

November 24, 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 D&S Operations, LLC, DBA Cigarz Lounge, 800 Q Street, Suite 102, requesting that Sandra McCorkindale be approved as the manager of the class C-114760 liquor license.

D&S Operations, LLC Corporate Officers/Stockholders/Members:

Member 1: Sandra McCorkindale – President (50%)
Member 2: Scott Greiman – Member (25%)
Member 3: Randall Robeson – Member (13%)
Member 4: Susan Robeson – Member (12%)

Susan Robeson, a corporate member and licensee, completed the required management training on October 8, 2015.

Sandra McCorkindale's driver and criminal history is as follows:

01-18-2006	DUI aggravated/2 nd offense	Misdemeanor
02-13-2003	DUI-1st offense	Misdemeanor
01-20-2005	Stop sign violation	Infraction
11-04-1995	Speeding 16-20 MPH over	Infraction

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



A nationally accredited law enforcement agency



**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.nebraska.gov

Office Use
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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

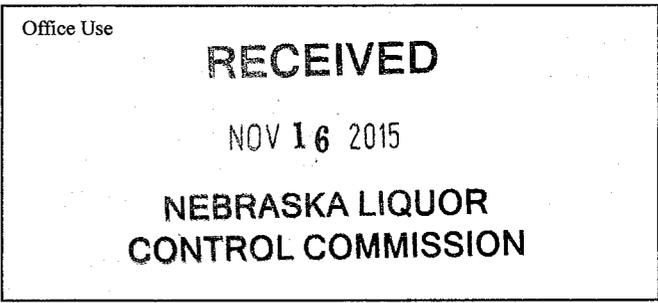
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MUST BE:

- ✓ **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: D&S Operations LLC

Premise information

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

Premise Trade Name/DBA: Cigarz Lounge

Premise Street Address: 800 Q Street Suite 102

City: Lincoln County: Lancaster Zip Code: 68508

Premise Phone Number: _____

Email address: samccorkindale@smithfield.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

Last Name: McCorkindale First Name: Sandra MI: K
 Home Address (include PO Box if applicable): 1906 Gunnison
 City: Lincoln County: Lancaster Zip Code: 68521
 Home Phone Number: 402-750-8045 Business Phone Number: _____
 Social Security Number: _____ Drivers License Number & State: _____
 Date Of Birth: _____ Place Of Birth: Wayne, Nebraska
 Email address: samccorkindale@smithfield.com

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

YES NO

Spouse's information:

Spouses Last Name: Warneke First Name: David MI: R
 Social Security Number: _____ Drivers License Number & State: _____
 Date Of Birth: _____ Place Of Birth: Osmond

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
Lincoln, Nebraska	2005	Present	Lincoln	2005	Present

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MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2009	Present	Smithfield Foods	Lynette Marshall	402-475-6700
2005	2009	Three Eagles Communications	Jim Keck	402-466-1234

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.

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
Sandra McCorkindale	06/2003	Norfolk, Nebraska	DUI	Guilty
Sandra McCorkindale	05/2005	Lincoln, Nebraska	DUI	Guilty
Sandra McCorkindale	???	???	<small>Traffic violations that are not listed on DMV or can remember</small>	Guilty

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):

Benjamin Express - Norfolk NE (ABC Texaco Inc)
 Riverside Express - Norfolk NE
 Branched Oak Sandbar Reymond NE
 Huskerville Pub + Pizza Lincoln

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

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

*NLCC Training Certificate Issued: #RB-0047372 Name on Certificate: Sandy McCorkindale

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Sandra McCorkindale	06/2015	Responsible Beverage Service Training
Sandra McCorkindale	06/2015	Lincoln Server/Seller Permit #LNK 0047432
Sandra McCorkindale	06/2015	Serve Clean #SC-1044343

*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:
Sandra McCorkindale	1995-2005	Eagles Club Norfolk, Nebraska
Sandra McCorkindale	2006-2010	Luckies Lounge, Lincoln Nebraska
Sandra, McCorkindale	2010-2012	Branched Oak Lake Sandbar (owner)
Sandra McCorkindale	2013-Present	Huskerville Pub and Pizza (owner)

5. Have you enclosed Form 147 regarding fingerprints?

YES NO

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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.

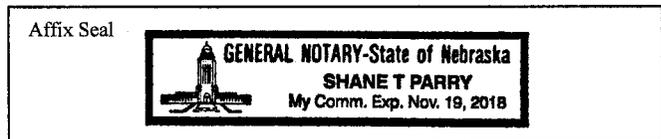
Sandra K. McCorKendale
Signature of Manager Applicant

D E W
Signature of Spouse

ACKNOWLEDGEMENT

State of Nebraska
County of LANCASTER The foregoing instrument was acknowledged before me this
11-13-15 date by SANDRA McCorKendale and David Warnerke name of person acknowledged

Sh T P
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.

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