

**VILLAGE OF RIVER HILLS
OFFICIAL NOTICE**

Per State Statute 125.04(3)(g), the Village of River Hills hereby publishes the attached listing of Alcoholic Beverage License applications for 2024-2025 licensing year:

CLASS B LIQUOR AND CLASS B BEER

<u>NAME</u>	<u>ADDRESS</u>	<u>PREMISES LOCATION</u>
Milwaukee Country Club Ann Luck, Agent	8000 N. Range Line Road River Hills, WI 53217	8000 N. Range Line Road River Hills, WI 53217
Bradley Family Foundation, Inc./ Lynden Sculpture Garden Polly Morris, Agent	2145 W. Brown Deer Road River Hills, WI 53217	2145 W. Brown Deer Road River Hills, WI 53217

Tammy LaBorde
Village Manager/Clerk/Treasurer
Published: April 24, 2024

Your notice has been submitted for publication. Below is a confirmation of your order. You will also receive an email confirmation.

ORDER DETAILS

Order Number: LWIX0082861
Order Status: Submitted
Classification: Govt Public Notices
Package: General Package
Base amount: 31.48
Service fee: 1.26
Cash/Check/ACH
Discount: -1.26
Total payment: 31.48

As an incentive for customers, we provide a discount off the total order cost equal to the 3.99% service fee if you pay with Cash/Check/ACH. Pay by Cash/Check/ACH and save! In no event are service fees refundable.

Payment Type: ACH
User ID: L0024957

ACCOUNT INFORMATION

Tammy LaBorde
7650 N. Pheasant Lane
River Hills, WI 53217
414-352-8213
tlaborde@vil.river-hills.wi.us
village of River Hills
Contract ID:

PAYMENT DETAILS

ACH*****77

TRANSACTION REPORT

Date: April 2, 2024 7:00:40 PM EDT
Amount: 31.48

ADDITIONAL OPTIONS

1 Affidavit

PREVIEW FOR AD NUMBER LWIX008286 10

**VILLAGE OF RIVER HILLS
OFFICIAL NOTICE**

Per State Statute 125.04(3)(g), the Village of River Hills hereby publishes the attached listing of Alcoholic Beverage License applications for 2024-2025 licensing year:

CLASS B LIQUOR AND CLASS B BEER
Milwaukee Country Club, Ann Luck Agent
8000 N. Range Line Road, River Hills, WI 53217

Bradley Foundation/Lynden Sculpture Garden, Polly Morris Agent
2145 W. Brown Deer Road, River Hills, WI 53217

Tammy LaBorde - Village Clerk
Published: April 24, 2024
WNAXLP
Publication Dates
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<< Click here to print a printer friendly version >>

\$15.74 each

SCHEDULE FOR AD NUMBER LWIX008286 10

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07 01 2024 ending: 06 30 2025
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: Town of } RIVER HILLS
 Village of }
 City of }

County of MILWAUKEE Aldermanic Dist. No. _____
 (If required by ordinance)

Check one: Individual Limited Liability Company
 Partnership Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Milwaukee Country Club</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Luck</u>	(First) <u>Ann</u>	(Middle Name) <u>E</u>	Home Address (Street, City or Post Office, & Zip Code) <u>14145 N. Thorngate Rd., Mequon, WI 53097</u>
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All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>Hauske Jr</u>	(First) <u>Thomas</u>	(Middle Name) <u>J</u>	Home Address (Street, City or Post Office, & Zip Code) <u>900 W. Bradley Rd., Milwaukee 53217</u>
Vice President / Member Last Name <u>Robbins MD</u>	(First) <u>Stephen</u>	(Middle Name) <u>E</u>	Home Address (Street, City or Post Office, & Zip Code) <u>1050 W. Calumet Rd., Milwaukee 53217</u>
Secretary / Member Last Name <u>Hess</u>	(First) <u>Daniel</u>	(Middle Name) <u>M</u>	Home Address (Street, City or Post Office, & Zip Code) <u>924 E. Syulvan Ave., Whitefish Bay 53217</u>
Treasurer / Member Last Name <u>Read</u>	(First) <u>Reik</u>	(Middle Name) <u>W</u>	Home Address (Street, City or Post Office, & Zip Code) <u>9185 N. Range Line Rd., River Hills 53217</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name Milwaukee Country Club Business Phone Number 414-362-5200

2. Address of Premises 8000 N. Range Line Rd. Post Office & Zip Code River Hills 53217

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) _____

Private Country Club with Pool Facilities

Applicant's Wisconsin Seller's Permit Number <u>456-1020008294-04</u>	
FEIN Number <u>39-0476050</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ 500
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>15.74</u>
TOTAL FEE	\$ <u>615.74</u>

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** Yes No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** Yes No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** Yes No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? Yes No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No
12. Does the applicant owe municipal property taxes, assessments, or other fees? Yes No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>Ann Luck</i>	Title / Member <i>General Manager</i>	Date <i>4/12/24</i>
Signature <i>[Signature]</i>	Phone Number <i>414-362-5200</i>	Email Address <i>aluck@mchwl.com</i>

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>4-18-24</i>	Date reported to council / board <i>5-15-24</i>	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2024 ending: 06/30/2025
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: Town of } River Hills
 Village of }
 City of }

County of Milwaukee Aldermanic Dist. No. _____
 (if required by ordinance)

Check one: Individual Limited Liability Company
 Partnership Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Bradley Family Foundation, Inc.</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)
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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Morris</u>	(First) <u>Polly</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>3345 N. Humboldt Blvd. Milwaukee, WI 53212</u>
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All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Zimmerman</u>	<u>Sarah</u>	<u>O</u>	<u>2815 E. Newberry Blvd. Milwaukee, WI 53211</u>
Vice President / Member Last Name <u>Uihlein</u>	(First) <u>David</u>	(Middle Name) <u>V</u>	Home Address (Street, City or Post Office, & Zip Code) <u>1476 E. Bay Point Rd. Bay Side, WI 53217</u>
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name <u>Lund</u>	(First) <u>Margaret</u>	(Middle Name) <u>T</u>	Home Address (Street, City or Post Office, & Zip Code) <u>2008 W. Wauwatosa Ave. Wauwatosa, WI 53213</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Lynden Sculpture Garden Business Phone Number 414-446-8794
- Address of Premises 2145 W. Brown Deer Rd. Post Office & Zip Code River Hills, WI 53217
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Main house at property, patio, grounds.

Applicant's Wisconsin Seller's Permit Number <u>456-0000-150941-04</u>	
FEIN Number <u>39-6105450</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ <u>800</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>15.74</u>
TOTAL FEE	\$ <u>615.74</u>

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** Yes No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3**. Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** Yes No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** Yes No
- Our accountants have determined that we do not have to file those
returns.
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? Yes No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No
12. Does the applicant owe municipal property taxes, assessments, or other fees? Yes No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <u>Morris, Polly</u>	Title / Member <u>Executive Director</u>	Date <u>12 Apr. 2024</u>
Signature <u>Polly Morris</u>	Phone Number <u>414-446-8794</u>	Email Address <u>pmorris@lynden sculpture garden. org</u>

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>April 19, 2024</u>	Date reported to council / board <u>May 15, 2024</u>	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk