

**AGENDA OF THE REGULAR MEETING OF THE
ALCOHOL, GAMBLING & TOBACCO COMMISSION**

Replacement
April 1, 2015

The regular meeting of the Alcohol, Gambling & Tobacco Commission will be held on Wednesday, April 1, 2015, at 4:45 p.m., in the City Council Chambers, 3rd Floor, City Hall.

Roll Call: Lindsay Bartholomew-Kolu, Dennis Birchland, Bjorn Braaten, Bryn Pollard, Jeff Rosenthal, Chris Pekkala, President Stauber

***ANYONE WHO HAS BUSINESS BEFORE THIS
BOARD SHOULD MAKE PLANS TO ATTEND***

LAWFUL GAMBLING:

Essentia Health Foundation

60 day waiver - raffle exemption

NEW BUSINESS:

MARSHALL SCHOOL, 1215 RICE LAKE ROAD - APPLICATION FOR A TEMPORARY ON SALE INTOXICATING LIQUOR LICENSE FOR MAY 2, 2015, WITH BETH TESSIER, MANAGER.

GRANDMA'S MARATHON - DULUTH, INC, CANAL PARK DRIVE AND BUCHANAN ST, - APPLICATION FOR A TEMPORARY ON SALE INTOXICATING LIQUOR LICENSE AND TEMPORARY ON SALE DANCING LICENSE FOR JUNE 19-21, 2015, WITH LINDA HANSON, MANAGER.

LOY KRATHONG, INC. (SALA THAI RESTAURANT) 114 WEST 1ST ST. - APPLICATION FOR A NEW ON SALE 3.2 PERCENT MALT LIQUOR LICENSE FROM 4023 WOODLAND AVE. TO 114 WEST 1ST STREET EAST FOR THE PERIOD BEGINNING MAY 1, 2015, AND ENDING APRIL 30, 2016, WITH SUMLEE BEEDE 100% OWNER.

27 LIQUORS, LLC (27 LIQUORS), 2700 WEST MICHIGAN STREET - APPLICATION FOR TRANSFER OF THE OFF SALE INTOXICATING LIQUOR LICENSE FROM CITY WINE & LIQUOR STORE, INC. (WAREHOUSE LIQUOR STORE), 104 WEST CENTRAL ENTRANCE FOR THE PERIOD ENDING AUGUST 31, 2015, TRANSFERRED TO 27 LIQUORS, LLC (27 LIQUORS), 2700 WEST MICHIGAN STREET, WITH THOMAS STENDER, 50% OWNER AND CHRISTOPHER PRILEY, 50% OWNER.

RENEWAL OF THE OFF SALE 3.2 PERCENT MALT LIQUOR LICENSE APPLICATIONS FOR THE PERIOD BEGINNING MAY 1, 2015, AND ENDING APRIL 30, 2016.

RENEWAL OF THE ON SALE 3.2 PERCENT MALT LIQUOR LICENSE RENEWALS FOR THE PERIOD BEGINNING MAY 1, 2015, AND ENDING APRIL 30, 2016.

RENEWAL APPLICATION FOR THE CONSUMPTION AND DISPLAY LICENSE OF THE DULUTH WOMAN'S CLUB FOR THE PERIOD BEGINNING APRIL 1, 2015, AND ENDING APRIL 30, 2016.

LG220 Application for Exempt Permit

An exempt permit may be issued to a nonprofit organization that: <ul style="list-style-type: none"> • conducts lawful gambling on five or fewer days, and • awards less than \$50,000 in prizes during a calendar year. If total prize value for the year will be \$1,500 or less, contact the Licensing Specialist assigned to your county.	<p style="text-align: center;">Application fee (nonrefundable)</p> If the application is postmarked or received 30 days or more before the event, the application fee is \$50 ; otherwise the fee is \$100 .
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Organization Information

Organization Name: Essentia Health Foundation	Previous Gambling Permit Number: X-92583-14-008
Minnesota Tax ID Number, if any: 27-1984704	Federal Employer ID Number (FEIN), if any:

Type of Nonprofit Organization (check one):

Fraternal
 Religious
 Veterans
 Other Nonprofit Organization

Mailing Address: 400 E. 3rd St.	City: Duluth	State and Zip: MN 55805	County: St. Louis
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Name of Chief Executive Officer (CEO): Steve Yorde	Daytime Phone: 218-786-8853	Email: steve.yorde@essentiahe
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Nonprofit Status

steve.yorde@essentiahealth.org

Attach a copy of ONE of the following for proof of nonprofit status:

- Nonprofit Articles of Incorporation OR a current Certificate of Good Standing.**
 Don't have a copy? This certificate must be obtained each year from:
 Minnesota Secretary of State
 Business Services Division
 60 Empire Drive, Suite 100
 St. Paul, MN 55103
 Phone: 651-296-2803
- IRS income tax exemption (501(c)) letter in your organization's name.**
 Don't have a copy? To obtain a copy of your federal income tax exempt letter, have an organization officer contact the IRS at 877-829-5500.
- IRS - Affiliate of national, statewide, or international parent nonprofit organization (charter).**
 If your organization falls under a parent organization, attach copies of **both** of the following:
 - a. an IRS letter showing your parent organization is a nonprofit 501(c) organization with a group ruling, and
 - b. the charter or letter from your parent organization recognizing your organization as a subordinate.

Gambling Premises Information

Name of premises where the gambling event will be conducted (for raffles, list the site where the drawing will take place):
Essentia Health-St. Mary's Medical Center Auditorium

Address (do not use PO box): 407 E 3rd St	City or Township: Duluth	Zip Code: 55805	County: St. Louis
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Date(s) of activity (for raffles, indicate the date of the drawing):

April 29, 2015

Check each type of gambling activity that your organization will conduct:

Bingo*
 Paddlewheels*
 Pull-Tabs*
 Tipboards*
 Raffle (**total value of raffle prizes awarded for the year: \$1500**)

***Gambling equipment** for bingo paper, paddlewheels, pull-tabs, and tipboards must be obtained from a distributor licensed by the Minnesota Gambling Control Board. EXCEPTION: Bingo hard cards and bingo number selection devices may be borrowed from another organization authorized to conduct bingo.

To find a licensed distributor, go to www.mn.gov/gcb and click on **Distributors** under the **LIST OF LICENSEES**, or call 651-539-1900.

Local Unit of Government Acknowledgment

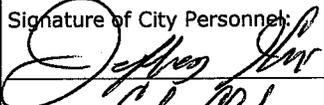
**CITY APPROVAL
for a gambling premises
located within city limits**

The application is acknowledged with no waiting period.

The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days (60 days for a 1st class city).

The application is denied.

Print City Name: Duluth

Signature of City Personnel: 

Title: City Clerk Date: 3/9/15

Local unit of government must sign.

**COUNTY APPROVAL
for a gambling premises
located in a township**

The application is acknowledged with no waiting period.

The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days.

The application is denied.

Print County Name: _____

Signature of County Personnel: _____

Title: _____ Date: _____

TOWNSHIP (if required by the county).

On behalf of the township, I acknowledge that the organization is applying for exempted gambling activity within the township limits. (A township has no statutory authority to approve or deny an application, per Minn. Statutes, section 349.166.)

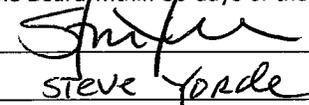
Print Township Name: _____

Signature of Township Officer: _____

Title: _____ Date: _____

Chief Executive Officer's Signature

The information provided in this application is complete and accurate to the best of my knowledge. I acknowledge that the financial report will be completed and returned to the Board within 30 days of the event date.

Chief Executive Officer's Signature:  Date: 3-5-15

Print Name: Steve Yorde

Requirements

Complete a separate application for:

- all gambling conducted on two or more consecutive days, or
- all gambling conducted on one day.

Only one application is required if one or more raffle drawings are conducted on the same day.

Send application with:

_____ a copy of your proof of nonprofit status, and

_____ application fee (nonrefundable). If the application is postmarked or received 30 days or more before the event, the application fee is \$50; otherwise the fee is \$100. Make check payable to **State of Minnesota**.

To: Gambling Control Board
1711 West County Road B, Suite 300 South
Roseville, MN 55113

Financial report and recordkeeping required.

A financial report form and instructions will be sent with your permit, or use the online fill-in form available at www.mn.gov/gcb.

Within 30 days of the event date, complete and return the financial report form to the Gambling Control Board. Your organization must keep all exempt raffle records and reports for 3-1/2 years (Minn. Statutes, section 349.166, subd. 2(f)).

Questions?

Call the Licensing Section of the Gambling Control Board at 651-539-1900.

This form will be made available in alternative format (i.e. large print, Braille) upon request.

Data privacy notice: The information requested on this form (and any attachments) will be used by the Gambling Control Board (Board) to determine your organization's qualifications to be involved in lawful gambling activities in Minnesota. Your organization has the right to refuse to supply the information; however, if your organization refuses to supply this information, the Board may not be able to determine your organization's qualifications and, as a consequence, may refuse to issue a permit. If your organization supplies the information requested, the Board will be able to process the application. Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the permit. When the Board issues the permit, all information provided will become public. If the Board does not issue a permit, all information provided remains private, with the exception of your organization's name and address which will remain public. Private data about your organization are available to Board members, Board staff whose work requires access to the information; Minnesota's Department of Public Safety; Attorney General; Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislative Auditor, national and international gambling regulatory agencies; anyone pursuant to court order; other individuals and agencies specifically authorized by state or federal law to have access to the information; individuals and agencies for which law or legal order authorizes a new use or sharing of information after this notice was given; and anyone with your written consent.



CITY OF DULUTH
CITY CLERK'S OFFICE
 330 City Hall • 411 West First Street
 Duluth, Minnesota 55802-1189
 Phone (218) 730-5500
 Fax (218) 730-5923

FOR OFFICE USE ONLY	
DATE	<u>3-25-2016</u>
LICENSE #	<u>760171</u>

Type in your information by tabbing through the boxes below. Print all applications, sign and submit to the address listed above.

LICENSE APPLICATION

LICENSE	FEE
TEMPORARY ON SALE LIQUOR - 1ST DAY/EVENING =	\$298.00
PLUS \$148.00 EACH ADDITIONAL DAY/EVENING =	\$
TOTAL	\$298.00

LICENSEE CORP NAME/BUSINESS ADDRESS:
Marshall School
1215 Rice Lake Road
Duluth, MN 55811

D/B/A or TRADE NAME: Marshall School

CELL OR BUSINESS PHONE NO. 218-727-7266

MANAGER'S NAME & ADDRESS & PHONE #
Beth Tessier, Chief Financial Officer
Marshall School, 1215 Rice Lake Road
Duluth, MN 55811 218-727-7266

OWNER OF BUSINESS PREMISES:
Marshall School

LICENSE PERIOD: Saturday, May 2, 2015

I HEREBY STATE THAT ALL INFORMATION HERE IS TRUE AND CORRECT AND THAT I SHALL COMPLY WITH ALL PROVISION OF THE ORDINANCES OF THE CITY OF DULUTH AND LAWS OF THE STATE OF MINNESOTA AND THEIR AMENDMENTS.


 Signature of Applicant

MAILING ADDRESS:
Beth Tessier, CFO
Marshall School, 1215 Rice Lake Road
Duluth, MN 55811

EMAIL: btessier@marshallschool.org

Would you like notifications via email? YES NO



CITY OF DULUTH SUPPLEMENTAL FORM

Additional information is being required by the Duluth Police Department. An incomplete application will result in the delay or rejection of your application.

1. Is this the first time for this event?

Yes No

If No, how many people attended this event

320

If Yes, how many people are you expecting to attend?

350

2. What kind of advertisement have you done? _____

Facebook, invitations, email, posters

3. What is the age of the target group for this event?

35-75

4. Will alcohol be sold or given away at this event?

yes

5. Will dancing be allowed at this event?

yes

I understand that as the applicant for this permit/license, I am responsible for the Police/Security for this event. I will provide proof of hired security two weeks prior to the scheduled event.

Applicant Signature

3/24/15
Date

For office use only

Is a licensed Peace Officer needed for this event? _____

If yes, how many licensed peace officers will be required? _____



CITY OF DULUTH
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 330 City Hall • 411 West First Street
 Duluth, Minnesota 55802-1189
 Phone (218) 730-5500
 Fax (218) 730-5923

FOR OFFICE USE ONLY	
DATE	<u>3-10-2015</u>
LICENSE #	<u>760770</u>

Type in your information by tabbing through the boxes below. Print all applications, sign and submit to the address listed above.

LICENSE APPLICATION

LICENSE	FEE
TEMPORARY ON SALE LIQUOR - 1ST DAY/EVENING =	\$298.00
PLUS \$148.00 EACH ADDITIONAL DAY/EVENING =	\$ 296.00
<i>x(2)</i> TOTAL	\$ 594.00

LICENSEE CORP NAME/BUSINESS ADDRESS:
Grandma's Marathon - Duluth, Inc.
PO Box 16234
Duluth, MN 55816-0234

D/B/A or TRADE NAME: Grandma's Marathon

CELL OR BUSINESS PHONE NO. 218 727 0947

MANAGER'S NAME & ADDRESS & PHONE #
Linda Hanson
PO Box 16234
Duluth, MN 55816-0234

OWNER OF BUSINESS PREMISES:
Grandma's, Inc.
ETOR
DEDA

LICENSE PERIOD: FRIDAY - 6/19/15
SATURDAY - 6/20/15
SUNDAY - 6/21/15

I HEREBY STATE THAT ALL INFORMATION HERE IS TRUE AND CORRECT AND THAT I SHALL COMPLY WITH ALL PROVISION OF THE ORDINANCES OF THE CITY OF DULUTH AND LAWS OF THE STATE OF MINNESOTA AND THEIR AMENDMENTS.

Linda Hanson
 Signature of Applicant

MAILING ADDRESS:



Grandma's Marathon | PO Box 16234 | Duluth, MN 55816

EMAIL: linda@grandmasmarathon.com

Would you like notifications via email? YES NO



CITY OF DULUTH
CITY CLERK'S OFFICE
 330 City Hall 411 West First Street
 Duluth, Minnesota 55802-1189
 Phone (218) 730-5500
 Fax (218) 730-5923

FOR OFFICE USE ONLY
 DATE 3-10-2015
 LICENSE # 760170

GOVERNMENT DATA PRACTICES ACT - CLASSIFICATION WARNING: The data you supply on this form will be used to process the license you are applying for. You are not legally required to provide this data, but we will not be able to process the license without it. Some of the data will be classified as public data if and when the license is granted. Private financial information including a tax identification number and social security number are classified as private data and will be available to governmental personnel and other governmental agencies whose access is necessary to perform their official duties.

LICENSE APPLICATION

LICENSE	FEE
DANCE (with a liquor license)	SEE BELOW: \$ <u>357⁰⁰</u>

LICENSEE BUSINESS NAME & ADDRESS
 (Corporation/Individual/Partnership)
GRANDMA'S MARATHON, DULUTH, INC.
PO BOX 16234
DULUTH MN 55816.0234

TRADE NAME: GRANDMA'S MARATHON
BUSINESS PHONE: 218 727 0947

MANAGER'S NAME/ADDRESS/PHONE NO.
LINDA HANSON
PO BOX 16234
DULUTH MN 55816.0234

OWNER OF BUSINESS PREMISES:
ETOR
DEDA

LICENSE PERIOD: FRIDAY - 6/19/15
SATURDAY - 6/20/15
SUNDAY - 6/21/15

- 1. Annual dance - Sept. 1 - Aug 31st @ \$1,130.00
- 2. One day/evening per day (3) @ \$119.00 = \$ 357.00
- 3. Seasonal - May 1 - August 31st @ \$386.00

I HEREBY STATE THAT ALL INFORMATION HERE IS TRUE AND CORRECT AND THAT I SHALL COMPLY WITH ALL PROVISION OF THE ORDINANCES OF THE CITY OF DULUTH AND LAWS OF THE STATE OF MINNESOTA AND THEIR AMENDMENTS.

Linda Hanson
 Signature of Applicant
 FINANCE & OPER. DIR.
 GRANDMA'S MARATHON, DULUTH, INC.

MAILING ADDRESS



Date of Application _____

License No. _____

TEMPORARY ON SALE LIQUOR (GRAPH)

*Owner: GRANDMA'S MARATHON DULUTH INC (d/b/a) *Trade Name: GRANDMA'S MARATHON

*Date of Event: 6/19/15 6/20/15 6/21/15 Address PO BOX 16234 DULUTH MN 55816-0234

*Name of Event: GRANDMA'S MARATHON *Time of Event: FRI. 6/19 7PM - 2AM

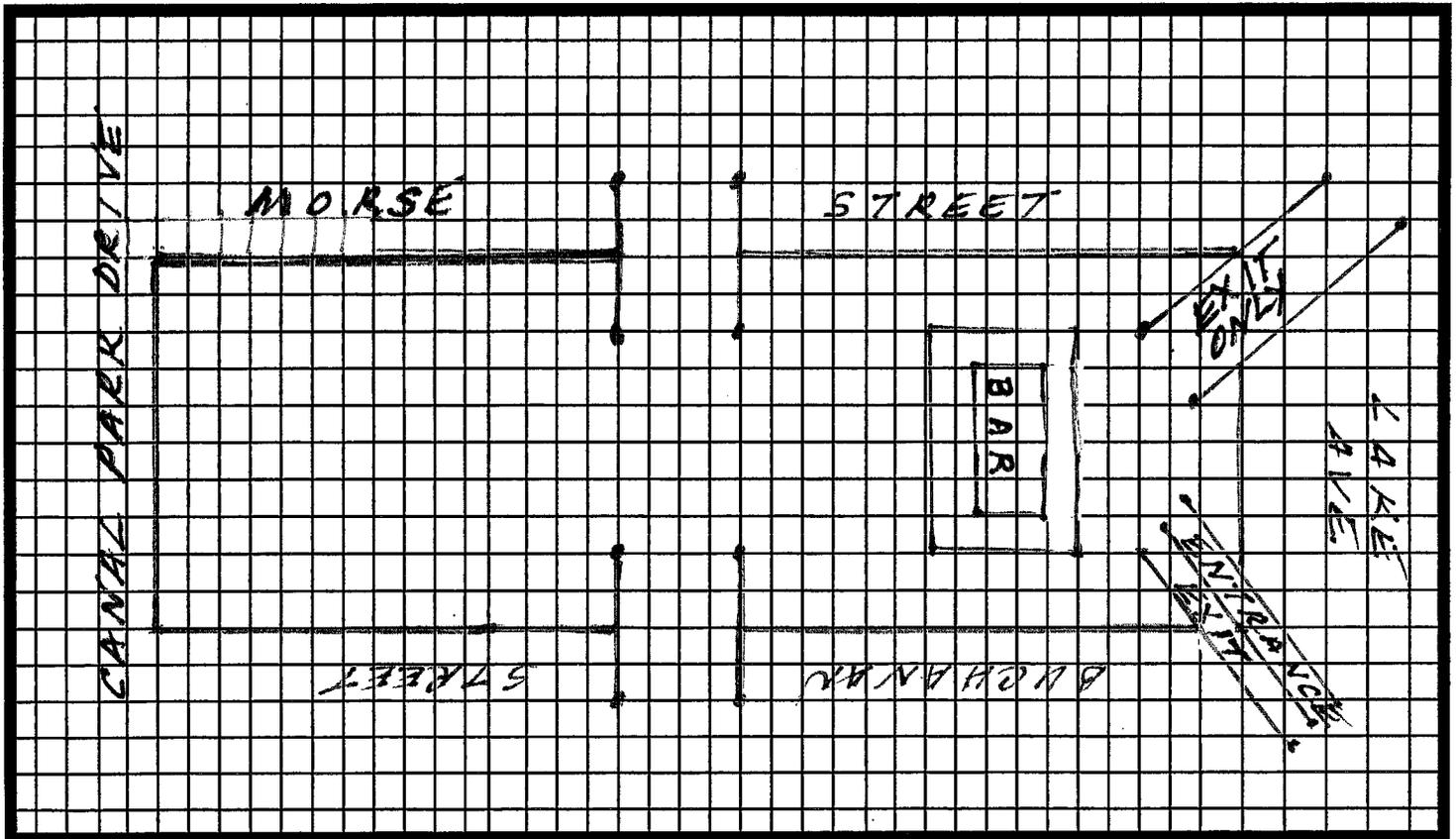
*Security Personnel: DULUTH POLICE DEPT. & FUND DU LAC LAW ENFORCEMENT *Firm: SAT. 6/20 8AM - 12PM

SUN. 6/21 12:01AM - 2AM

DIAGRAM MUST SHOW: STUDENTS

- A. Area that will be used.
- B. Streets and intersections bordering the area.
- C. Where fencing surrounding the area will be located and what type of fencing will be used. (Snow fence is preferred.)
- D. Where the bar will be located in the "serving area".
- E. Exits and entries to and from the "serving area".

Sketch location and dimensions of area to be occupied. Indicate north on diagram. (NORTH)



I hereby agree that I shall comply with all of the ordinances of the City of Duluth and laws of the State of MN and their amendments. I further agree to comply with any special restrictions which may be imposed by resolution of the Duluth City Council and not to allow any services, or consumption outside fo the approved "designated serving area" identified here.

Linda Hudson
LINDA HUDSON - FINANCE & OPER. DIR



CITY OF DULUTH
CITY CLERK'S OFFICE
 330 City Hall | 411 West First Street
 Duluth, Minnesota 55802-1189
 Phone (218) 730-5500
 Fax (218) 730-5923

FOR OFFICE USE ONLY

DATE 3-25-2015

LICENSE # 760009

Due:
Mar 25

LICENSE APPLICATION

GOVERNMENT DATA PRACTICES ACT - CLASSIFICATION WARNING: The data you supply on this form will be used to process the license you are applying for. You are not legally required to provide this data, but we will not be able to process the license without it. Some of the data will be classified as public data if and when the license is granted. Private financial information including a tax identification number and social security number are classified as private data and will be available to governmental personnel and other governmental agencies whose access is necessary to perform their official duties.

LICENSE

ON SALE BEER
 INVESTIGATION FEE (ONE TIME)

FEE

\$ 476.00
42.00
TOTAL \$ 518.00

LICENSEE BUSINESS NAME/ADDRESS
 (individual/corporation/partnership)

Loy Krothong Inc.
114 West 1st St.
Duluth, MN 55802

TRADE NAME: Sala Thai

BUSINESS PHONE: _____

OWNER & ADDRESS OF BUSINESS PREMISES:

MANAGER'S NAME, ADDRESS, PHONE

Sumlee Beede
2322 Lochaire Ave.
Duluth, MN 55803

LICENSE PERIOD: Ending April 30

MISC: A corresponding Dancing License is an additional - \$980.00

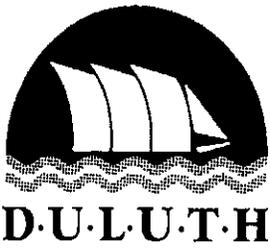
I HEREBY STATE THAT ALL INFORMATION HERE IS TRUE AND CORRECT AND THAT I SHALL COMPLY WITH ALL PROVISION OF THE ORDINANCES OF THE CITY OF DULUTH AND LAWS OF THE STATE OF MINNESOTA AND THEIR AMENDMENTS.

Sumlee Beede
 Signature of Applicant

MAILING ADDRESS:

2322 Lochaire Ave
Duluth, MN 55803

PLAT/PARCEL: _____
 (If known)



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CITY CLERK'S OFFICE
330 City Hall
411 West First Street
Duluth, Minnesota 55802-1189
Phone (218) 730-5500
Fax (218) 730-5923

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

1. Name of Applicant (**individual, partnership or corporation or association**) that owns the business to be licensed: Loy Krothong Inc.
2. Trade Name: Sala Thai
3. Address of place to be licensed: 114 West First St, Duluth, MN 55803.
4. Designated Serving Areas (i.e. ground floor, second, deck, etc.) Ground Floor
5. Name and address of owner of building: Sumlee Beede & Tony Gray
Any connection with applicant? Son Who receives the rent: Tony Gray
6. Who will direct the operation of the business or serve as manager on the premises? List name, address & title:
Sumlee Beede
- 7.. If partnership, give name of each partner and percent of ownership, and if limited partnership, give details:
Sumlee Beede 100% Owner
8. If corporation, list all stockholders, directors, officers and percent of stock or number of shares owned by each:
None
9. State approximate distance of this establishment from nearest academy, college, university, church or school:
None
10. State whether any consideration, money or property, has been paid, or will be paid, given, exchanged or pledged, by anyone, and to whom, for the purchase or operation of this business: State the amounts in detail:
No

Failure to answer all questions truthfully on this application and attached "Exhibit A" which is made a part thereof, will be just cause for revocation of your license.

I (we) hereby certify that the applicant will be the sole owner and operator of this business to be conducted under the license and I (we) will notify the City Council in writing of any change in ownership in this business before the change is made, for the approval of the Alcohol Gambling & Tobacco Commission and City Council. I (we) have read the foregoing questions, and answers to said questions are true of my knowledge. I (we) will comply with all the provisions of the Alcoholic Beverage Code and the laws and regulations and their amendments.

Signature: Sumlee Beede Date: 3-24-15

Signature: _____ Date: _____



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 330 City Hall | 411 West First Street
 Duluth, Minnesota 55802-1189
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 Fax (218) 730-5923

FOR OFFICE USE ONLY
 DATE 3-25-2015
 LICENSE # 759970

LICENSE APPLICATION

LICENSE

OFF SALE LIQUOR TRANSFER
LEVEL 4 INVESTIGATION FEE (ONE TIME)

FEE

\$351.00
206.00
Total \$557.00

LICENSEE NAME/ADDRESS/PHONE NO.

27 Liquors, LLC
2700 West Michigan Street, Duluth, MN 55806

TRADE NAME: 27 Liquors, LLC

BUSINESS PHONE: TBD

MANAGER'S NAME/ADDR/PHONE NO.

Andrew Rootes
113 Morley Parkway
Duluth, MN 55803

OWNER OF BUSINESS PREMISES:

2700 West, LLC
2700 West Michigan Street
Duluth, MN 55806

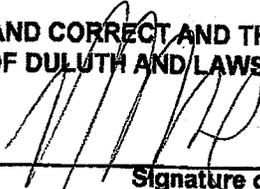
LIQUOR: PLAT/PARCEL: _____

LICENSE PERIOD: 9/1 - 8/31/

TRANSFERRED FROM:

Randy Mallow/Warehouse Liquor Store

I HEREBY STATE THAT ALL INFORMATION HERE IS TRUE AND CORRECT AND THAT I SHALL COMPLY WITH ALL PROVISION OF THE ORDINANCES OF THE CITY OF DULUTH AND LAWS OF THE STATE OF MINNESOTA AND THEIR AMENDMENTS.



Signature of Applicant

MAILING ADDRESS:

c/o Hanft Frise, PA
1000 US Bank Place
Duluth



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330 City Hall
411 West First Street
Duluth, Minnesota 55802-1189
Phone (218) 730-5500
Fax (218) 730-5923

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

1. Name of Applicant (individual, partnership or corporation or association) that owns the business to be licensed: 27 Liquors, LLC
2. Trade Name: _____
3. Address of place to be licensed: 2700 West Michigan Street, Duluth, MN 55808
4. Designated Serving Areas (i.e. ground floor, second, deck, etc.) _____
5. Name and address of owner of building: 2700 West, LLC
Any connection with applicant? Yes Who receives the rent: _____
6. Who will direct the operation of the business or serve as manager on the premises? List name, address & title:
Andrew Rootes, 113 Morely Parkway, Duluth, MN 55803
7. If partnership, give name of each partner and percent of ownership, and if limited partnership, give details:
N/A
8. If corporation, list all stockholders, directors, officers and percent of stock or number of shares owned by each:
Thomas Stender - 50%
Christopher Priley - 50%
9. State approximate distance of this establishment from nearest academy, college, university, church or school:
.3 miles
10. State whether any consideration, money or property, has been paid, or will be paid, given, exchanged or pledged, by anyone, and to whom, for the purchase or operation of this business. State the amounts in detail: \$10,000 for license presently attached to 104 West Central Entrance, Duluth, MN

Failure to answer all questions truthfully on this application and attached "Exhibit A" which is made a part thereof, will be just cause for revocation of your license.

I (we) hereby certify that the applicant will be the sole owner and operator of this business to be conducted under the license and I (we) will notify the City Council in writing of any change in ownership in this business before the change is made, for the approval of the Alcohol Gambling & Tobacco Commission and City Council. I (we) have read the foregoing questions, and answers to said questions are true of my knowledge. I (we) will comply with all the provisions of the Alcoholic Beverage Code and the laws and regulations and their amendments.

Signature: Thomas C. Stender

Date: 3/23/15

Signature: _____

Date: _____

City of Duluth
Off Sale Beer
 From Date 05/01/2015 To Date 04/30/2016

Licensee/ License For	Service Address	License Number	Renewal Number	Effective Date Range	Status	License Charges
License Type: L-Off Sale Beer						
RJD HOLDINGS, INC. EXPRESSTOP SPUR	4701 E Superior ST DULUTH, MN 55804	759368	2015-00000011	05/01/2015 04/30/2016	Active	\$154.00
HOLIDAY STATIONSTORES INC HOLIDAY #27	200 S BOUNDARY AVE DULUTH, MN 55810	759352	2015-00000002	05/01/2015 04/30/2016	Active	\$154.00
HOLIDAY STATIONSTORES INC HOLIDAY #293	5430 GRAND AVE DULUTH, MN 55807	759351	2015-00000003	05/01/2015 04/30/2016	Active	\$154.00
HOLIDAY STATIONSTORES INC HOLIDAY #327	2605 London RD DULUTH, MN 55812	759350	2015-00000012	05/01/2015 04/30/2016	Active	\$154.00
KWIK TRIP, INC KWIK TRIP #218	4215 GRAND AVENUE DULUTH, MN 55807	759390	2015-00000017	05/01/2015 04/30/2016	Active	\$154.00
KWIK TRIP, INC KWIK TRIP #224	2715 W MICHIGAN ST DULUTH, MN 55806	759389	2015-00000016	05/01/2015 04/30/2016	Active	\$154.00
C & B Warehouse Distributing, Inc. Lakeside Short Stop	5402 E Superior St Duluth, MN 55804	759388	2015-00000015	05/01/2015 04/30/2016	Active	\$154.00
VERHEL ENTERPRISES, INC MILK HOUSE	2703 PIEDMONT AVE DULUTH, MN 55811	759327	2015-00000013	05/01/2015 04/30/2016	Active	\$154.00
MINER'S, INC SUPER ONE FOODS	5300 Bristol ST DULUTH, MN 55807	759362	2015-00000014	05/01/2015 04/30/2016	Active	\$154.00
MINER'S, INC SUPER ONE FOODS	5401 BURNING TREE RD DULUTH, MN 55811	759361	2015-00000008	05/01/2015 04/30/2016	Active	\$154.00
MINER'S, INC SUPER ONE FOODS #455	5928 E Superior ST DULUTH, MN 55804	759366	2015-00000009	05/01/2015 04/30/2016	Active	\$154.00

City of Duluth
Off Sale Beer

From Date 05/01/2015 To Date 04/30/2016

Licensee/ License For	Service Address	License Number	Renewal Number	Effective Date Range	Status	License Charges
MINER'S, INC SUPER ONE FOODS #457	15 S 13TH AV E DULUTH, MN 55802	759365	2015-00000006	05/01/2015 04/30/2016	Active	\$154.00
MINER'S, INC SUPER ONE FOODS #458	1316 W Arrowhead RD DULUTH, MN 55811	759364	2015-00000007	05/01/2015 04/30/2016	Active	\$154.00
TAPPA KEG INN, INC TAPPA KEG INN	7036 GRAND AVE DULUTH, MN 55807	759380	2015-00000004	05/01/2015 04/30/2016	Active	\$154.00
MINER'S, INC WOODLAND MARKETPLACE FOODS	4020 WOODLAND AVE DULUTH, MN 55803	759363	2015-00000005	05/01/2015 04/30/2016	Active	\$154.00
License Type Totals:		15 Licenses				\$2,310.00
Grand Totals:		15 Licenses				\$2,310.00

City of Duluth
On Sale Beer
 From Date 05/01/2015 To Date 04/30/2016

Licensee/ License For	Service Address	License Number	Renewal Number	Effective Date Range	Status	License Charges
License Type: L-On Sale Beer						
SAMMY'S PIZZA OF DUL, INC SAMMY'S PIZZA/RSTRNT	4011 WOODLAND AVE DULUTH, MN 55803	759353	2015-00000006	05/01/2015 04/30/2016	Active	\$476.00
SAMMY'S PIZZA OF DUL, INC SAMMY'S PIZZA	103 W 1ST ST DULUTH, MN 55802	759354	2015-00000009	05/01/2015 04/30/2016	Active	\$476.00
WATERFRONT PLAZA HOTEL CO SUITES AT WATERFRONT PLAZA	325 Lake AVE S/SUITE 703 DULUTH, MN 55802	759369	2015-00000013	05/01/2015 04/30/2016	Active	\$476.00
TASTE OF SAIGON, INC TASTE OF SAIGON	394 LAKE AVE S Duluth, MN 55802	759370	2015-00000005	05/01/2015 04/30/2016	Active	\$476.00
R P K BASEBALL, INC. DULUTH HUSKIES	PO BOX 16231 DULUTH, MN 55816	759371	2015-00000010	05/01/2015 04/30/2016	Active	\$476.00
VITTA PIZZA, INC. VITTA PIZZA	307 Canal Park DR DULUTH, MN 55802	759375	2015-00000014	05/01/2015 04/30/2016	Active	\$476.00
CHINA CAFE OF DULUTH, INC CHINA CAFE	1623 London RD DULUTH, MN 55812	759379	2015-00000008	05/01/2015 04/30/2016	Active	\$476.00
TAPPA KEG INN, INC TAPPA KEG INN	7036 GRAND AVE DULUTH, MN 55807	759380	2015-00000007	05/01/2015 04/30/2016	Active	\$476.00
KENRITE, INC BULLDOG PIZZA & GRILL	101 MT ROYAL SHOPPING CTR DULUTH, MN 55803	759384	2015-00000001	05/01/2015 04/30/2016	Active	\$476.00
BEANER'S CENTRAL INC BEANER'S CENTRAL	324 N CENTRAL AVE DULUTH, MN 55807	759398	2015-00000003	05/01/2015 04/30/2016	Active	\$476.00
JCEBAL COMPANY DULUTH INDIA PALACE	319 W Superior ST DULUTH, MN 55802	759404	2015-00000011	05/01/2015 04/30/2016	Active	\$476.00
THE NOODLE SHOP CO.	1600 Miller Trunk HWY	759419	2015-00000012	05/01/2015	Active	\$476.00

City of Duluth
On Sale Beer
 From Date 05/01/2015 To Date 04/30/2016

Licensee/ License For	Service Address	License Number	Renewal Number	Effective Date Range	Status	License Charges
NOODLES & COMPANY	DULUTH, MN 55811			04/30/2016		
UP NORTH TAPS, LLC 7 WEST TAP HOUSE	7 W Superior ST DULUTH, MN 55802	759788	2015-00000002	05/01/2015 04/30/2016	Active	\$476.00
TRM4, INC. SAMMY'S PIZZA & RESTAURANT	403 N CENTRAL AVE DULUTH, MN 55807	759998	2016-00000002	05/01/2015 04/30/2016	Active	\$476.00
STEWART-ZAUN, INC. AMAZING GRACE BAKERY & CAFE	394 Lake Ave S DULUTH, MN 55802	759999	2015-00000015	05/01/2015 04/30/2016	Active	\$476.00
DULUTH SOFTBALL PLAYERS ASSOCIATION DSPA	3501 Grand Ave DULUTH, MN 55806	760000	2015-00000016	05/01/2015 04/30/2016	Active	\$476.00
BIG LAKE, LLC TOASTY'S	1032 E 9th ST DULUTH, MN 55805	760002	2016-00000003	05/01/2015 04/30/2016	Active	\$476.00
PARK POINT MARINA INN & SUITES, LLC PARK POINT MARINA INN	1033 MINNESOTA AVE Duluth, MN 55802	760004	2015-00000017	05/01/2015 04/30/2016	Active	\$476.00
KALLIGHER, JOSHUA AARON GANNUCCI'S ITALIAN MARKET	301 N CENTRAL AVE DULUTH, MN 55807	760006	2015-00000018	05/01/2015 04/30/2016	Active	\$476.00
IRON MUG COFFEE HOUSE, LLC IRON MUG COFFEE HOUSE	1096 88 AVE WEST DULUTH, MN 55808	760007	2015-00000019	05/01/2015 04/30/2016	Active	\$476.00
LESTER PARK GOLF MANAGEMENT, LLC LESTER PARK GOLF COURSE	1860 LESTER RIVER ROAD Duluth, MN 55804	760008	2016-00000001	05/01/2015 04/30/2016	Active	\$476.00
License Type Totals:		21 Licenses				\$9,996.00
Grand Totals:		21 Licenses				\$9,996.00