

October 29, 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 Marci Davison, DBA Carmela's Bistro, 4141 Pioneer Woods Drive, Suite 110, requesting a class C-115428 liquor license.

Marci Davison is making application as an individual as is requesting that she be approved as the manager of the liquor license. Ms. Davison completed the required management training on October 13, 2013.

Ms. Davison recently purchased the business from Carmela's Bistro & Wine Bar, LLC, which was owned by her parents. Ms. Davison was the approved corporate liquor license manager on that license since it was issued July 12, 2008. She was issued a Temporary operating Permit by the Nebraska Liquor Control Commission during the application process.

Marci Davison's driver and criminal history is as follows:

03-13-2013	Charged with: DUI/.08, 1st Offense, >.15	
	Amended to: DUI/.08, 1st Offense	Misdemeanor (city)
04-01-2009	Violate speed limit 11-15 MPH	Infraction (city)
12-02-2008	Negligent driving	Infraction (city)
04-26-2007	Violate stop or yield sign	Infraction (city)
07-02-2005	Speeding 11-15 MPH	Infraction (state)

Her application is included for your review.

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



**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>		
OCT 23 2015		
<b>NEBRASKA LIQUOR CONTROL COMMISSION</b>		
Hot List: YES / <input checked="" type="radio"/> NO	New/Replacing #	078780
Class Type	CK	115428
		Initial bh

*TOP  
Approved*

Applicant name Marci Davison

Trade name Carmela's Bistro

Previous trade name Carmela's Bistro and Wine Bar

Contact email address Carmelasbistroandwinebar@yahoo.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.

*ph # 402-489-0005*

Office use only

PAYMENT TYPE \$400.00

AMOUNT: CK #5675

Received: bn



1500023751

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FORM 100  
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 (nonrefundable), 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 (LLC) making application. Lease term must run through the license year being applied for.
5.  If building is owned or being purchased send a copy of the deed or purchase agreement in the name of the applicant. *Building space - Leased*
6.  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.  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 (LLC) 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. - *operating business as is*

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**NEBRASKA LIQUOR  
CONTROL COMMISSION**

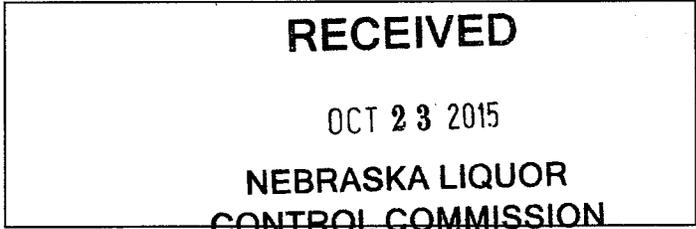
I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 60 days. Furthermore, I understand that all the information is truthful and I accept all responsibility for any false documents.

*Marcia R. Dawson*  
Signature

*9/14/15*  
Date

**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.nebraska.gov/



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

RETAIL LICENSE(S) Application Fee \$400 (nonrefundable)

- 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

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

*← No Catering App  
No Fee Pd*

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 Christian Fryzek (accountant) Phone number: 308-284-3777

Firm Name Dana F. Cole

Name: Neil Williams (attorney) phone: 308-284-8408

Firm Name: Lane & Williams PC LLO

**PREMISES INFORMATION**

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Trade Name (doing business as) Carmela's Bistro

OCT 23 2015

Street Address #1 4141 Pioneer Woods Dr. STE 110

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

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

City Lincoln County Lancaster Zip Code 68506

Premises Telephone number (402) 489-0005

Business e-mail address Carmelasbistroandwinebar@yahoo.com

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

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

Name Carmela's Bistro c/o Marci Davison

Street Address #1 4141 Pioneer Woods Dr.

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

City Lincoln State Ne Zip Code 68506

**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 premises consumption liquor licenses minimum standards must be met by providing at least two restrooms**

Building: length 90 x width 50 in feet

Is there a basement? Yes \_\_\_\_\_ No

If yes, length \_\_\_\_\_ x width \_\_\_\_\_ in feet

Is there an outdoor area? Yes  No \_\_\_\_\_

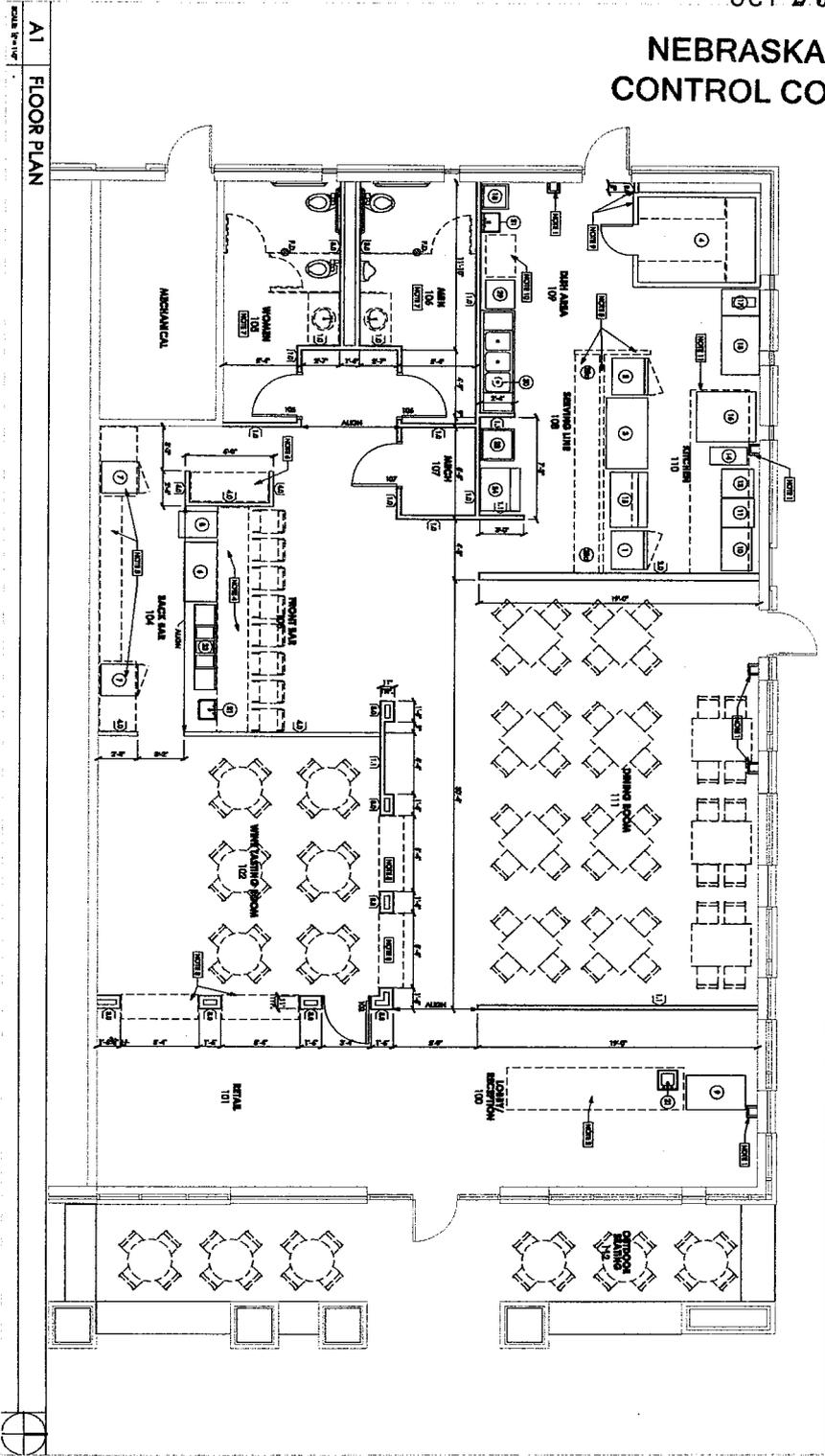
If yes, length 50 x width 12 in feet

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

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NEBRASKA LIQUOR CONTROL COMMISSION



**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 occur after the date of signing this application.

YES  NO

If yes, please explain below or attach a separate page

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**NEBRASKA LIQUOR**

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition
Marci Davison	05/2013	Lincoln, Ne	DUI	Plead guilty

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

YES  NO

If yes, give name of business and liquor license number

*Carmela's Bistro and Wine Bar*  
*Class C #078780*

- 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

*Carmela's Bistro and Wine Bar*  
*Class C #078780*

**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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**No silent partners**

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

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. \_\_\_\_\_

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.

Pinnacle Bank / Marci Davison

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.

078780

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.

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NLCC certified training program completed:

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Marci Davison		Hospitality Course

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
Marci Davison / G.M	6/1/2008	Carmela's 4141 Pioneer Woods Dr. Lincoln, Ne 68506

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 October 31, 2016  
 Deed \_\_\_\_\_  
 Purchase Agreement \_\_\_\_\_

14. When do you intend to open for business? Currently open + operating

15. What will be the main nature of business? dba Carmela's Bistro and Wine Bar

16. What are the anticipated hours of operation? Monday - Sunday 11:00am - 2pm + 5pm - 10p

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
Marci Davison Lincoln, Ne - 8445 Augusta Drive 68506	2008	2015			
- 7348 North 19th LINCOLN, Ne 68521	2005	2008			

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>

*Marci R. Davison*  
 \_\_\_\_\_  
 Signature of Applicant

*Marci R. Davison*  
 \_\_\_\_\_  
 Print Name

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

\_\_\_\_\_  
 Print Name

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**NEBRASKA LIQUOR  
 CONTROL COMMISSION**  
 \_\_\_\_\_  
 Signature of Spouse

\_\_\_\_\_  
 Print Name

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

\_\_\_\_\_  
 Print Name

ACKNOWLEDGEMENT

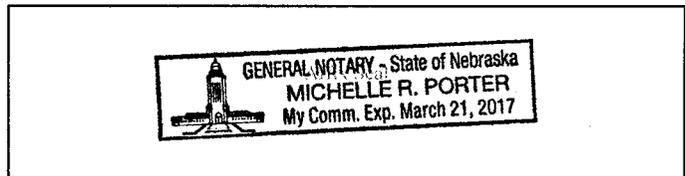
State of Nebraska  
 County of *Lancaster*

*October 23, 2015* by \_\_\_\_\_  
date

*Michelle Porter*  
 \_\_\_\_\_  
 Notary Public signature

The foregoing instrument was acknowledged before me this

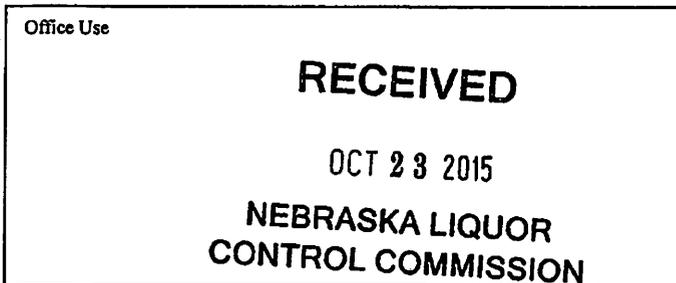
*Marci R. Davison*  
 \_\_\_\_\_  
 name of person(s) acknowledged (individual(s) signing)



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  
INDIVIDUAL  
INSERT - FORM 1**

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



**Individual applicants, including spouse, are required to adhere to the following requirements**

- 1) Must be a citizen of the United States
- 2) Must be a Nebraska resident (Chapter 2 - 006)
- 3) Must provide a copy of their certified birth certificate, INS papers or US Passport
- 4) Fingerprints are required. See Form 147 for further information, this form **MUST** be included with your application
- 5) Must sign the signature page of the Application for License form
- 6) Applicant may be required to take a training course
- 7) Be a registered voter in the State of Nebraska, include a copy of voter registration card with application

Name of individual applicant who will hold license:

Last Name: Davison

First Name: Marci MI: R.

Home Address: 8445 Augusta Dr. City: Lincoln Zip Code: 68526

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Telephone Number: 402-416-4692

Driver's License Number: \_\_\_\_\_ State: Ne

Are you married? (Please note if the above listed individual is separated, etc. spouse's information is still required to be listed below)

YES

NO

If yes, provide your spouse's information below

Spouses Last Name: \_\_\_\_\_

Spouses First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

**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.nebraska.gov

<b>RECEIVED</b> DATE RECEIVED  OCT 23 2015  NEBRASKA LIQUOR CONTROL COMMISSION Office Use Only	
Class: _____	License #: _____

Applicant Name:

*Marci Davison / Individual*

(Corporation, LLC, Partnership or Individual)

Trade Name:

*Carmela's Bistro*

(Doing Business As)

*(402) 489-0005*

Phone Number

*Carmela's bistro and wine bar@yahoo.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: Marci Davison Title: OWNER

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

**RECEIVED**

2. Name: \_\_\_\_\_ Title: \_\_\_\_\_

How was payment made to NSP?  NSP PAYPORT  CHECK SENT TO NSP **OCT 23 2015**

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

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

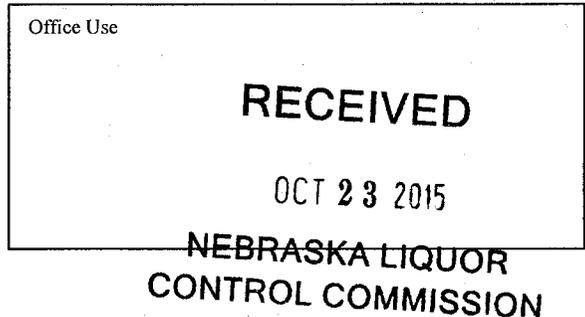
I hereby certify that fees of \$28.75 per person have been submitted directly to the Nebraska State Patrol – CID office. The undersigned certifies on behalf of the Corporation, LLC, Partnership or Licensee that it is understood that a misrepresentation of fact is cause for rejection of this application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

Name (Print): Marci Davison Title: OWNER

Signature: Marci Davison Date: 10/23/15

**APPLICATION FOR TEMPORARY OPERATING PERMIT (TOP)**

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



- Application for a temporary operation permit (TOP) must be included with the application for liquor license. TOP will not be considered without the completed application for a liquor license.
- Enclose documentation showing sale of business; document may be in the form of a purchase agreement/contract, management agreement or promissory note. Sale of business document must include the following: name of business being sold, purchase date or closing date within 2-3 weeks of requesting TOP and must be signed by the seller and buyer.
- TOP's are valid for 90 days from date of issuance and cannot be extended past the expiration date (no exceptions).
- Seller's liquor license will terminate upon issuance of the TOP.
- If the seller's liquor license is up for renewal during the TOP it will not be necessary for the seller to renew.

NAME OF CURRENT LICENSEE (SELLER):

SELLER'S LICENSE #:

*Carmela's Bistro + Wine Bar llc.*

*078780*

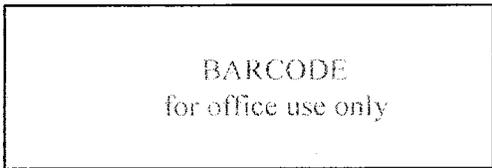
On (date) *Oct. 21, 2015* seller and buyer entered into a contract for sale of the

business known as (TRADE NAME):

*Carmela's Bistro + Wine Bar llc.*

Buyer seeks to obtain a temporary operating permit (TOP) to allow buyer to operate the business under the same terms and conditions of the current licensee; subject to approval by the Nebraska Liquor Control Commission (NLCC) for a period not to exceed 90 days (no exceptions).

Seller hereby declares that they are current on all accounts with all Nebraska licensed wholesalers under section §53-123.02. Any seller who provides false information regarding such accounts is guilty of a Class IV misdemeanor for each offense.



St L Davison  
Signature of **SELLER**

Marci R Davison  
Signature of **BUYER**

Steven L. DAVISON Mbl. LLC  
Print Name

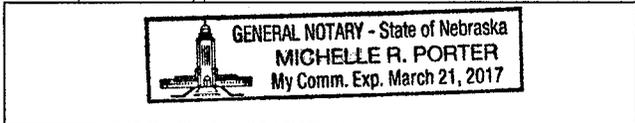
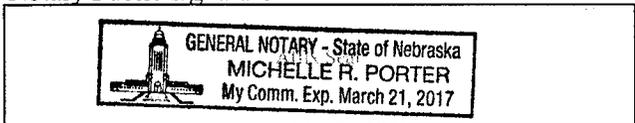
Marci R. DAVISON  
Print Name

State of Nebraska, County of Lancaster  
The foregoing instrument was acknowledged before me  
this October 23, 2015 (date)  
by Steven L. Davison  
Name(s) of Person(s) Acknowledged [individual(s) signing document]

State of Nebraska, County of Lancaster  
The foregoing instrument was acknowledged before me  
this October 23, 2015 (date)  
by Marci R. Davison  
Name(s) of Person(s) Acknowledged [individual(s) signing document]

Michelle Porter  
Notary Public signature

Michelle Porter  
Notary Public signature



ADMINISTRATIVE REVIEW – Office use only

Date: 10/26/15 Rep: JM Application Number: 113428

Approved \_\_\_\_\_  Denied \_\_\_\_\_

Reason for Denial:

\_\_\_\_\_

\_\_\_\_\_

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OCT 23 2015  
NEBRASKA LIQUOR CONTROL COMMISSION

**RECEIVED**  
OCT 23 2015  
NEBRASKA LIQUOR CONTROL COMMISSION

# Temporary Operating Permit

Nebraska Liquor Control Commission

**15 – 428**

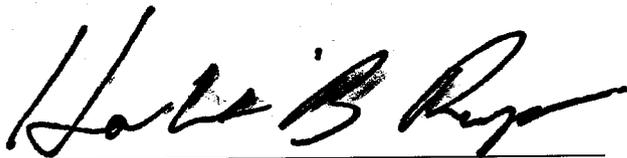
**Class C**

Issued: 10/27/2015 – Expires: 1/25/2016

Marci Davison

DBA: Carmela's Bistro, 4141 Pioneer Woods Drive, Ste 110,  
Lincoln, NE 68506

Description: One story building approx 71' x 170' including side café  
approx 10' x 44'



Hobert B Rupe - Executive Director  
Nebraska Liquor Control Commission  
301 Centennial Mall South, 5<sup>th</sup> Floor  
Lincoln, NE 68509  
(402) 471 – 2571



**\* NO EXTENSIONS OF THIS PERMIT WILL BE ALLOWED\***