoln County Lancaster Zip Code 68508

Premise Telephone number (402) 441-0222

Business e-mail address eastpark@marcustheatres.com

Is this location inside the city/village corporate limits: YES NO

Mailing address (where you want to receive mail from the Commission)

Name The Marcus Corporation

Street Address #1 100 East Wisconsin Avenue, Suite 1900

Street Address #2 Legal Department

City Milwaukee State Wisconsin Zip Code 53202

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

READ CAREFULLY

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, outdoor area, 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. No blue prints please. Be sure to indicate the direction north and number of floors of the building.

**For on premise consumption liquor licenses minimum standards must be met by providing at least two restrooms

Building: length 211' x width 130' (approx.) in feet
Is there a basement? Yes No x If yes, length n/a x width n/a in feet
Is there an outdoor area? Yes No x If yes, length n/a x width n/a in feet

PROVIDE DIAGRAM OF AREA TO BE LICENSED BELOW OR ATTACH SEPARATE SHEET

Entire first floor only (Mezzanine Level not being licensed) of premises, which is a portion of the East Park Plaza mall. First floor area is approximately 211' x 130'. See attached diagram.

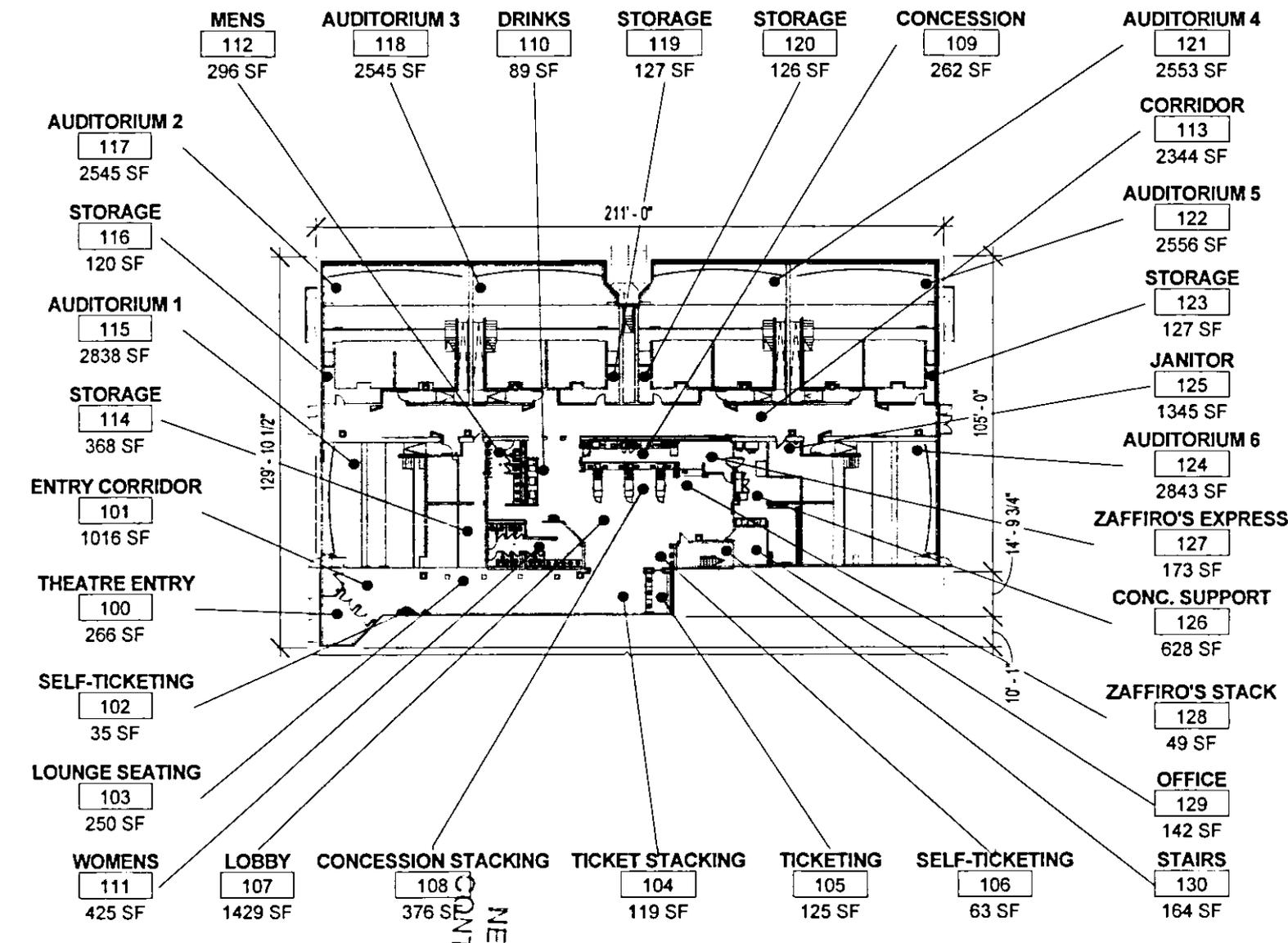
First floor area approx 211' x 130' on north section of East Park Plaza Mall; mezzanine not licensed (ok per Trish 3/25/15)

MARCUS EAST PARK REMODEL
LINCOLN, NEBRASKA
LIQUOR PLAN - FIRST FLOOR

PRINTED
2/2/2015 9:50:27
AM

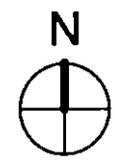
PROJECT 14049.00

ASD 1.1



FIRST FLOOR	23,147 SF
MEZZANINE	3,217 SF
GRAND TOTAL	26,364 SF

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CONTROL COMMISSION



① LIQUOR PLAN - FIRST PLAN
1" = 50'-0"

**SUBMISSION OF FINGERPRINTS /
PAYMENT OF FEES TO NSP-CID**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

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MAR 25 2015	
NEBRASKA LIQUOR CONTROL COMMISSION	
Office Use Only	
Class: _____	License #: _____

Applicant Name: **Nebraska Entertainment, Inc.**

(Corporation, LLC, Partnership or Individual)

Trade Name: **East Park Cinema**

(Doing Business As)

(402) 441 - 0222

Phone Number

carrieamaya@marcuscorp.com

Contact E-mail Address

DIRECTIONS FOR SUBMITTING FINGERPRINTS AND FEE PAYMENTS:

- See New Application Requirement Guide for listing of Fingerprint Requirements, found on our website under "Licensing" tab in "Brochures".
- Fingerprints taken at NSP locations will be forwarded to NSP – CID;
Applicant(s) will not have cards to include with license application.
- Fingerprints taken at local law enforcement offices will be released to the applicants;
Fingerprint cards should be submitted with the application.
- Fee payment of **\$28.75 per person** must be made directly to the NSP;
You may submit the payment through the NSP PayPort online system at www.ne.gov/go/nsp
or checks made payable to NSP should be mailed directly to the following address:
The Nebraska State Patrol – CID Division
3800 NW 12th Street
Lincoln, NE 68521
- **DO NOT** send fee payments to the NLCC – fees **MUST** be paid directly to NSP;
Include a list of names covered by your payment to insure proper application of payment.
- This completed form **MUST** be included with your Liquor License Application and/or Manager Application or Changes to: Corporate Officers or Stockholders, LLC Members, Partners or Addition of Spouse where new fingerprint cards are required (see New Application Requirement Guide).
- Fingerprints are not required for spouses that have no involvement with business - Spousal Affidavit of Non Participation (Form 116) is required in lieu of fingerprints.

Please complete information on the following pages for EACH person fingerprinted.

1. Name: Thomas F. Kissinger Title: President, VP, Secretary, Treasurer

How was payment made to NSP? NSP PAYPORT CHECK SENT TO NSP

2. Name: Lisa M. Fryda Title: Manager

How was payment made to NSP? NSP PAYPORT CHECK SENT TO NSP

3. Name: _____ Title: _____

How was payment made to NSP? NSP PAYPORT CHECK SENT TO NSP

4. Name: _____ Title: _____

How was payment made to NSP? NSP PAYPORT CHECK SENT TO NSP

5. Name: _____ Title: _____

How was payment made to NSP? NSP PAYPORT CHECK SENT TO NSP

6. Name: _____ Title: _____

How was payment made to NSP? NSP PAYPORT CHECK SENT TO NSP

7. Name: _____ Title: _____

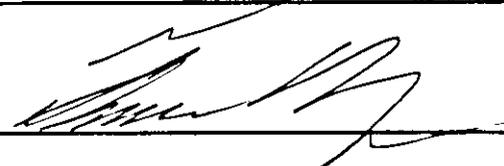
How was payment made to NSP? NSP PAYPORT CHECK SENT TO NSP

8. Name: _____ Title: _____

How was payment made to NSP? NSP PAYPORT CHECK SENT TO NSP

I hereby certify that fees of \$28.75 per person have been submitted directly to the Nebraska State Patrol – CID office. The undersigned certifies on behalf of the Corporation, LLC, Partnership or Licensee that it is understood that a misrepresentation of fact is cause for rejection of this application or suspension, cancellation or revocation of any license issued.

Name (Print): Thomas F. Kissinger Title: President, Vice President Secretary, Treasurer

Signature: 

Date: March 9, 2015

APPLICANT INFORMATION

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY §53-125(5)

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. Include traffic violations. Commission must be notified of any arrests and/or convictions that may occur after the date of signing this application.

YES NO

If yes, please explain below or attach a separate page

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition
Thomas F. Kissinger	09/2005	Hartland, WI	Reckless driving- Reckless Safety	Traffic Citation Issued
Thomas F. Kissinger			may have other traffic violations	unable to recall details
Nancy A. Kissinger			may have traffic violations	unable to recall details

2. Are you buying the business of a current retail liquor license?

YES NO

If yes, give name of business and liquor license number

N/A

- a) Submit a copy of the sales agreement
- b) Include a list of alcohol being purchased, list the name brand, container size and how many
- c) Submit a list of the furniture, fixtures and equipment

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3. Was this premise licensed as liquor licensed business within the last two (2) years?

YES NO

If yes, give name and license number

N/A

4. Are you filing a temporary operating permit (TOP) to operate during the application process?

YES NO

If yes:

- a) Attach temporary operating permit (TOP) (form 125)
- b) TOP will only be accepted at a location that currently holds a valid liquor license.

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5. Are you borrowing any money from any source, include family or friends, to establish and/or operate the business?

YES NO

If yes, list the lender(s) N/A

6. Will any person or entity, other than applicant, be entitled to a share of the profits of this business?

YES NO

If yes, explain. (All involved persons must be disclosed on application)

Marcus Midwest, LLC (pursuant to attached Theatre Agreement)

listed on corp form

No silent partners

(Attached)

7. Will any of the furniture, fixtures and equipment to be used in this business be owned by others?

YES NO

If yes, list such item(s) and the owner. N/A

8. Is premise to be licensed within 150 feet of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, and children, or within 300 feet of a college or university campus?

YES NO

If yes, provide name and address of such institution and where it is located in relation to the premises (Neb. Rev. Stat. 53-177)(1)

N/A

9. Is anyone listed on this application a law enforcement officer?

YES NO

If yes, list the person, the law enforcement agency involved and the person's exact duties

N/A

10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business

a) List the individual(s) who will be authorized to write checks and/or withdrawals on accounts at this institution.

(see attached)

11. List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reason for termination of any license(s) previously held.

(see attached)

#10

Liquor License Application – Form 100

**East Park Cinema
220 N. 66TH Street
Lincoln, NE 68508**

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CONTROL COMMISSION

Question 10 (page 6): List the primary bank and/or financial institution (branch if possible) to be utilized by the business

- a) List the individual(s) who will be authorized to write checks and/or withdrawals on accounts at this institution.

Answer: JP Morgan Chase
Milwaukee, WI 53202

- a) Gregory S. Marcus
Thomas F. Kissinger
Rolando Rodriguez
Douglas A. Neis
Jeff Tomachek
Karen Gamroth

#11

Liquor License Application – Form 100

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East Park Cinema
220 N. 66TH Street
Lincoln, NE 68508

MAR 25 2015
NEBRASKA LIQUOR
CONTROL COMMISSION

Question 11: List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reason for termination of any license(s).

THOMAS F. KISSINGER
PRESIDENT/VICE PRESIDENT/SECRETARY/DIRECTOR/TREASURER

MARCUS HOTELS HOSPITALITY, LLC
FAMILY ENTERTAINMENT, LLC
RUSH ONTARIO, LLC
MARCUS MANAGEMENT LAS VEGAS, LLC
MARCUS SKIRVIN, INC.
RESORT MISSOURI, LLC
MARCUS MADISON, LLC
MARCUS BLOOMINGTON, LLC
NEBRASKA ENTERTAINMENT, INC.
MARCUS LINCOLN HOTEL LLC
MARCUS PERIMETER, LLC
MARCUS CINEMAS OF OHIO, LLC

Marcus Hotels Hospitality, LLC holds Class “B” Combination Beer and Liquor Licenses at the following locations:

The Pfister Hotel, 424 East Wisconsin Avenue, Milwaukee, WI 53202
Hilton Milwaukee City Center, 509 West Wisconsin Avenue, Milwaukee, WI 53203
Grand Geneva Resort & Spa, 7036 Grand Geneva Way at HY 50 East, Lake Geneva, WI 533147
Hilton Madison Monona Terrace, 9 East Wilson Street, Madison, WI 53703
InterContinental Hotel, 139 East Kilbourn Avenue, Milwaukee, WI 53202

Family Entertainment, LLC holds Class “B” Combination Beer and Liquor Licenses at the following locations:

Majestic Cinema, 770 North Springdale Road, Brookfield, WI 53045
North Shore Cinema, 11700 North Port Washington Road, Mequon, WI 53092
Ridge Cinema, 5200 South Moorland Road, New Berlin, WI 53151
Point Cinema, 7825 Big Sky Drive, Madison, WI 53719

Family Entertainment, LLC holds Class “B” Beer and a Class “C” Wine Liquor Licenses at

Marc Cinemas, 3226 Kohler Memorial Drive, Sheboygan, WI 53081

Family Entertainment, LLC holds On Sale Intoxicating and Sunday Liquor Licenses at Parkwood Cinema, 1533 Frontage Road North, Waite Park, MN 56387

Family Entertainment, LLC holds a Theater Liquor License at Duluth Cinema, 300 Harbor Drive, Duluth, MN 55802

Family Entertainment, LLC holds a Liquor License – On Sale and a Special Sunday Liquor License – On Sale at Marcus Oakdale Cinemas, 5677 Hadley Avenue North, Oakdale, MN 55128

Family Entertainment, LLC holds a Retailers Class D License at Marcus Cinemas Addison, 1555 West Lake Street, Addison, IL 60101

Rush Ontario, LLC holds a Consumption on Premises License at Hotel Rush, 630 North Rush Street, Chicago, IL 60611

Marcus Management Las Vegas, LLC holds a Mixed Beverage License at Platinum Hotel, 211 East Flamingo Road, Las Vegas, NV 89109

Marcus Skirvin, Inc. holds a Mixed Beverage/Caterer's License at The Skirvin Hilton, 1 Park Avenue, Oklahoma City, OK 73102

Resort Missouri, LLC holds a Retail Liquor by the Drink License at Hotel Phillips, 106 West 12th Street, Kansas City, MO 64105

Marcus Madison, LLC holds a Class "B" Combination Liquor/Beer License at Sheraton Madison, 706 John Nolen Drive, Madison, WI 53713

Marcus Bloomington, LLC holds an On Sale Liquor License w/ Sunday Operation and 2:00 A.M. approval at Hilton Minneapolis/Bloomington, 3900 American Boulevard West, Bloomington, MN 55437

Nebraska Entertainment, Inc. holds a Class "I" Beer, Wine and Distilled Spirits On Sale License at:

Midtown Crossing, 3201 Farnham Street, Omaha, NE 68131
Village Pointe Cinemas, 304 North 174th Street, Omaha, NE 68118
Majestic Cinema of Omaha, 14304 West Maple Road, Omaha, NE 68164
Twin Creek Cinemas, 3909 Raynor Parkway, Bellevue, NE 68123
Lincoln Grand Cinemas, 1101 P Street, Lincoln, NE 68508

Marcus Lincoln Hotel LLC holds a Class "CK" Alcoholic Liquor On/Off Sale/Catering (inside corporate limits) at The Cornhusker, 333 South 13th Street, Lincoln, NE 68508

Marcus Perimeter, LLC holds a Consumption on Premises – Beer, Wine and Liquor and a Hotel In-Room Service – Beer, Wine and Liquor at The Westin Atlanta Perimeter North, 7 Concourse Parkway NE, Sandy Springs, Georgia

Marcus Cinemas of Ohio, LLC holds a Class “D5” Spirituous liquor for on premises consumption only, beer, wine and mixed beverages for on premises, or off premises and a Class “D-6” Sunday Sales licenses at Marcus Cinemas Crosswoods, 200 Hutchinson Avenue, Columbus, OH 43235

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Pending Applications:

Family Entertainment, LLC has applications pending for:
Marcus Cinemas of Elgin in Elgin, Illinois;
Marcus Palace Cinema in Sun Prairie, Wisconsin; and
South Shore Cinemas in Oak Creek, Wisconsin.

NEBRASKA LIQUOR
CONTROL COMMISSION

Marcus Cinemas of Ohio, LLC has a license pending for Marcus Cinemas Pickerington in Pickerington, Ohio.

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

- Individual: Applicant and spouse; spouse is exempt if they filed Form 116 – Affidavit of Non-Participation.
- Partnership: All partners and spouses, spouses are exempt if they filed Form 116 – Affidavit of Non-Participation.
- Limited Liability Company: All member of LLC, Manager and all spouses; spouses are exempt if they filed Form 116 – Affidavit of Non-Participation.
- Corporation: President, Stockholders holding 25% or more of shares, Manager and all spouses; spouses are exempt if they filed Form 116 – Affidavit of Non-Participation.

NLCC certified training program completed:

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Lisa M. Fryda	02/2014	Responsible Beverage Service Training
Lisa M. Fryda	02/2014	FBST
Lisa M. Fryda	04/2015*	*Registered for April 9, 2015 RHC Seminar

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

Experience:

Applicant Name/Job Title	Date of Employment:	Name & Location of Business
Lisa Fryda/General Manager	2008-present	Lincoln Grand Theatre - Lincoln, Nebraska
Lisa Fryda/General Manager	1989-2008	Douglas Theatres - Lincoln Nebraska

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 (As set forth in attached lease documents)
- Deed
- Purchase Agreement

14. When do you intend to open for business? Upon completion of improvements
15. What will be the main nature of business? Motion picture theatre and concession lounge
16. What are the anticipated hours of operation? (see attached)
17. List the principal residence(s) for the past 10 years for all persons required to sign, 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
Thomas F. Kissinger/Hartland, Wisconsin	2001	present	Nancy A. Kissinger/Hartland, Wisconsin	2001	present
Lisa M. Fryda/Davey, Nebraska	1999	present	Dean G. Fryda/Davey, Nebraska	1999	present

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Liquor License Application – Form 100

**East Park Cinema
220 N. 66TH Street
Lincoln, NE 68508**

Question 16 (page 7): What are the anticipated hours of operation?

Answer:

Monday – Thursday: 12:00 p.m. until 10:30 p.m.

Friday – Sunday: 10:00 a.m. until 10:30 p.m.

*Tuesday can include 10:00 a.m. times dependent on title showing

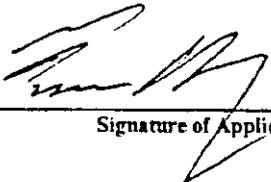
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NEBRASKA LIQUOR
CONTROL COMMISSION

If necessary attach a separate sheet.

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.

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 <http://www.lcc.ne.gov/pdfs/New%20Application%20Guideline.pdf>



Signature of Applicant



Signature of Spouse

Thomas F. Kissinger

Print Name

Nancy A. Kissinger

Print Name

Signature of Applicant

Signature of Spouse

Print Name

Print Name

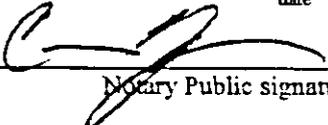
ACKNOWLEDGEMENT

State of Wisconsin
County of Milwaukee

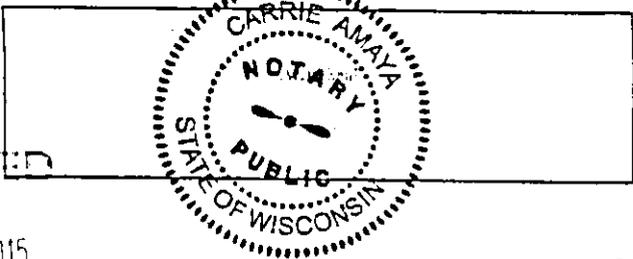
The foregoing instrument was acknowledged before me this

March 9, 2015
date

by Thomas Kissinger + Nancy Kissinger
name of person(s) acknowledged (individual(s) signing)



Notary Public signature



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NEBRASKA LIQUOR CONTROL COMMISSION

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.

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NEBRASKA LIQUOR
CONTROL COMMISSION

East Park

Office Use

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MAR 25 2015

NEBRASKA LIQUOR
CONTROL COMMISSION

**MANAGER APPLICATION
INSERT - FORM 3c**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

Manager must:

- Complete all sections of the application. Be sure it is signed by a corporate officer, corporate officer must be an individual on file with the Liquor Control Commission
- Fingerprints are required. See Form 147 for further information, this form **MUST** be included with your application.
- Provide a copy of one of the following: US birth certificate, naturalization papers or current US passport (even if you have provided this before)
- Be a registered voter in the State of Nebraska, include a copy of voter card with application

Spouse who will not participate in the business, spouse must:

- Complete the Spousal Affidavit of Non Participation Insert (must be notarized). The non-participating spouse completes the top half; the manager completes the bottom half. **Be sure to complete both halves of this form.**
- Need not answer question #1 of the application

Spouse who will participate in the business, the spouse must:

- Sign the application
- Fingerprints are required. See Form 147 for further information, this form **MUST** be included with your application.
- Provide a copy of one of the following: birth certificate, naturalization papers or current US passport (even if you have provided this before)
- Be a registered voter in the state of Nebraska, include a copy of voter card with application
- Spousal Affidavit of Non Participation Insert **not** required

**MANAGER APPLICATION
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301 CENTENNIAL MALL SOUTH
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MUST BE:

- ✓ **Citizen of the United States. Include copy of US birth certificate, naturalization paper or current US passport**
- ✓ **Nebraska resident. Include copy of voter registration in the State of Nebraska**
- ✓ **Fingerprinted. See Form 147 for further information, this form **MUST** be included with your application.**
- ✓ **21 years of age or older**

Corporation/LLC information

Name of Corporation/LLC: Nebraska Entertainment, Inc.

Premise information

Liquor License Number: N/A Class Type I (if new application leave blank)

Premise Trade Name/DBA: East Park Cinema

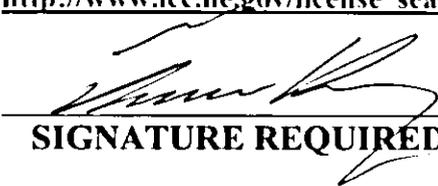
Premise Street Address: 220 North 66th Street

City: Lincoln County: Lancaster Zip Code: 68508

Premise Phone Number: (402) 441-0222

Email address: eastpark@marcustheatres.com

The individual whose name is listed as a corporate officer or managing member as reported on insert form 3a or 3b or listed with the Commission. Click on this link to see authorized individuals. http://www.lcc.ne.gov/license_search/licsearch.cgi


SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER

(Faxed signatures are acceptable)

Manager's information must be completed below PLEASE PRINT CLEARLY

Printed

Last Name: Fryda First Name: Lisa MI: M.

Home Address (include PO Box if applicable): 18101 North 1st Street

City: Davey County: Lancaster Zip Code: 68336

Home Phone Number: (402) 785-2505 Business Phone Number: (402) 323-6720

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: Lincoln, Nebraska

Email address: lisafryda@marcustheatres.com

Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

YES NO

Affidavit

Spouse's information

Spouses Last Name: Fryda First Name: Dean MI: G.

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: Grand Rapids, Michigan

APPLICANT & SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST TEN (10) YEARS
APPLICANT SPOUSE

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Davey, Nebraska	1999	current	Davey, Nebraska	1999	current

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NEBRASKA LIQUOR CONTROL COMMISSION

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2008	present	Marcus Theaters Corp.	Tim Ward	(608) 443-7458
1989	2008	Douglas Theaters	Debby Brehm	(402) 323-6700

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.

Must be completed by both applicant and spouse, unless spouse has filed an affidavit of non-participation.

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.

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YES NO

MAR 25 2015

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

NEBRASKA LIQUOR CONTROL COMMISSION

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (City & State)	Description of Charge	Disposition

2. Have you or your spouse ever been approved or made application for a liquor license in Nebraska or any other state?

YES NO

IF YES, list the name of the premise(s):

3. Do you, as a manager, qualify under Nebraska Liquor Control Act (§53-131.01) and do you intend to supervise, in person, the management of the business?

YES NO

4. List the alcohol related training and/or experience (when and where) of the person making application.

*NLCC Training Certificate Issued: 2/15/2014 Name on Certificate: Lisa M. Fryda

*OK
A Hand of*

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Lisa M. Fryda	02/2014	Responsible Beverage Service Training (attached)
Lisa M. Fryda	02/2014	Lincoln Server/Seller Permit (attached)
Lisa M. Fryda	04/2015*	*Registered for 4/9/15 RHC Seminar

*For list of NLCC Certified Training Programs see www.lcc.ne.gov/traininginfo.html

Experience:

Applicant Name / Job Title	Date of Employment:	Name & Location of Business:
Lisa M. Fryda/General Manager	2008-current	Lincoln Grand Theatre - Lincoln, Nebraska
Lisa M. Fryda/General Manager	1989-2008	Douglas Theaters - Lincoln, Nebraska

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5. Have you enclosed Form 147 regarding fingerprints?

YES NO

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NEBRASKA LIQUOR
COMMISSION

Fingerprint cards for Thomas F. Kissinger Enclosed; Fingerprint cards for Lisa M. Fryda previously submitted to the Nebraska State Patrol.

PERSONAL OATH AND CONSENT OF INVESTIGATION

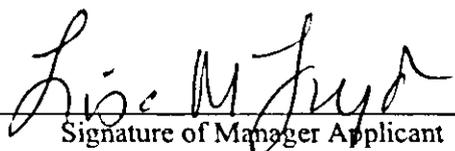
The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application that said application has been read and that the contents thereof and all statements contained therein are true. 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, a spousal 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.

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Signature of Manager Applicant

NEBRASKA LIQUOR
CONTROL COMMISSION
Signature of Spouse

ACKNOWLEDGEMENT

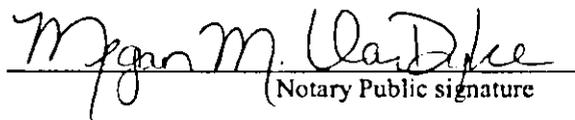
State of Nebraska

County of Lancaster

10th of March, 2015
date

The foregoing instrument was acknowledged before me this

by Lisa M. Fryda
name of person acknowledged


Notary Public signature

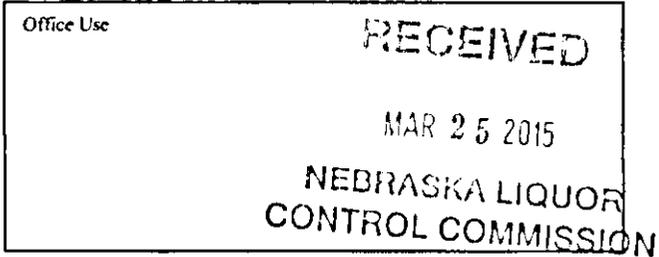


In compliance with the ADA, this application is available in other formats for persons with disabilities. A ten day advance period is required in writing to produce the alternate format.

East Park

SPOUSAL AFFIDAVIT OF NON PARTICIPATION INSERT

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov



I acknowledge that I am the spouse of a liquor license holder. My signature below confirms that I will have not have any interest, directly or indirectly in the operation or profit of the business (§53-125(13)) of the Liquor Control Act. I will not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices or represent myself as the owner or in any way participate in the day to day operations of this business in any capacity. I understand my fingerprint will not be required; however, I am obligated to sign and disclose any information on all applications needed to process this application.

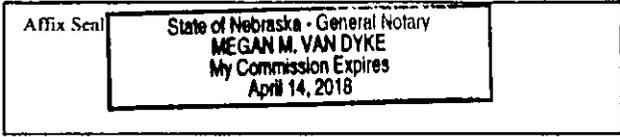
Alan G. Fryda
Signature of spouse asking for waiver
(Spouse of individual listed below)

Dean G. Fryda
Printed name of spouse asking for waiver

State of Nebraska
County of Lancaster
10th of March, 2015
date

The foregoing instrument was acknowledged before me this
by Dean G. Fryda
name of person acknowledged

Megan M. Van Dyke
Notary Public signature



I acknowledge that I am the spouse of the above listed individual. I understand that my spouse and I are responsible for compliance with the conditions set out above. If it is determined that the above individual has violated (§53-125(13)) the Commission may cancel or revoke the liquor license.

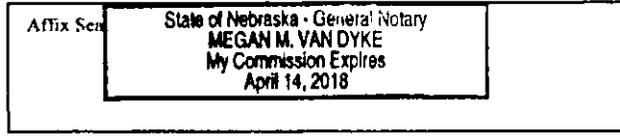
Lisa M. Fryda
Signature of individual involved with application
(Spouse of individual listed above)

Lisa M. Fryda
Printed name of applying individual

State of Nebraska
County of Lancaster
10th of March, 2015
date

The foregoing instrument was acknowledged before me this
by Lisa M. Fryda
name of person acknowledged

Megan M. Van Dyke
Notary Public signature



In compliance with the ADA, this spousal affidavit of non participation is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

APPLICATION FOR LIQUOR LICENSE CORPORATION INSERT - FORM 3a

NEBRASKA LIQUOR CONTROL COMMISSION 301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: www.lcs.ne.gov

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Officers, directors and stockholders holding over 25% shares of stock, including spouses, are required to adhere to the following requirements:

- 1) All officers, directors and stockholders must be listed
2) President/CEO and stockholders holding over 25% and their spouse(s) (if applicable) must submit fingerprints. See Form 147 for further information, this form MUST be included with your application.
3) Officers, directors and stockholders holding over 25 % shares of stock and their spouse (if applicable) must sign the signature page of the Application for License Form 100 (even if a spousal affidavit has been submitted)

Attach copy of Articles of Incorporation (must show electronic stamp or barcode receipt by Secretary of States Office)

Name of Registered Agent: Tim O'Neill

Name of Corporation that will hold license as listed on the Articles

Nebraska Entertainment, Inc. # 10127909

Corporation Address: 100 East Wisconsin Avenue, Suite 1900

City: Milwaukee State: Wisconsin Zip Code: 53202

Corporation Phone Number: (414) 905-1447 Fax Number (414) 905-2669

Total Number of Corporation Shares Issued: 1,000

Name and notarized signature of President/CEO (Information of president must be listed on following page)

Last Name: Kissinger First Name: Thomas MI: F.

Home Address: 601 Ponderosa Drive City: Hartland

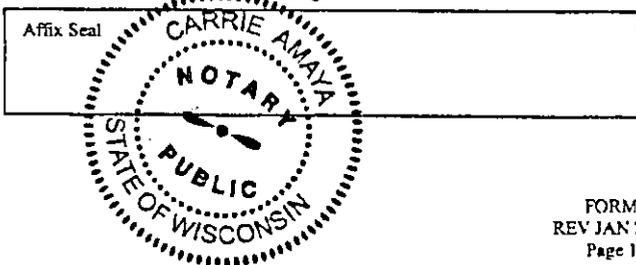
State: Wisconsin Zip Code: 53029 Home Phone Number: (262) 369-9951

Signature of President/CEO

ACKNOWLEDGEMENT

State of Wisconsin County of Milwaukee The foregoing instrument was acknowledged before me this

Date March 9, 2015 by Thomas Kissinger name of person acknowledged



List names of all officers, directors and stockholders including spouses (even if a spousal affidavit has been submitted)

Last Name: Kissinger First Name: Thomas MI: F.

Print
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Social Security Number: _____ Date of Birth: _____

Title: President, Vice President, Secretary, Treasurer Number of Shares (None)

MAR 25 2015

Spouse Full Name (indicate N/A if single): Nancy A. Kissinger

A Affidavit
NEBRASKA LIQUOR CONTROL COMMISS:

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: Marcus Theatres Corporation First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____ Incorporation date: 1/23/1970

Title: Sole Shareholder Number of Shares 1,000

10171349

Spouse Full Name (indicate N/A if single): N/A

Spouse Social Security Number: N/A Date of Birth: N/A

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

List names of all officers, directors and stockholders including spouses (Even if a spousal affidavit has been submitted)

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

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NEBRASKA LIQUOR
CONTROL COMMISSION

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Is the applying corporation controlled by another corporation/company?

YES

NO

If yes, provide the following:

- 1) Name of corporation (see attached)
- 2) Supply an organizational chart of the controlling corporation named above
- 3) Controlling corporation **MUST** be registered with the Nebraska Secretary of State, copy of _____ articles must be submitted with application §53-126

Indicate the Corporation's tax year with the IRS (Example January through December)

Starting Date: Day after Last Thursday in May Ending Date: Last Thursday in May

Is this a Non-Profit Corporation?

YES

NO

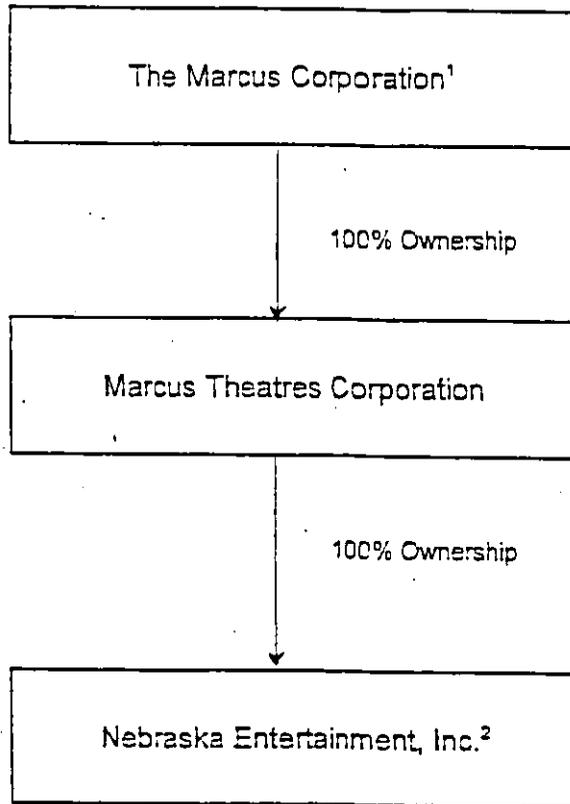
If yes, provide the Federal ID # _____

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CONTROL COMMISSION

In compliance with the ADA, this corporation insert form 3a is available in other formats for persons with disabilities.
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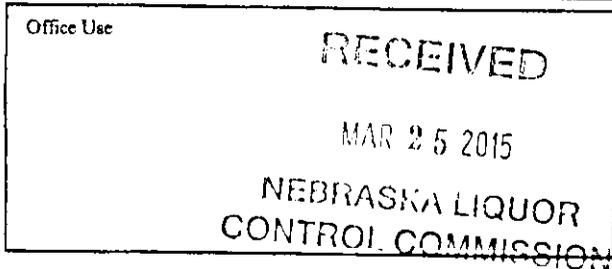
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¹The Marcus Corporation is a publicly traded corporation. No single stockholder owns in the aggregate more than twenty-five percent (25%) of the stock of The Marcus Corporation.

²Nebraska Entertainment, Inc. is the Applicant and a wholly-owned subsidiary of Marcus Theatres Corporation. Marcus Theatres Corporation is a wholly-owned subsidiary of The Marcus Corporation.

**SPOUSAL AFFIDAVIT OF
NON PARTICIPATION INSERT**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov



I acknowledge that I am the spouse of a liquor license holder. My signature below confirms that I will not have any interest, directly or indirectly in the operation or profit of the business (§53-125(13)) of the Liquor Control Act. I will not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices or represent myself as the owner or in any way participate in the day to day operations of this business in any capacity. I understand my fingerprint will not be required; however, I am obligated to sign and disclose any information on all applications needed to process this application.

Nancy A. Kissinger
Signature of spouse asking for waiver
(Spouse of individual listed below)

Nancy A. Kissinger
Printed name of spouse asking for waiver

State of Wisconsin

County of Milwaukee

March 9, 2015
date

The foregoing instrument was acknowledged before me this 9th day of March, 2015, by Nancy Kissinger
name of person acknowledged

[Signature]
Notary Public signature



I acknowledge that I am the spouse of the above listed individual. I understand that my spouse and I are responsible for compliance with the conditions set out above. If it is determined that the above individual has violated (§53-125(13)) the Commission may cancel or revoke the liquor license.

[Signature]
Signature of individual involved with application
(Spouse of individual listed above)

Thomas F. Kissinger
Printed name of applying individual

State of Wisconsin

County of Milwaukee

March 9, 2015
date

The foregoing instrument was acknowledged before me this 9th day of March, 2015, by Thomas Kissinger
name of person acknowledged

[Signature]
Notary Public signature



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