

August 10, 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 Cottonwood Cafe, LLC, DBA Cottonwood Cafe, 440 S. 11<sup>th</sup> Street, requesting a class I-113997 liquor license.

This is the previous location of Duggan's Pub, which held a class C liquor license.

Nathan Simpson is requesting that he be approved as the manager of the liquor license. Mr. Simpson has not yet completed the required management training. He is scheduled to attend the training on August 13, 2015.

Mr. Simpson is the president of Meadowlark Coffee, a non-liquor licensed establishment.

Stockholder information:

Nathan Simpson	70%
Mark Ford	30%

**Mr. Simpson's driving and criminal history is as follows:**

DRIVE UNDER SUSPENSION BEFORE REINSTATEMENT (Lancaster Co/LSO)

Disposition: 2-26-2007, found guilty

IMPROPER REGISTRATION (Lancaster Co/LPD)

Disposition: 1-18-2007, found guilty

IMPROPER REGISTRATION (Lancaster Co/LPD)

Disposition: 1-18-2007, found guilty

OPERATE MOTOR VEHICLE WITHOUT OPERATOR'S LICENSE (Lancaster Co/LPD)

Disposition: 2-27-2004, found guilty

1/3



A nationally accredited law enforcement agency



IMPROPER REGISTRATION (Lancaster Co/LPD)

Disposition: 2-27-2004, found guilty

OPERATE MOTOR VEHICLE WITHOUT OPERATOR'S LICENSE (Lancaster Co/LPD)

Disposition: 2-13-2004, found guilty

IMPROPER REGISTRATION (Lancaster Co/LPD)

Disposition: 2-13-2004, found guilty

POSSESS OR USE DRUG PARAPHERNALIA (Lancaster Co/LPD)

Disposition: 2-6-2004, found guilty

NO VALID OPERATORS LICENSE (Lancaster Co/LSO)

Disposition: 9-24-2003, found guilty

NO PROOF OF INSURANCE (Lancaster Co/LSO)

Disposition: 9-24-2003, found guilty

**Mark Ford's driving and criminal history is as follows:**

REGISTERED MECHANICAL CONTRACTOR (Lancaster Co)

Disposition: 6-12-2014, found guilty

INSTALL/REPAIR FURNACE WITHOUT PERMIT (Lancaster Co)

Disposition: 6-12-2014, found guilty

CHANGE COURSE OF MOTOR VEHICLE WITHOUT SAFETY (Lancaster Co/LPD)

Disposition: 7-14-2010, found guilty

NO SEAT BELT (Lancaster Co/LPD)

Disposition: 7-14-2010, found guilty

SPEEDING 11-15 MPH OVER LIMIT (Sarpy Co/Lavista PD)

Disposition: 5-6-2010, found guilty

VIOLATE STOP SIGN (Lancaster Co/LPD)

Disposition: 9-10-2009, found guilty

NO SEAT BELT (Lancaster Co/LPD)

Disposition: 9-10-2009, found guilty

SPEEDING 11-15 OVER LIMIT (Lancaster Co/LSO)

Disposition: 10-15-2008, found guilty

SPEEDING 11-15 OVER LIMIT (Lancaster Co/LSO)

Disposition: 6-5-1998, found guilty

NO SEAT BELT (Lancaster Co/LPD)

Disposition: 6-5-1998, found guilty

DISTURBING THE PEACE (Lancaster Co/LPD)

Disposition: 1-27-1998, found guilty

ALLOW CONTENTS OF TRUCK LOAD TO FALL UPON STREET (Lancaster Co/LPD)

Disposition: 8-21-1997, found guilty

DRIVING UNDER THE INFLUENCE, FIRST OFFENSE (Lancaster Co/LPD)

Disposition: 8-6-1993, found guilty

TRESPASS UPON PROERTY OF ANOTHER (Lancaster Co/LPD)

Disposition: 3-6-1991, found guilty

PUBLIC INDECENCY (Lancaster Co/LPD)

Disposition: 4-6-1990, found guilty

POSSESS DRUG PARAPHERNALIA (Lancaster Co/LPD)

Disposition: 4-6-1990, found guilty

FICTITIOUS LICENSE PLATES (Lancaster Co/LPD)

Disposition: 2-8-1990, found guilty

TRESPASS UPON PROPERTY OF ANOTHER (Lancaster Co/LPD)

Disposition: 11-15-1989, found guilty

ENTER PARK AFTER HOURS (Lancaster Co/LPD)

Disposition: 8-9-1989, found guilty

INJURE/TAMPER/DESTROY ANOTHER'S PROPERTY (Lancaster Co/LPD)

Disposition: 1-29-1988, found guilty

ASSAULT, STRIKE, BEAT ANOTHER (Lancaster Co/LPD)

Disposition: 1-29-1988, found guilty

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

RECEIPT

DATE 8-6-2015 No. 168486

FROM Cottonwood Cafe LLC

FOR New Application



CASH

CHECK # 1015

MONEY# \_\_\_\_\_

ORDER

\$ 400<sup>00</sup>

Received by Randy Sybert

RECEIVED

**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.nebraska.gov

<b>RECEIVED</b>		
AUG 6 2015		
<b>NEBRASKA LIQUOR CONTROL COMMISSION</b>		
Hot List: YES / NO	New/Replacing #	
Class Type <b>I</b>	License Number	Initial <b>BH</b>

**113997**

Applicant name NATHAN SIMPSON

Trade name COTONWOOD CAFE, L.L.C.

Previous trade name MEADOWLARK CAFE, INC.

Contact email address nate@meadowlarkcoffee.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 Nebraska Liquor Control Commission.

Office use only	PAYMENT TYPE <u>CK # 1015</u>
	AMOUNT: <u>\$ 400.00</u>
	Received: <u>RS</u>



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FORM 10  
REV. MAY 2015  
PAGE 1

1.  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.  Enclose application fee of \$400, check made payable to the Nebraska Liquor Control Commission or you may pay online at [www.ne.gov/go/NLCCpayport](http://www.ne.gov/go/NLCCpayport)
3.  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.  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.  Enclose a list of any inventory or property owned by other parties that are on the premises.
9.  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.  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.  Submit a copy of your business plan.

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**NEBRASKA LIQUOR  
CONTROL COMMISSION**

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

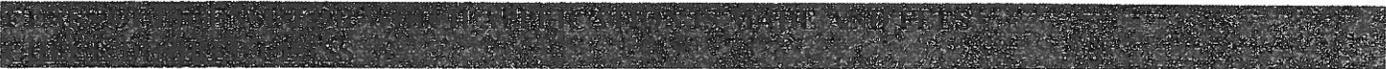
Date

Premise ph #  
Criminal history  
Training

**APPLICATION FOR LIQUOR LICENSE  
RETAIL**

NEBRASKA LIQUOR CONTROL COMMISSION  
301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
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**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
- ① 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

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

**CLASS 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 \_\_\_\_\_ Phone number: \_\_\_\_\_

Firm Name \_\_\_\_\_

Trade Name (doing business as) COTONWOOD CAFE

Street Address #1 440 S. 11th ST. SUITE 'C'

Street Address #2 \_\_\_\_\_

City LINCOLN County LANCASTER Zip Code 68508

~~X~~ Premises Telephone number \_\_\_\_\_

Business e-mail address \_\_\_\_\_

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Is this location inside the city/village corporate limits:  YES

NO AUG 6 2015

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

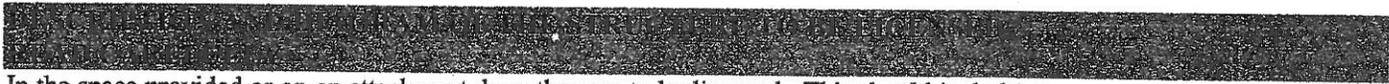
NEBRASKA LIQUOR CONTROL COMMISSION

Name NATHAN SIMPSON

Street Address #1 1118 LANCASTER LN.

Street Address #2 \_\_\_\_\_

City LINCOLN State NE Zip Code 68505

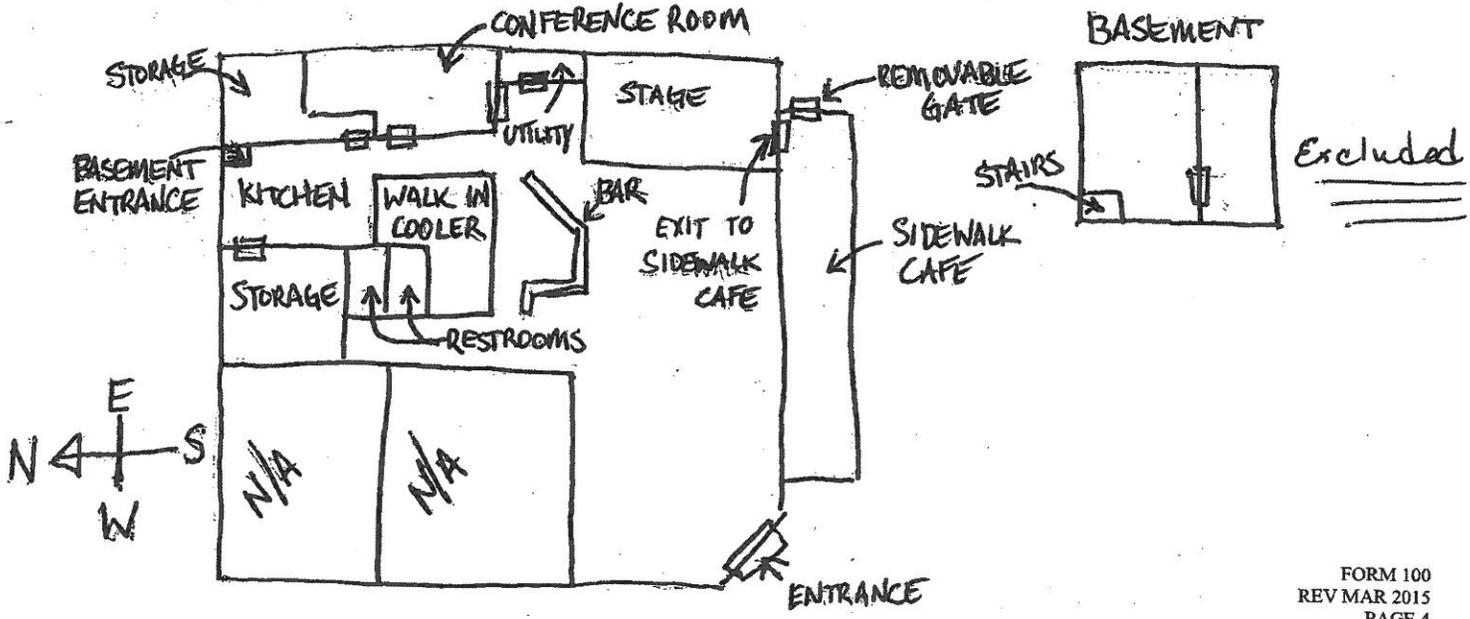


In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, outdoor area, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (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 premises consumption liquor licenses minimum standards must be met by providing at least two restrooms

Building: length 81' x width 87.5 in feet  
Is there a basement? Yes  No  If yes, length 21 x width 19 in feet  
Is there an outdoor area? Yes  No  If yes, length 55 x width 12 in feet

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



**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.

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YES       NO      *See ATTACHED*  
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. Are you buying the business of a current retail liquor license?**

YES       NO

If yes, give name of business and liquor license number \_\_\_\_\_

- 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

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

YES       NO

If yes, give name and license number DUGGAN'S PUB # 21299

**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.

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) \_\_\_\_\_

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)

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NEBRASKA LIQUOR  
CONTROL COMMISSION

No silent partners

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. WALK-IN COOLER, KITCHEN HOOD, BAR

8. Is premises 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)

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

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.

WEST GATE BANK A) NATHAN SIMPSON

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.

NONE

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: NEED TRAINING

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
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		<b>NEBRASKA LIQUOR CONTROL COMMISSION</b>

For list of NLCC certified training programs see: [www.lcc.ne.gov/traininginfo.html](http://www.lcc.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 10/1/2020
- Deed
- Purchase Agreement

14. When do you intend to open for business? 9/15/2015

15. What will be the main nature of business? CAFE

16. What are the anticipated hours of operation? 6AM - MIDNIGHT SUN-TH 6AM - 2AM FRI & SAT

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 (IF APPLICABLE)					
APPLICANT: CITY & STATE	YEAR		SPOUSE: CITY & STATE	YEAR	
	FROM	TO		FROM	TO
<u>NATHAN SIMPSON: LINCOLN, NE</u>	<u>2002</u>	<u>PRESENT</u>	<u>CHRISTINE JONES: LINCOLN, NE</u>	<u>2004</u>	<u>PRESENT</u>

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.

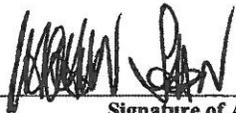
Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person 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.

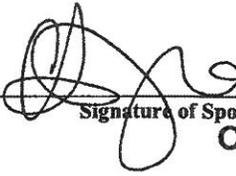
Must be signed in the presence of a notary public by applicant(s) and spouse(s). See guideline for required signatures <http://www.lcc.ne.gov/pdfs/New%20Application%20Guideline.pdf>

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**NEBRASKA LIQUOR CONTROL COMMISSION**

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

  
\_\_\_\_\_  
Signature of Spouse  
Christine A. Jones  
\_\_\_\_\_  
Print Name

NATHAN SIMPSON  
\_\_\_\_\_  
Print Name

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

\_\_\_\_\_  
Signature of Spouse  
\_\_\_\_\_  
Print Name

MARK FORD  
\_\_\_\_\_  
Print Name

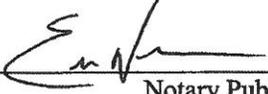
ACKNOWLEDGEMENT

State of Nebraska  
County of LANCASTER

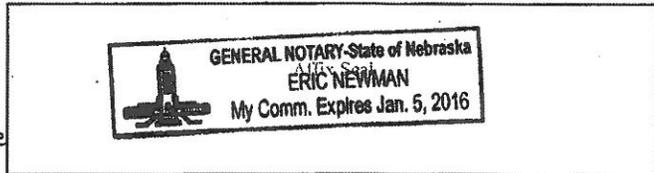
The foregoing instrument was acknowledged before me this

JULY 21<sup>st</sup> 2015  
\_\_\_\_\_  
date

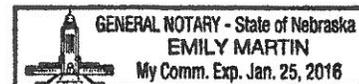
by NATHAN SIMPSON AND CHRISTINE JONES  
\_\_\_\_\_  
name of person(s) acknowledged (individual(s) signing)

  
\_\_\_\_\_  
Notary Public signature

State of Nebraska  
County of Lancaster



The foregoing instrument was acknowledged before me this 21<sup>st</sup> of July, 2015 by Mark Ford.  
Emily Martin



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.

**APPLICATION FOR LIQUOR LICENSE  
LIMITED LIABILITY COMPANY (LLC)  
INSERT - FORM 3b**

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.nebraska.gov](http://www.lcc.nebraska.gov)

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NEBRASKA LIQUOR  
CONTROL COMMISSION

All members including spouse(s), are required to adhere to the following requirements:

- 1) All members spouse(s) must be listed
- 2) Managing/Contact member and all members holding over 25% interest and their spouse(s) (if applicable) must submit fingerprints. See Form 147 for further information, this form MUST be included with your application.
- 3) Managing/Contact member and all members 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 Organization (must show electronic stamp or barcode receipt by Secretary of States office)

Name of Registered Agent: NATHAN SIMPSON

Name of Limited Liability Company that will hold license as listed on the Articles of Organization

COTTONWOOD CAFE L.L.C.

LLC Address: 1118 LANCASTER LN.

City: LINCOLN State: NE Zip Code: 68505

LLC Phone Number: 402-770-4924 LLC Fax Number N/A

Name of Managing/Contact Member

Name and information of contact member must be listed on following page

Last Name: SIMPSON First Name: NATHAN MI: \_\_\_\_\_

Home Address: 1118 LANCASTER LN. City: LINCOLN

State: NE Zip Code: 68505 Home Phone Number: (402) 770-4924



Signature of Managing/Contact Member

**ACKNOWLEDGEMENT**

State of Nebraska  
County of LANCASTER

The foregoing instrument was acknowledged before me this

July 21<sup>st</sup>, 2015  
Date

by Nathan Simpson  
name of person acknowledge



Affix Seal

GENERAL NOTARY-State of Nebraska  
ERIC NEWMAN  
My Comm. Expires Jan. 5, 2016

Is the applying Limited Liability Company controlled by another corporation/company?

YES

NO

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If yes, provide the following:

- 1) Name of corporation \_\_\_\_\_
- 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

NEBRASKA LIQUOR CONTROL COMMISSION

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

Starting Date: JANUARY Ending Date: DECEMBER

Is this a Non Profit Corporation?

YES

NO

If yes, provide the Federal ID #. \_\_\_\_\_

In compliance with the ADA, this corporation insert form 3a is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

**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](http://www.lcc.ne.gov)

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NEBRASKA LIQUOR  
CONTROL COMMISSION

**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  
INSERT - FORM 3c**

NEBRASKA LIQUOR CONTROL COMMISSION  
301 CENTENNIAL MALL SOUTH  
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PHONE: (402) 471-2571  
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Website: [www.lcc.ne.gov](http://www.lcc.ne.gov)

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**NEBRASKA LIQUOR  
CONTROL COMMISSION**

**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**

Name of Corporation/LLC: COTTONWOOD CAFE, L.L.C.

Liquor License Number: \_\_\_\_\_ Class Type \_\_\_\_\_ (if new application leave blank)

Premise Trade Name/DBA: COTTONWOOD

Premise Street Address: 440 S. 11<sup>TH</sup> ST. SUITE C

City: LINCOLN

County: LANCASTER

Zip Code: 68508

Premise Phone Number: (402) 770-4924

Email address: \_\_\_\_\_

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](http://www.lcc.ne.gov/license_search/licsearch.cgi)



**SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER**

(Faxed signatures are acceptable)

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2005	2015	MEADOWLARK CAFE, INC. (NOW PEROT SYSTEMS)	NATHAN SIMPSON	(402) 770-4924
2002	2004	T.A.G. ENTERPRISES	UNKNOWN	UNKNOWN

**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

NEBRASKA LIQUOR CONTROL COMMISSION

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
Christine Jones	07/2001	Wayne, NE	MIP	Guilty - fine, comm. service
Christine Jones	?/2009	Madison, NE	Speeding	Paid fine

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: \_\_\_\_\_ Name on Certificate: \_\_\_\_\_

NONE

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)

\*For list of NLCC Certified Training Programs see [www.lcc.ne.gov/traininginfo.html](http://www.lcc.ne.gov/traininginfo.html)

Experience:

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

5. Have you enclosed Form 147 regarding fingerprints?

YES       NO

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.

Signature of Manager Applicant

Signature of Spouse

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ACKNOWLEDGEMENT

State of Nebraska

County of LANCASTER

The foregoing instrument was acknowledged before me this

July 21<sup>st</sup>, 2015

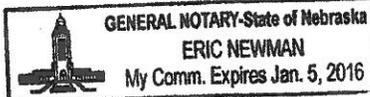
date

by NATHAN SIMPSON & CHRISTINE JAMES

name of person acknowledged

Notary Public signature

Affix Seal



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.

**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

<b>RECEIVED</b>	
DATE RECEIVED	
AUG 6 2015	
NEBRASKA LIQUOR CONTROL COMMISSION Office Use Only	
Class: _____	License #: _____

Applicant Name: COTTONWOOD CAFE L.L.C.  
(Corporation, LLC, Partnership or Individual)

Trade Name: COTTONWOOD CAFE  
(Doing Business As)

(402) 770-4924  
Phone Number

nate@meadowlarkcoffee.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](http://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 12<sup>th</sup> 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: NATHAN SIMPSON Title: OWNER

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

2. Name: MARK E. FORD Title: OWNER

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

3. Name: CHRISTINE JONES Title: OWNER

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

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6. Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

**NEBRASKA LIQUOR CONTROL COMMISSION**

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): NATHAN SIMPSON Title: OWNER

Signature: [Handwritten Signature] Date: 7/19/2015





Driver and Vehicle Records Division
301 Centennial Mall South, P.O. Box 94789
LINCOLN, NEBRASKA 68509-4789
(402) 471-3918
Fax (402) 471-8694

COMPLETE ABSTRACT OF RECORD

Print Date: 07/10/2015 Page: 01 of 02

MARK E FORD

Driver License: V00123842

MARK E FORD
3342 VINE ST
LINCOLN NE 68503
Resident County: 02
DOB:
Gender: M Race: W
Height: 5'06" Weight: 170
Eyes: BRO Hair: BRO
Status: VALID
DLN/Permit/ID Card: V00123842
Issue County: 02
Restrictions:
License Class: 0
Issued: 09-02-2014
Expir: 11-10-2019
Endorsements:

-- CONVICTION/ADMINISTRATIVE ADJUDICATIONS --

SPEEDING 11-15 MPH COUNTY/STATE 70/55
Citation: 04-25-2011 Judgment: 05-12-2011 COUNTY COURT SEWARD NE
Points: 2
Loc: C16TR110000307 Cit: PA3474219
Statute/Ord: 60-6,186E1

IMPROPER TURN
Citation: 06-24-2010 Judgment: 07-14-2010 COUNTY COURT LINCOLN NE
Points: 1
Loc: C02TR100012650 Cit: LB233811
Statute/Ord: 10.14.170B

NO OCCUPANT PROTECTION SYSTEM
Citation: 06-24-2010 Judgment: 07-14-2010 COUNTY COURT LINCOLN NE
Points: 0
Loc: C02TR100012650 Cit: LB233811
Statute/Ord: 10.14.365

SPEEDING 11-15 MPH MUNICIPAL 49/35
Citation: 02-19-2010 Judgment: 05-06-2010 COUNTY COURT PAPPILLION NE
Points: 3
Loc: C59TR100001328 Cit: A2012077
Statute/Ord: 60-6,186C1

DRIVING UNDER INFLUENCE-1ST
Citation: 05-08-1993 Judgment: 08-09-1993 COUNTY COURT LINCOLN NE
Points: 0
Withdrawal: 08-15-1993 Type: REVOKED 6 MONTHS Jail: 7 DAYS
Eligible: 12-14-1993 Reinstated: 10-06-1995
Cit: 349751

\*\*\*\*\*7F1\*\*\*\*\*

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**Driver and Vehicle Records Division**  
301 Centennial Mall South, P.O. Box 94789  
LINCOLN, NEBRASKA 68509-4789  
(402) 471-3918  
Fax (402) 471-8694

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**COMPLETE ABSTRACT OF RECORD**

Print Date: 07/10/2015 Page: 02 of 02

**MARK E FORD**

Driver License: V00123842

---

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**NEBRASKA LIQUOR  
CONTROL COMMISSION**

This is to certify that the above is a true and correct abstract of the operating record of the above-named individual as contained in our files. Any entry for an accident which may appear above is for statistical purposes only and does not indicate a determination of fault.

A handwritten signature in black ink that reads "Betty Johnson". The signature is written in a cursive, flowing style.

Betty Johnson  
Driver and Vehicle Records Division



Driver and Vehicle Records Division
301 Centennial Mall South, P.O. Box 94789
LINCOLN, NEBRASKA 68509-4789
(402) 471-3918
Fax (402) 471-8694

COMPLETE ABSTRACT OF RECORD

Print Date: 07/10/2015 Page: 01 of 01

NATHAN SIMPSON

Driver License: H13031724

NATHAN SIMPSON
1118 LANCASTER LN
LINCOLN NE 68505
Resident County: 02
DOB:
Gender: M Race: W
Height: 6'00" Weight: 225
Eyes: BLU Hair: BLN
Status: VALID
DLN/Permit/ID Card: H13031724
Issue County: 02
Restrictions:
License Class: 0
Issued: 09-23-2014
Expir: 09-06-2019
Endorsements:
Previous DLN: CA B5431556 10-28-2004

-- CONVICTION/ADMINISTRATIVE ADJUDICATIONS --

DRIVING DURING SUSPENSION
Citation: 01-18-2007 Judgment: 02-26-2007 COUNTY COURT LINCOLN NE
Points: 1
Loc: C02CR070002659 Cit: SF142497
Statute/Ord: 60-4,108(2)

----- ADMINISTRATIVE WITHDRAWALS -----

ADMINISTRATIVE LICENSE REVOCATION-1ST
Eligible: 02-25-2009 Reinstated: 12-16-2009 Citation Date: 11-27-2008 NE
FAILURE TO COMPLY
Eligible: INDEFINITE Reinstated: 10-22-2007 07-31-2007 NE
Loc Refer: C02CR070002659 St/ACD/H/C/HZ: NEB20N
FAILURE TO COMPLY
Eligible: INDEFINITE Reinstated: 01-18-2007 05-17-2006 NE
Loc Refer: C02TR060005270 St/ACD/H/C/HZ: NEDNSN

\*\*\*\*\*7S5\*\*\*\*\*

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This is to certify that the above is a true and correct abstract of the operating record of the above-named individual as contained in our files. Any entry for an accident which may appear above is for statistical purposes only and does not indicate a determination of fault.

Betty Johnson (handwritten signature)

Betty Johnson
Driver and Vehicle Records Division

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AUG 6 2015  
NEBRASKA LIQUOR  
CONTROL COMMISSION

PUBLIC RECORD CRIMINAL HISTORY LISTING

PAGE: 1 FOR: NATHAN && SIMPSON  
Printed 07-10-2015 W\M DOB:

.....  
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.
- Arrests where no charges were filed are only included during the most recent year.
- Charges resulting in diversion are only included during the most recent 2 years.
- Charges that were dismissed are only included during the most recent 3 years.
- Any arrest over 1 year old, that has no disposition, is not included.
- Minor traffic infractions and cases when the subject was under the age of 16 or cases transferred to juvenile court are not included.

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

CODES FOR CRIMINAL HISTORY

M=Misdemeanor F=Felony I= Infraction O=Other

.....  
Cited on 01-21-2004 for (I) POSSESS DRUG PARAPHERNALIA Case A4-007224  
Disposed 02-06-2004 as (I) POSSESS DRUG PARAPHERNALIA Cit# LA897444  
FOUND GUILTY Fined \$100.00

\*\*\* END OF LISTING \*\*\*



A nationally accredited law enforcement agency





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

PUBLIC RECORD CRIMINAL HISTORY LISTING

PAGE: 1 FOR: CHRISTINE A JONES  
Printed 07-20-2015 DOB: 1

.....  
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.
- Arrests where no charges were filed are only included during the most recent year.
- Charges resulting in diversion are only included during the most recent 2 years.
- Charges that were dismissed are only included during the most recent 3 years.
- Any arrest over 1 year old, that has no disposition, is not included.
- Minor traffic infractions and cases when the subject was under the age of 16 or cases transferred to juvenile court are not included.

THE LINCOLN POLICE DEPARTMENT SHOWS NO ARRESTS THAT FALL INTO THE ABOVE GUIDELINES FOR THIS PERSON.

\*\*\* END OF LISTING \*\*\*

RECEIVED

AUG 6 2015

NEBRASKA LIQUOR  
CONTROL COMMISSION



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