062016 agenda

MCCOOK CITY COUNCIL

REGULAR MEETING

Monday - June 20, 2016
6:30 P.M. - City Council Chambers

- **Call to Order and Roll Call.**
- **Open Meetings Act Announcement.**
  **A copy of the Open Meetings Act is posted by the entrance to the Council Chambers and is available for public review.*
- **Invocation.**
  The McCook Ministerial Association - Tom Albertson, Peace Lutheran Church.
- **Pledge of Allegiance.**

1. Citizen's Comments.
**The Council welcomes your input. You may address the Council at this time on items that are not on tonight's agenda. According to Nebraska Open Meeting Laws no action may be taken by Council.*

At the appropriate time during the meeting, citizens wishing to comment on tonight's Agenda items will be given an opportunity.

2. Announcements & Recognitions.

3. Public Hearings.

A. Conduct a public hearing on the application of McCook Hotel Group; dba "Cobblestone Hotel & Suites", for a Class "I" - (Beer, Wine Distilled Spirits, On Sale Only) License under the Nebraska Liquor Control Commission, to be located at 1301 North Highway 83, McCook, Nebraska.
062016 cobblestone

B. Recommend approval to the Nebraska Liquor Control Commission the application of McCook Hotel Group; dba "Cobblestone Hotel & Suites", for a Class "I" - (Beer, Wine Distilled Spirits, On Sale Only) License under the Nebraska Liquor Control Commission, to be located at 1301 North Highway 83, McCook, Nebraska.

4. Consent Agenda.
**The Consent Agenda is approved on one motion. Any item listed on the Consent Agenda may, by the request of any single Councilmember or public in attendance, be considered as a separate item under the Regular Agenda.*

A. Approve the minutes of the June 6, 2016 regular City Council meeting.
062016 minutes

B. Approve the application for a Special Designated Liquor License submitted by the Fraternal Order of Eagles, Liquor License #I-03700, for a Dance/Fund Raiser/Beer Garden to be held in the parking lot of the Eagles Club, 805 East "B" Street, on August 27, 2016, from 5:00 P.M. to 11:00 P.M.
062016 sdl eagles

C. Receive and file the Financial Report for the period ending May 31, 2016.
062016 financial

5. Regular Agenda.

A. Approve Ordinance No. 2016-2933 providing for the rezone of Block Eight (8), Lots Seven (7) through twelve (12), Brown's Park Addition to the City of McCook, Red Willow County, Nebraska, (a/k/a) from Business Commercial (BC) to Residential Medium Density (RM) District upon its third and final reading.
062016 pinkal

B. Council Comments.

- **Adjournment.**

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B. Council Comments.

- **Adjournment.**

CITY MANAGER'S REPORT
JUNE 6, 2016 CITY COUNCIL MEETING

ITEM: 3

RECOMMENDATION:

ITEM A — Conduct a public hearing on the application of McCook Hotel Group; dba "Cobblestone Hotel & Suites", for a Class "I" - (Beer, Wine Distilled Spirits, On Sale Only) License under the Nebraska Liquor Control Commission, to be located at 1301 North Highway 83, McCook, Nebraska.

ITEM B — Recommend approval to the Nebraska Liquor Control Commission the application of McCook Hotel Group; dba "Cobblestone Hotel & Suites", for a Class "I" - (Beer, Wine Distilled Spirits, On Sale Only) License under the Nebraska Liquor Control Commission, to be located at 1301 North Highway 83, McCook, Nebraska.

BACKGROUND:

Upon notice from the Liquor Control Commission, the City has 45 days to conduct a hearing concerning the requested license. The Council may choose not to make a recommendation of approval or denial to the Commission.

Per §53-133, the Liquor Control Commission shall set for hearing any application wherein:

1) There is a recommendation of denial from the local governing body.
2) A citizens protest; or
3) Statutory problems that the Commission discovers.

FISCAL IMPACT: None.

RECOMMENDATION:

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APPROVALS:

Lea Ann Doak — June 13, 2016
Lea Ann Doak, City Clerk-Treasurer

Nathan Schneider — June 13, 2016
Nathan Schneider, City Manager

EXHIBIT #1
PAGES(S) 1

NOTICE OF HEARING

NOTICE IS HEREBY GIVEN that McCook Hotel Group LLC; dba "Cobblestone Hotel & Suites", has filed an application for a Class "I", License #118142 - (Beer, Wine, Distilled Spirits, On Sale Only) License under the Nebraska Liquor Control Commission, to be located at 1301 N Hwy 83, McCook, Nebraska.

All persons desiring to give evidence before the McCook City Council in support of or protest against the issuance of such license may do so at the time of this hearing to be held Monday, June 20, 2016 at 6:30 P.M., C.D.S.T.; in the City Council Chambers, 505 West "C" Street, McCook, Nebraska.

-s- Lea Ann Doak
City Clerk

Publish: June 10, 2016.

EXHIBIT #2

PAGES(S) 1

STATE OF NEBRASKA

Pete Ricketts
Governor

NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7252 (TTY)

June 2, 2016

McCook City Clerk
505 West C Street
PO Box 1059
McCook, NE 69001

RE: Liquor license Class I - 118142 for Cobblestone Hotel & Suites

Clerk:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

1) Publicize one time not less than 7 days not more than 14 days prior to date of hearing.

2) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

1) There is a recommendation of denial from the local governing body.

2) A citizens protest; or

3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE PROPERLY LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

1) Upon payment of the license fees;
2) Physical possession of the license;
3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Brenda Hiland

Brenda Hiland
Licensing Division

Enclosures

EXHIBIT #3

PAGES(S) 68

RECEIPT

From:	Brenda Hiland
Phone #:	402-471-2735
Fax #:	402-471-2814
Company Name:	Nebraska Liquor Control Commission

To:	McCook City Clerk
Re:	McCook Hotel Group LLC
DBA:	Cobblestone Hotel & Suites
Application #:	I - 118142

PLEASE COMPLETE THE BOTTOM SECTION IMMEDIATELY UPON RECEIPT OF THIS APPLICATION AND FAX OR EMAIL THIS FORM BACK ACKNOWLEDGING THE RECEIPT OF THIS APPLICATION. PLEASE DATE STAMP IF THAT OPTION IS AVAILABLE. THANK YOU.

RECEIVED
JUN - 2 2016

DATE OF RECEIPT

Lea Ann Dosh, City Clerk

SIGNATURE

RECOMMENDATION OF THE NEBRASKA LIQUOR CONTROL COMMISSION

Date Mailed from Commission Office: **June 2, 2016**

I,_____Clerk of _____

(City, Village or County)

Nebraska, hereby report to the Nebraska Liquor Control Commission in accordance with Revised Statutes of Nebraska, Chapter 53, Sec. 134 (7) the recommendation of said city, village or county, as the case may be relative to the application for a license under the provisions of the Nebraska Liquor Control Act as applied for by:

McCook Hotel Group LLC dba Cobblestone Hotel & Suites
1301 N Hwy 83, McCook / Red Willow County, 69001
Application for Class I - 118142
45 days – 7/18/2016

1. Notice of local hearing was published in a legal newspaper in or of general circulation in city, village or county, one time not less than 7 nor more than 14 days before time of hearing.

   Check one Yes_____ No_____

   The Statutes require that such hearing shall be held not more than 45 days after the date of receipt of this notice from the Commission.

2. Local hearing was held not more that 45 days after receipt of notice from the Nebraska Liquor Control Commission.

   Check one Yes_____ No_____

3. Date of hearing of Governing Body: _____

4. Type or write the Motion as voted upon by the Governing Body. If additional Motions are made by the Governing Body, then use an additional page and follow same format.

   _____

   _____

   _____

5. Motion was made by:_____Seconded by:_____

6. Roll Call Vote: _____

   _____

7. Check one: The motion passed: _____The motion failed: _____

8. If the motion is for recommendation of denial of the applicant, then list the reasons of the governing body upon which the motion was made.

   _____

   _____

   _____

   (Attached additional page if necessary)

SIGN HERE_____**DATE**_____

clerks signature

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

RECEIVED
MAY 23 2016
NEBRASKA LIQUOR CONTROL COMMISSION

Hot List: YES / NO	New/Replacing #	
Class Type I	118142	Initial bh

Applicant name McCook Hotel Group LLC

Trade name Cobblestone Hotel & Suites

Previous trade name N/A

Contact email address jporior@whgco.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.

No fees submitted

Office use only
PAYMENT TYPE CK 1009
5/23 AMOUNT: $400.
Received: BA

1600010303

RECEIVED

John Porior *spouse
Jeremy Griesbach *spouse
Alex Chaput *spouse
Jennifer Conrad

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.

3. X 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)

   * Jeremy & Alex need to sign

4. N/A 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. X 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. N/A Enclose a list of any inventory or property owned by other parties that are on the premises.

9. X 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. X 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. X Submit a copy of your business plan.

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

5-18-16
Date

Premises ph #
LxW & diagram
Form 100, # 5, 10, 14
Jeremy & Alex sign

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/

RECEIVED
MAY 23 2016
NEBRASKA LIQUOR CONTROL COMMISSION

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 SPIRTS, ON AND OFF SALE
_____ D BEER, WINE, DISTILLED SPIRITS, OFF SALE ONLY
X 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

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)
X 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 John J Porier Phone number: 920-237-0233

Firm Name WHG

PREMISES INFORMATION

Trade Name (doing business as) Cobblestone Hotel & Suites

Street Address #1 1301 N Hwy 83

Street Address #2

City McCook County Red Willow 48 Zip Code 69001

*Premises Telephone number

Business e-mail address mccook@staycobblestone.com

RECEIVED
MAY 23 2016
NEBRASKA LIQUOR CONTROL COMMISSION

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

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

Name WHG

Street Address #1 John J Porior

Street Address #2 980 American Dr

City Neenah State WI Zip Code 54956

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 173 x width 65 in feet

Is there a basement? Yes _____ No X If yes, length _____ x width _____ in feet

Is there an outdoor area? Yes _____ No _____ If yes, length _____ x width _____ in feet

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

GENERAL NOTES – COMMON AREA INTERIOR ELEVATIONS

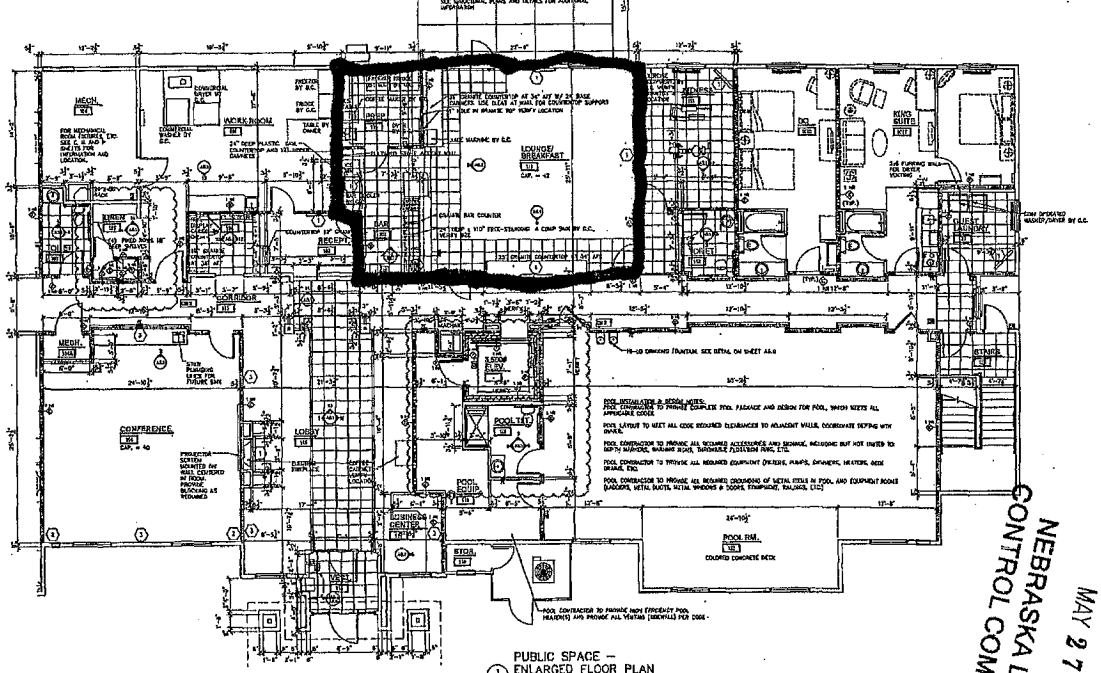
1. REFER TO 1/8" PLAN-ONLY FLOOR PLANS FOR OVERALL DIMENSIONS AND WINDOW OPENING LOCATION ON EXTERIOR WALLS.
2. ALL INTERIOR WALLS TO BE 3x4 OR 2x6 @ 16" O.C. OVER FLOOR PLAN FOR 5/8 x/ 5/8" GYPSUM BOARD BOTH SIDES (U.N.O.)- EXTEND TO BOTTOM CHORD OF TRUSSES.
3. PROVIDE BLOCKING FOR WALL MOUNTED FIXTURES, ACCESSORIES, EQUIPMENT, AND WINDOW TREATMENTS / DRAPERY, INCLUDING BUT NOT LIMITED TO: TV, MIRROR, SAFE, HEADBOARD, TOILET, BIDDE, GRAB BARS, TOILET PARTITIONS, WALL MTD. DR. STOPS, SHOWER CURTAIN RODS, & BATHTUB GROUTS. MOUNTING INTEGRITY OF ENTIRE SYSTEM INCLUDING ANY LOCATED IN RATED WALL ASSEM. FOR 20MIN FENCE WITH GRAB BARS.
4. FOR TYPICAL MOUNTING HEIGHTS, REFER TO SHEET A5.
5. ALL FASNETS (PER) IN FOOD SERVICE TO HAVE ALL EXPOSED SURFACES, INCLUDING THE UNDERSIDE OF THE CABINET BE FINISHED WITH PLAN PER NSF STANDARD DISNEE 35. 6" FOOD IS TO BE PROVIDED ON WORK SURFACE, TIP TO BE STAINLESS STEEL.

TYP. FLOOR PLAN SYMBOLS:

WALL TYPE – SEE A5 SHEETS FOR WALL TYPES AND ASSEMBLY DATA	STUD WALL
FIRE EXTINGUISHER – SEE SHEET A4.2	POURED CONCRETE WALL
TOILET ACCESSORIES – / CABINET – SEE SHEET A4.2	(1) HOUR RATED FIRE-BLOCKER
FIRE EXTINGUISHER – / CABINET – SEE SHEET A4.2	(1) HOUR RATED FIRE PARTITION
FIRE RESCUE LOCATION	
INTERIOR OR HOUSE PHONE CONNECTED TO FRONT DESK w/ METHOD OF OPERATING SIGN	SEE PLAN FOR ALL WALL TYPING
PICTURE / VISUALLY IMPAIRED UNIT	

TYP. FLOOR PLAN KEYNOTES:

1. 72"A.F.F. TO CENTER OF TV (VERIFY). PROVIDE 2x10 BLOCKING BETWEEN STUDS FOR TV MOUNTING BRACKET. PROVIDE CATV JACK & DUPLEX OUTLET BELOW BLOCKING TOP OF BOARDS, 14" BELOW TRIMS. FLAT-SCREEN TV, BY O.E.
2. FUTURE BLOCKING – 72"A.F.F. TO CENTER OF TV (VERIFY). PROVIDE 2x10 BLOCKING BETWEEN STUDS FOR TV MOUNTING BRACKET. PROVIDE CATV JACK & DUPLEX OUTLET BELOW BLOCKING TOP OF BOARDS, 14" BELOW TRIMS.
3. LOCATION OF ARTWORK – PROVIDE 2x10 BLOCKING BETWEEN STUDS FOR MOUNTING. O.E. TO VERIFY SIZE AND LOCATIONS



PUBLIC SPACE – ENLARGED FLOOR PLAN

25'11" X 27'4"

RECEIVED
MAY 27 2016
NEBRASKA LIQUOR CONTROL COMMISSION

EXCEL ENGINEERING, INC.

OWNER:
BRIMARK BUILDERS, LLC
840 AMERICAN DRIVE
NEENAH, WI 54956

PROJECT:
COBBLESTONE HOTEL AND SUITES
HWY 183 & M.N. ST.
MC COOK, NE 69001

SHEET ISSUE:
OCTOBER 21, 2015
REVISIONS:
CB2 NOV. 23, 2015

JOB NUMBER: 1503970
SHEET
A5.0

HOTEL UNIT RECAP											
	KING	ADA KING	KING STUDIO	ADA KING STUDIO	KING SUITE	ADA KING SUITE	KING SUITE 2	DQ	ADA DQ	DQ STUDIO	TOTAL
1ST FLOOR	–	–	–	1	1	1	–	4	–	1	8
2ND FLOOR	1	1	2	–	2	–	–	12	1	4	23
3RD FLOOR	1	–	1	–	2	–	–	15	1	4	23
TOTAL	2	1	3	1	5	1		29	1	9	54

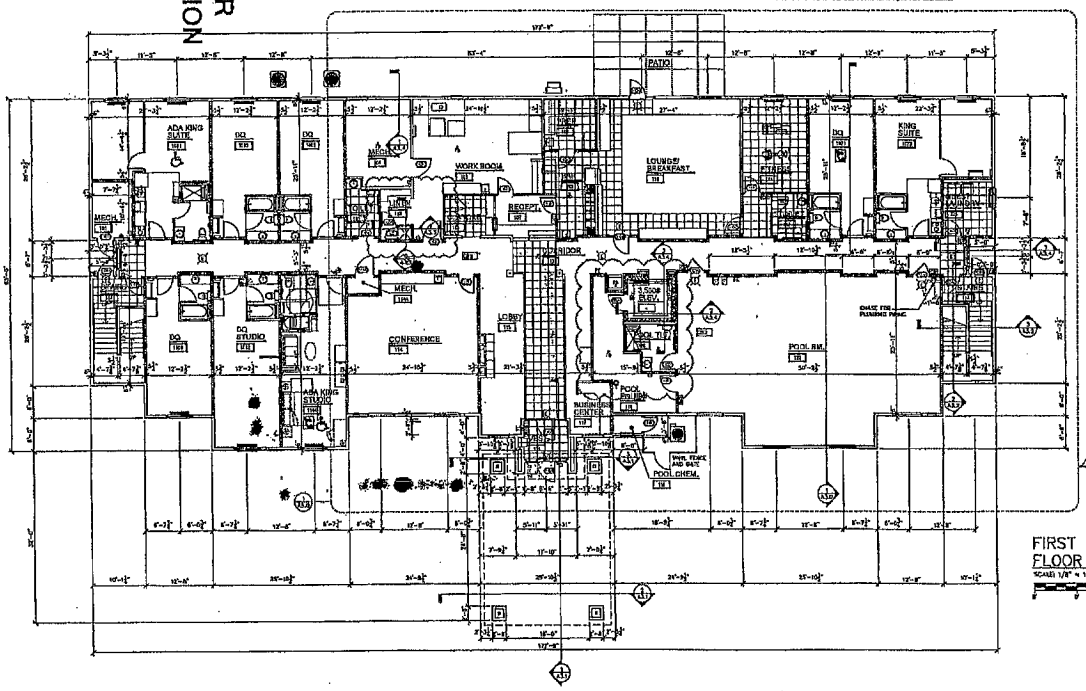
HEARING/VISUAL IMPAIRED UNIT QUANTITIES		
	REQUIRED IN ADA FIGURE 1	ROOM NUMBERS PROVIDED
TOTAL NUMBER OF UNITS = 54	51 – 75 UNITS = 7 7 UNITS W/	1004, 1005, 2007, 2016, 2023, 2024, 3010

TYP. FLOOR PLAN SYMBOLS:

- WALL TYPE – SEE AR SHEETS SEE ENLARGED PLANS FOR ADDITIONAL CALL-OUTS
- FIRE EXTINGUISHER – SEE SHEET A1.3
- FIRE EXTINGUISHER w/ CABINET – SEE SHEET A1.3
- CARD READER LOCATION
- INTERCOM (U) HOUSE PHONE CONNECTED TO FRONT DESK, w/ REVERSE OF OPERATING DOOR
- HEARING / VISUALLY IMPAIRED UNIT
- STUD WALL
- POURED CONCRETE WALL
- (1) HOUR RATED FIRE BARRIER
- (2) HOUR RATED FIRE PARTITION
- SEE PLAN FOR ALL WALL TYPES

GENERAL NOTES – FLOOR PLANS:

1. REFER TO ENLARGED SHEETS FOR PUBLIC SPACE & GUESTROOM PLANS, DIMENSIONS & DETAILS.
2. FOR ALL FINISH MATERIAL DESIGNATIONS SEE ENLARGED FINISH PLANS.
3. HINGES SIDE OF DOOR TO BE LOCATED 4" FROM ADJACENT WALL UNO. STANDARD DOORS & FRAMES SHALL BE INSTALLED AS SHOWN BELOW, UNO.
4. REFERENCE DOOR AND WINDOW MANUFACTURERS' SPECIFICATIONS FOR ACTUAL ROUGH OPENING SIZE. SEE AR SHEETS FOR DOOR AND WINDOW TYPES.
5. FOR SPECIFIC WALL ASSEMBLY INFORMATION, SEE AR SHEETS.
6. TO THE MAXIMUM EXTENT POSSIBLE, FLOOR CLEAN OUTS ARE TO BE LOCATED IN INCONSPICUOUS PLACES AND NOT IN CORRIDORS. ALL FLOOR CLEAN OUTS LOCATED IN CARPETED AREAS ARE TO BE FITTED WITH CARPET INSERTS. ALL CLEANOUTS ARE TO BE FLUSH TO FLOOR/WALLS.
7. ALIGN FINISHES WHERE DISSIMILAR WALL TYPES MEET, UNO.
8. REFER TO ELECTRICAL, MECHANICAL, AND POOL PROTOTYPIC PLANS FOR INFORMATION AND LOCATIONS.
9. PROVIDE PLYWOOD WALL BLOCKING WHERE ARTWORK, WAINSCOTS/CHAIR RAILS AND TACKBOARDS (TBD) ARE SHOWN. EXTENT OF BLOCKING TO MATCH SIZE OF ARTWORK, WAINSCOTS/CHAIR RAILS AND TACKBOARDS (TBD). PROVIDE WALL BLOCKING FOR FURNITURE, EQUIPMENT, FIXTURES, FIXTURES AND ACCESSORIES IN ACCORDANCE WITH MANUFACTURER RECOMMENDATIONS AND PROGRAMMATIC. SEE PARTITION BLOCKING DETAILS. DESIGN LOAD FOR FIXTURES AND FIXTURES MUST INCLUDE 1K, 250 LB VERTICAL AND NON-CENTRAL FORCES.
10. PROVIDE VISUAL AND AUDIBLE EMERGENCY ALARM SYSTEM THROUGHOUT PUBLIC AND COMMON USE AREAS OF BUILDING.
11. ALL INT. DIMS ARE FROM FACE-OF-STUD TO FACE-OF-STUD.
12. ALL EXT. DIMS ARE FROM OUTSIDE FACE-OF-SHEATHING TO OUTSIDE FACE-OF-SHEATHING.
13. PROVIDE 3 1/2" SQUARE BASE MOLDING AROUND PERIMETER OF TOILET ROOMS AND OFFICE WALLS.
14. ALL INTERIOR WALLS TO BE 3x4 OR 2x6 @ 16" O.C. (SEE FLOOR PLAN FOR SIZE) w/ 5/8" GYPSUM BOARD BOTH SIDES (UNUO) – EXTEND TO BOTTOM SIDES OF TRUSSES UNLESS SHOWN OTHERWISE ON AR SHEETS.
15. ALL ACCESSIBLE AND HEARING IMPAIRED UNITS TO HAVE THE FOLLOWING: STROBE & SOUND ACTIVATED DOORBELL w/ 5 SECOND DELAY. PROVIDE DOORBELL SAVERS (WITH DIFFERENCE – ALARMS TO BE AUDIBLE FROM ALL AREAS OF THE UNIT CONNECTED TO THE FIRE/LIFE EMERGENCY SYSTEM. PROVIDE VISUAL FLASHING ALARM AS PER NFPA 72. PROVIDE ACCESSIBLE ELECTRICAL OUTLET WITHIN 1'-0" OF A TELEPHONE TO FACILITATE THE USE OF A TEXT TELEPHONE. SEE PLANS FOR LOCATION.
16. REVERSE CHANNEL TO BE INSTALLED WITH THE STRUT DOWN.
17. SET FLOOR DRAINS AND FLOOR SINKS WITH TOP OF FINISH FLOOR. SLOPE CONCRETE FLOOR AT 1/8" PER FOOT TOWARDS FLOOR DRAINS AND AWAY FROM ALL WALLS. SEE FOUNDATION PLAN FOR LOCATIONS.



FIRST FLOOR PLAN
SCALE: 1/8" = 1'-0"

172'9" X 65'

RECEIVED
MAY 27 2016
NEBRASKA LIQUOR CONTROL COMMISSION

EXCEL ENGINEERING, Inc.
105 CHALLENGER DRIVE
BELLEVUE, NEBRASKA 68005
PH. (402) 291-8111
FAX. (402) 291-8007
Change is Better Plan

OWNER:
BIRNAMAN BUILDERS, LLC
820 AMERICAN DRIVE
NEENAH, WI 54956

PROJECT:
COBBLESTONE HOTEL AND SUITES
HWY 88 & W. N ST.
MC COOK, NE 69001

SHEET ISSUE:
OCTOBER 21, 2015
ASB TITLE SHEET TO CONTINUE THAT THIS SHEET IS ISSUED FOR CONTRACTOR

REVISIONS:
CR2 NOV. 25, 2015

JOB NUMBER:
1503970

SHEET
A1.1

2015 © EXCEL ENGINEERING, INC.

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 may occur after the date of signing this application.

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_____YES ___X___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 Charges	Disposition

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

_____YES ___X___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 ___X___NO

If yes, give name and license number_____

4. Are you filing a temporary operating permit (TOP) to operate during the application process?

_____YES ___X___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?

X YES _____ NO

If yes, list the lender(s) Cattle National Bank & Trust Co

6. Will any person or entity, other than applicant, be entitled to a share of the profits of this business?

_____ YES X NO

If yes, explain. (all involved persons must be disclosed on application)

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No silent partners

7. Will any of the furniture, fixtures and equipment to be used in this business be owned by others?

_____ YES X 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 X 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 X 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.

Cattle National Bank & Trust Co / John Porter, Kim Wogemose

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.

N/A

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:

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
John Porior	1-27-16	RBST
Jeremy Griesbach	5-16-16	RBST
Alex Chaput	5-12-16	RBST

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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

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_____

X Deed

____ Purchase Agreement

14. When do you intend to open for business? May 2016

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

16. What are the anticipated hours of operation? 24 Hr

17. List the principal residence(s) for the past 10 years for all persons required to sign, including spouses.

APPLICANT: CITY & STATE	YEAR FROM	YEAR TO	SPOUSE: CITY & STATE	YEAR FROM	YEAR TO
John Porior: Oshkosh WI	1972	present	Vicki Porior: Oshkosh WI	1969	present
Jeremy Griesbach: Waukesha WI	2004	present	Lori Griesbach: Waukesha WI	2004	present
Alex Chaput: Langdon ND	2000	present	Vanessa Chaput: Langdon ND	2000	present

If necessary attach a separate sheet.

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NEBRASKA LIQUOR CONTROL COMMISSION

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

Signature of Applicant	**Signature of Spouse**
John J Parior	Vicki Parior
Print Name	**Print Name**
Signature of Applicant	**Signature of Spouse**
Print Name	**Print Name**

ACKNOWLEDGEMENT

State of ~~Nebraska~~ Wisconsin
County of Winnebago

The foregoing instrument was acknowledged before me this

5/20/16 by John & Vicki Parior
date name of person(s) acknowledged (individual(s) signing)

Notary Public signature

Commission expires 2/27/18

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.

Michigan State University
CHICAGO
JAN 1 1984
LIBRARY

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MAY 31 2016
NEBRASKA LIQUOR CONTROL COMMISSION

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 all 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.

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Must be signed in the presence of a notary public by applicant(s) and spouse(s). See guideline for required signatures

Signature of Applicant	**Signature of Spouse**
Jeremy M. Griesbach	Lori D. Griesbach
Print Name	**Print Name**
Signature of Applicant	**Signature of Spouse**
Print Name	**Print Name**

ACKNOWLEDGEMENT

State of ~~Nebraska~~ Wisconsin
County of Winnebago

The foregoing instrument was acknowledged before me this

5/31/16 by Lori + Jeremy Griesbach
date name of person(s) acknowledged (individual(s) signing)

Stephanie Brooks
Notary Public signature

Commission expires 2/27/18

Affix Seal

In compliance with the ADA, this application is available in other formats for persons with disabilities.
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JUN 1 2016

NEBRASKA LIQUOR CONTROL COMMISSION

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 request 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.

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Must be signed in the presence of a notary public by applicant(s) and spouse(s). See guideline for required signatures

Alex Chaput
Signature of Applicant

Vanessa Chaput
Signature of Spouse

Alex Chaput
Print Name

Vanessa Chaput
Print Name

Signature of Applicant

Signature of Spouse

Print Name

Print Name

ACKNOWLEDGEMENT

State of ~~Nebraska~~ North Dakota
County of Cavalier

May 31, 2016
date

The foregoing instrument was acknowledged before me this

by Alex Chaput and Vanessa Chaput
name of person(s) acknowledged (individual(s) signing)

Lisa Gellner
Notary Public signature

LISA GELLNER
Notary Public, State of North Dakota
My Commission Expires March 18, 2018

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

Office Use

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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

Name of Registered Agent: Jason Houghtelling

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

McCook Hotel Group LLC

LLC Address: 1301 N Hwy 83

City: McCook State: NE Zip Code: 69001

LLC Phone Number: _____ LLC Fax Number _____

Name of Managing/Contact Member
Name and information of contact member must be listed on following page

Last Name: Porior First Name: John MI: J

Home Address: 3047 Wylde Flower ct City: Oshkosh

State: WI Zip Code: 54904 Home Phone Number: 920-231-7965

Signature of Managing/Contact Member

ACKNOWLEDGEMENT

State of ~~**Nebraska**~~ Wisconsin
County of Winnebago

The foregoing instrument was acknowledged before me this

5/20/16
Date

by John Porior
name of person acknowledge

Stephanie Brooks

Commission expires 2/27/18

Affix Seal

MATHEMATISCHES FORSCHUNGSINSTITUT OBERWOLFACH
BIBLIOTHEK

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

☐YES ☒NO

If yes, complete controlling corporation insert form 185

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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.

Nebraska Secretary of State

MCCOOK HOTEL GROUP, LLC

Fri May 27 11:51:56 2016

SOS Account Number
10207563
Status
Active

Principal Office Address
No address on file
Registered Agent and Office Address
JASON HOUGHTELLING
71797 ROAD 412
CAMBRIDGE, NE 69022
Designated Office Address
71797 ROAD 412
CAMBRIDGE, NE 69022

Nature of Business
Not Available
Entity Type
Domestic LLC
Qualifying State: NE
Date Filed
Apr 17 2015

Filed Documents

Filed documents for MCCOOK HOTEL GROUP, LLC may be available for purchase and downloading by selecting the Purchase Now button. Your Nebraska.gov account will be charged the indicated amount for each item you view. If no Purchase Now button appears, please contact Secretary of State's office to request document(s).

Code	Document	Date Filed	Price	
CRTO	Certificate of Organization	Apr 17 2015	$0.45 = 1 page(s) @ $0.45 per page	Purchase Now (corpsearch.cgi?document-number=9000158674)

Good Standing Documents

- If you need your Certificate of Good Standing Apostilled or Authenticated for use in another country, you must contact the Nebraska Secretary of State's office directly for information and instructions. Documents obtained from this site cannot be Apostilled or Authenticated.

Online Certificate of Good Standing with Electronic Validation
$6.50
This certificate is available for immediate viewing/printing from your desktop. A Verification ID is provided on the certificate to validate authenticity online at the Secretary of State's website.

NEBRASKA CERTIFICATE OF ORGANIZATION

ARTICLE I – NAME:

The name of the Limited Liability Company is:

McCook Hotel Group, LLC

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CONTROL COMMISSION

ARTICLE II – INITIAL DESIGNATED OFFICE:

71797 Road 412
Cambridge, NE 69022

ARTICLE III – INITIAL AUTHORIZED AGENT FOR SERVICE OF PROCESS:

Jason Houghtelling
71797 Road 412
Cambridge, NE 69022

ARTICLE IV- MANAGEMENT:

The Limited Liability Company will be Member Managed.

ARTICLE V – PURPOSE:

The purpose for which the Limited Liability Company is organized is to transact any or all lawful business for which limited liabilities may be organized under the Nebraska Uniform Limited Liability Act.

ARTICLE VI – DURATION:

The period of duration of the Limited Liability Company is perpetual from the date of filing of this Certificate of Organization with the Secretary of State of the State of Nebraska, unless earlier dissolved in accordance with the Nebraska Uniform Limited Liability Act or the provisions of the Limited Liability Company's Operating Agreement.

ARTICLE VII – ORGANIZER:

The name and address of the organizer of the Limited Liability Company is:.

Robyn Hansen
12541 East County Hwy M
Darien, WI 53114

ORGANIZER:

Robyn Hansen

Robyn C. Hansen

Date: 4/6-2015

Print Form

SPOUSAL AFFIDAVIT OF NON PARTICIPATION INSERT

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

Office Use

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I acknowledge that I am the spouse of a liquor license holder. My signature below confirms that I will have not have any interest, directly or indirectly in the operation or profit of the business (§53-125(13)) of the Liquor Control Act. I will not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices or represent myself as the owner or in any way participate in the day to day operations of this business in any capacity. I understand my fingerprint will not be required; however, I am obligated to sign and disclose any information on all applications needed to process this application.

Signature of spouse asking for waiver
(Spouse of individual listed below)

Vicki V Porior
Printed name of spouse asking for waiver

State of Wisconsin

County of Winnebago

The foregoing instrument was acknowledged before me this

5/20/16
date

by Vicki Porior
name of person acknowledged

Stephanie Brooks
Notary Public signature
Commission expires
2/27/18

Affix Seal

I acknowledge that I am the spouse of the above listed individual. I understand that my spouse and I are responsible for compliance with the conditions set out above. If it is determined that the above individual has violated (§53-125(13)) the Commission may cancel or revoke the liquor license.

Signature of individual involved with application
(Spouse of individual listed above)

John J Porior
Printed name of applying individual

State of Wisconsin

County of Winnebago

The foregoing instrument was acknowledged before me this

5/20/16
date

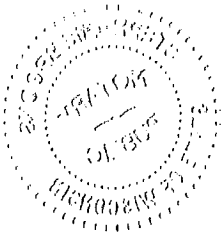
by John Porior
name of person acknowledged

Stephanie Brooks
Notary Public signature
Commission expires
2/27/18

Affix Seal

In compliance with the ADA, this spousal affidavit of non participation is available in other formats for persons with disabilities.
A ten day advance period is requested in writing to produce the alternate format.

FORM 35-4178
Revised 1/2008



Print Form

SPOUSAL AFFIDAVIT OF NON PARTICIPATION INSERT

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

Office Use

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MAY 23 2016
NEBRASKA LIQUOR CONTROL COMMISSION

[redacted]

Signature of spouse asking for waiver
(Spouse of individual listed below)

Lori D. Griesbach
Printed name of spouse asking for waiver

State of Wisconsin

County of Winnebago

5/20/16
date

by Lori Griesbach
name of person acknowledged

The foregoing instrument was acknowledged before me this

Stephanie Brooks
Notary Public signature
commission expires 2/27/18

Affix Seal

I acknowledge that I am the spouse of the above listed individual. I understand that my spouse and I are responsible for compliance with the conditions set out above. If it is determined that the above individual has violated (53-125(13)) the Commission may cancel or revoke the liquor license.

Signature of individual involved with application
(Spouse of individual listed above)

JM Griesbach
Printed name of applying individual

State of Wisconsin

County of Winnebago

5/20/16
date

by Jeremy Griesbach
name of person acknowledged

The foregoing instrument was acknowledged before me this

Stephanie Brooks
Notary Public signature
commission expires 2/27/18

Affix Seal

In compliance with the ADA, this spousal affidavit of non participation is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM 35-4178
Revised 1/2008

MICROFILM
SERIES
NO. 1-FEB-
CE 3 SERVICES

MICROFILM
SERIES
NO. 1-FEB-
CE 3 SERVICES

SPOUSAL AFFIDAVIT OF NON PARTICIPATION INSERT

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
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Office Use

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NEBRASKA LIQUOR CONTROL COMMISSION

[redacted]

Vanessa Chaput
Signature of spouse asking for waiver
(Spouse of individual listed below)

Vanessa Chaput
Printed name of spouse asking for waiver

State of North Dakota
County of Cavalier

The foregoing instrument was acknowledged before me this
4th day of May, 2016 (date) by Vanessa Chaput (name of person acknowledged)

Morgan Zeis
Notary Public signature

Affix Seal
MORGAN ZEIS
Notary Public, State of North Dakota
My Commission Expires October 10, 2020

I acknowledge that I am the spouse of the above listed individual. I understand that my spouse and I are responsible for compliance with the conditions set out above. If it is determined that the above individual has violated (53-125(13)) the Commission may cancel or revoke the liquor license.

Alex Chaput
Signature of individual involved with application
(Spouse of individual listed above)

Alex Chaput
Printed name of applying individual

State of North Dakota
County of Cavalier

The foregoing instrument was acknowledged before me this
5th day May 2016 (date) by Alex Chaput (name of person acknowledged)

Morgan Zeis
Notary Public signature

Affix Seal
MORGAN ZEIS
Notary Public, State of North Dakota
My Commission Expires October 10, 2020

In compliance with the ADA, this spousal affidavit of non participation is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM 35-4178
Revised 1/2008

[illegible]
[illegible] South Dakota
[illegible] October 10, 2006

[illegible]
[illegible] South Dakota
[illegible] October 10, 2006

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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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: McCook Hotel Group LLC

Premise information

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

Premise Trade Name/DBA: Cobblestone Hotel & Suites

Premise Street Address: 1301 N Hwy 83

City: McCook County: Red Willow Zip Code: 69001

Premise Phone Number: _____

Email address: mccook@staycobblestone.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)

Last Name: Conrad First Name: Jennifer MI: M

Home Address (include PO Box if applicable): 813 Darlin Street

City: Sutherland County: Lincoln Zip Code: 69165

Home Phone Number: 308-386-6385 Business Phone Number: 920-237-0233 ext.

Social Security Number: _____ Drivers License Number & State:

Date Of Birth: 08/09/1989 Place Of Birth: Englewood, Co

Email address: jconrad

RECEIVED

☐ YES ☒ NO

MAY 23 2016

NEBRASKA LIQUOR

Spouses Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: _____

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Cambridge, NE	2015	2015			
North Platte, NE	2013	2015			
Sutherland, NE	2010	2013			
Omaha, NE	2007	2010			
Sutherland, NE	2005	2007			

YEAR FROM	TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2015	2015	Cambridge Hotel Group	John Porior	920-237-0333
2010	2015	Canteen Hospitality, LLC	Casey Connell	308-520-8616

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

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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

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: RBST Name on Certificate: Jennifer Conrad

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NEBRASKA LIQUOR CONTROL COMMISSION

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Jennifer Conrad	02/2016	RBST

*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:
Jennifer Conrad / GM	5-2015 2-2016	Cobblestone Inn; Suites 41502 Harvest Dr Cambridge NE 69022

5. Have you enclosed Form 147 regarding fingerprints?

☒ YES ☐ NO

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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CONTROL COMMISSION

ACKNOWLEDGEMENT

State of Nebraska
County of Furnas The foregoing instrument was acknowledged before me this
Feb 9 2016 (date) by Jennifer M. Conrad (name of person acknowledged)

Notary Public signature

Affix Seal
GENERAL NOTARY-State of Nebraska
BRENDA L. HAYES
My Appt. Exp. 10-3-19

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.

CERTIFICATION OF VITAL RECORD

STATE OF COLORADO

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NEBRASKA LIQUOR CONTROL COMMISSION 105

STATE OF COLORADO
CERTIFICATE OF LIVE BIRTH

INFANT

1. CHILD NAME (First, Middle, Last): Jennifer Mercedes CONRAD
2. Sex: Female
3. Date of Birth (Month, Day, Year): Aug. 9, 1989
4. Hour: 1:00 AM
5. City, Town, or Place of Birth: Englewood
6. PLACE OF BIRTH: ☒ Hospital ☐ Freestanding Birthing Center ☐ Clinic/Doctor's Office ☐ Residence ☐ Other (Specify)
7. County: Arapahoe
7. FACILITY NAME (If not institution, give street and number): Swedish Medical Center

ATTENDANT

8. I certify that this child was born alive at the place and time and on the date stated. Signature: Kimberley L. Campbell
9. DATE SIGNED (Month, Day, Year): 8/9/89
10. ATTENDANT'S NAME AND TITLE (If other than Certifier) (Type/Print): Name ☐ M.D. ☐ D.O. ☐ C.N.M. ☐ Other (Specify)
11. CERTIFIER'S NAME AND TITLE (Type/Print): Name Kimberley Campbell, MD ☒ M.D. ☐ D.O. ☐ Hospital Admin. ☐ C.N.M. ☐ Other (Specify)
12. ATTENDANT'S MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, ZIP Code): 7750 S. Broadway, Littleton, CO 80122
13. REGISTRAR'S SIGNATURE: Rebecca Ann Good, Deputy
14. DATE FILED BY REGISTRAR (Month, Day, Year): AUG. 16 1989

MOTHER

15. MOTHER NAME (First, Middle, Last (Maiden)): Olivia Ann Martinez
16. DATE OF BIRTH (Month, Day, Year): March 27, 1960
17. BIRTHPLACE (State or Foreign Country): Nebraska
18a. RESIDENCE-STATE: Colorado
18b. COUNTY: Arapahoe
18c. CITY, TOWN OR LOCATION: Englewood
18d. ZIP: 80112
18e. STREET AND NUMBER: 7532 E. Costilla Ave.
18f. INSIDE CITY LIMITS? ☐ Yes ☒ NO
19. MOTHER'S MAILING ADDRESS (If different than residence): Same

FATHER

20. FATHER NAME (First, Middle, Last): Robert Jay Conrad
21. DATE OF BIRTH (Month, Day, Year): December 10, 1958
22. BIRTHPLACE (State or Foreign Country): Ohio
23. I certify that the personal information provided on this certificate is correct to the best of my knowledge and belief. Signature of Parent or Other Informant: Olivia A. Conrad
24. RELATION TO CHILD: Mother

THIS IS TO CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF THE OFFICIAL RECORD WHICH IS IN MY CUSTODY.

01-008516

DATE ISSUED
AUG. 17 1989

H. H. Rohrer M.D.
H. H. ROHRER, M.D.
LOCAL REGISTRAR

Do not accept unless prepared on security paper with engraved border displaying the Colorado state seal and signature of the Registrar. PENALTY BY LAW, Section 25-2-118, Colorado Revised Statutes, 1982, if any person alters, uses, attempts to use or furnishes to another for deceptive use any vital statistics record. NOT VALID IF PHOTOCOPIED.

VR 100C 8/88

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Important Message:
If you have recently moved, please use the Polling Place feature. Locate Your Polling Place with the street and city address of your new/current residence.

HOME | REGISTRATION INFORMATION | POLLING PLACE | PROVISIONAL BALLOT | ABSENTEE BALLOT | Select Language

Registrant Search Information

Registrant Detail

Name:	Jennifer Mercedes Conrad
Party:	Nonpartisan
Polling Place:	Cambridge City Office Building 722 Patterson Street Cambridge, NE 69022

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Districts

DISTRICT NAME	DISTRICT TYPE
Cambridge Public Schools	School District
Central Com College Dist 2	Community College District
U.S. Congressional District 3	U.S. Congressional District
Appeals Court Judge Dist 6	Judge of Appeals Court Dist.
County Judge Dist 11	Judge of County Court Dist.
District Judge, Dist 11	Judge of Distict Court Dist.
Supreme Court Judge Dist 6	Judge of Supreme Court Dist.
Legislative District 44	Legislative District
Lower Republican NRD At Large	Natural Resources District
Nebraska PPD SubD 6	Public Power District
Twin Valleys PPD SubD 3	Public Power District
PSC District 5	Public Service Comm District
Board of Regents District 7	Board of Regents
ESU 11 District 7	ESU District
City Council Cambridge Ward 2	City Council (Ward)
County Commissioner District 1	County Board (Commiss./Superv)
Mayor of Cambridge	Mayor
Furnas Co. Weed Board	Weed Board
State Board of Education Dist7	State Board of Education

Voter View Mobile
Registration Information Polling Place Provisional Ballot Absentee Ballot

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® Voter View 2.9.1157.5

JENNIFER MERCEDES CONRAD

has earned a

Certificate of Achievement

- for those who serve or sell alcohol in Nebraska

RB-0055291

Expires: 01-26-2019 Amount Paid: $

Responsible Beverage Service Training

N E B R A S K A

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Certificate of Achievement

- for completing Food Handler Online Training

JENNIFER MERCEDES CONRAD

holds a

SERVE CLEAN PERMIT

Permit # SC-1051445

Permit Expires: 01-26-2018 Amount Paid: $20.00

foodsafety is in your HANDS

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RBST Online
Training Credentials

Certificate of Achievement

- for those who serve or sell alcohol in Nebraska

JENNIFER MERCEDES CONRAD

holds a

Lincoln Server/Seller permit

Permit # LNK-0055398

Permit Expires: 01-28-2019 Amount Paid: $15.00

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Recorded August 31, 2015 11:20 A.M.
Instrument No. 2015-01412

Recording Fees: $16.00 Pages: 2

Penelope Cooper, Deputy
Register of Deeds Red Willow County, NE

NEBRASKA DOCUMENTARY STAMP TAX
Date 08/31/2015
$ 753.75 By

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NEBRASKA LIQUOR CONTROL COMMISSION

AFTER RECORDING RETURN TO:
McCook Abstract Company
PO Box 648
McCook, NE 69001

WARRANTY DEED

W.A.G.S. Properties, LLC, GRANTOR, in consideration of One Dollar ($1.00) and other good and valuable consideration, conveys to GRANTEE, McCook Hotel Group, LLC, the following described real estate (as defined in Neb. Rev. Stat. § 76-201):

TRACT A: The East Half of the South 130 feet of Block 2, Four Corners Addition to the City of McCook, Red Willow County, Nebraska.

AND

TRACT B: Referring to the SE Corner of Block 2, Four Corners Addition to the City of McCook, Red Willow County, Nebraska; thence Northwesterly along the East line of said Block 2 a distance of 130.00 feet to the Point of Beginning; thence continuing along said East line of Block 2 a distance of 21.04 feet to a point; thence deflecting 84°03'28" left a distance of 148.28 feet to the NW corner of the East Half of the South 130.00 feet of said Block 2; thence Easterly along the North line of said East Half of the South 130.00 feet a distance of 151.92 feet to the Point of Beginning.

AND

TRACT 1: West Half of the South 130 feet of Block 2, Four Corners Addition to the City of McCook, Red Willow County, Nebraska LESS AND EXCEPT that tract in Warranty Deed recorded October 18, 1993 in Book 122, Page 73 to the State of Nebraska, Department of Roads.

AND

TRACT 2: North 104.2 feet of the South 234.2 feet of Block 2, Four Corners Addition to McCook, Red Willow County, Nebraska EXCEPT Tract B described as follows: Referring to the SE Corner of Block 2, Four Corners Addition to the City of McCook, Red Willow County, Nebraska; thence Northwesterly along the East line of said Block 2 a distance of 130.00 feet to the Point of Beginning; thence continuing along said East line of Block 2 a distance of 21.04 feet to a point; thence deflecting 84°03'28" left a distance of 148.28 feet to the NW corner of the East Half of the South 130.00 feet of said Block 2; thence Easterly along the North line of said East Half of the South 130.00 feet a distance of 151.92 feet to the Point of Beginning.

GRANTOR covenants (jointly and severally, if more than one) with GRANTEE that GRANTOR:

1. is lawfully seized of such real estate and that it is free from encumbrances, EXCEPT subject to easements, reservations, and restrictions of record;

2. has legal power and lawful authority to convey the same;

3. warrants and will defend title to the real estate against the lawful claims of all persons.

Executed: August 28th, 20 15.

W.A.G.S. Properties, LLC

By Chris Wagner, Member

STATE OF Nebraska)
)
COUNTY OF Red Willow)

The foregoing instrument was acknowledged before me this 28th day of August, 20 15 by Chris Wagner, Member of W.A.G.S. Properties, LLC.

Camy J. Bradley
Notary Public

My Commission Expires: 8-4-17

File No. M010953-

GENERAL NOTARY - State of Nebraska
CAMY J. BRADLEY
My Comm. Exp. Aug. 4, 2017

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NEBRASKA LIQUOR
CONTROL COMMISSION

06/16/2015

Cobblestone Hotel & Suites
McCook, NE
Number of Units: 54

Building Specifications: 54 unit Cobblestone Hotel & Suites with microwave & refrigerator in standard guest rooms, guest beer & wine bar, hot breakfast, guest fitness room, guest laundry room, pool, and meeting space.

Land Cost *(Estimated)*	**$335,000**
per room	*$6,204*
Building Construction	**$3,175,000**
per room	*$58,796*
Fixtures, Furnishings, and Equipment	**$691,000**
per room	*$12,796*
Indirect Costs	**$433,050**
per room	*$8,019*
Environmental	$550
Appraisal	$2,500
Architectural / Engineering / Professional	$100,000
Cobblestone Franchise Fee	$20,000
Surveys	$5,000
Working Capital	$50,000
Legal and Accounting Fees	$5,000
Construction Period Interest / Loan Fees / Closing	$80,000
Insurance & Taxes During Construction	$20,000
Project Contingency	$150,000
Total Project Costs:	**$4,634,050**
per room	*$85,816*

Requested Loan Amount:	$3,630,000	78.3%
Expected Cash Injection:	$1,004,050	21.7%

Sources of Funding

Bank Loan	$3,630,000	**Debt Interest:**	5.25%
Expected Cash Injection	$1,004,050	**Debt Terms:**	20
Total:	**$4,634,050**	**Debt Service:**	$293,526

** Pricing noted above valid for 90 days from document date shown*

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Core Distinction Group, LLC

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Numbers projected and compared to similar markets for a hotel with the following rooms: 120 Rooms

	January	February	March	April	May	June	July	August	September	October	November	December	TOTAL
Lodging Rooms Available	1,674	1,512	1,674	1,620	1,674	1,620	1,674	1,674	1,620	1,674	1,620	1,674	19,710
Lodging Occupancy %	35%	42%	53%	58%	66%	80%	80%	75%	74%	59%	48%	35%	58.8%
Total Occ. Rooms	586	635	887	940	1,105	1,296	1,339	1,256	1,199	988	778	586	11,593
Average Daily Rate	$84.12	$85.12	$89.84	$92.42	$97.04	$112.79	$112.97	$109.93	$104.00	$96.95	$89.22	$87.58	$99.51
REVENUE:													
Guest Rooms	49,286	54,055	79,708	86,838	107,214	146,176	151,289	138,017	124,675	95,754	69,377	51,313	1,153,702
Telephone / Misc. Revenue	146	159	222	235	276	324	335	314	300	247	194	146	2,898
Meeting Room Revenue	439	476	665	705	829	972	1,004	942	899	741	583	439	8,695
Vending / Bar Revenue	879	953	1,331	1,409	1,657	1,944	2,009	1,883	1,798	1,481	1,166	879	17,390
TOTAL HOTEL REVENUE	50,751	55,642	81,926	89,187	109,976	149,416	154,637	141,156	127,672	98,223	71,321	52,778	1,182,685

Hotel Expenses

HOTEL PAYROLL EXPENSE													
Hotel Manager	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	60,000
Housekeeping	2,637	2,858	3,992	4,228	4,973	5,832	6,026	5,650	5,395	4,444	3,499	2,637	52,170
Maintenance	293	318	444	470	552	648	670	628	599	494	389	293	5,797
Front Desk	6,000	6,000	6,000	6,000	6,000	6,000	6,000	6,000	6,000	6,000	6,000	6,000	72,000
Employee Benefits	557	567	617	628	661	699	708	691	680	638	596	557	7,599
Workers Comp Insurance	205	222	311	329	387	454	469	439	420	346	272	205	4,058
Payroll Tax	1,836	1,871	2,046	2,082	2,196	2,329	2,359	2,301	2,262	2,115	1,969	1,836	25,203
TOTAL HOTEL PAYROLL	16,528	16,835	18,410	18,737	19,768	20,962	21,232	20,709	20,355	19,037	17,725	16,528	226,825
HOTEL OPERATING EXPENSE													
Cleaning Supplies	205	222	311	329	387	454	469	439	420	346	272	205	4,058
Laundry Supplies	381	413	577	611	718	842	870	816	779	642	505	381	7,536
Linens	498	540	754	799	939	1,102	1,138	1,067	1,019	840	661	498	9,854
Guest Supplies	586	635	887	940	1,105	1,296	1,339	1,256	1,199	988	778	586	11,593
Repairs & Maintenance	205	222	311	329	387	454	469	439	420	346	272	205	4,058
Franchise Fee	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	30,000
Property Mgmt. System Expense	50	50	50	50	50	50	50	50	50	50	50	50	600
Complimentary Breakfast	2,197	2,381	3,327	3,524	4,143	4,860	5,022	4,708	4,496	3,704	2,916	2,197	43,475
Travel Agent Fees	246	270	399	434	536	731	756	690	623	479	347	257	5,769
Vending / Bar Expense	439	476	665	705	829	972	1,004	942	899	741	583	439	8,695
Office Supplies	381	413	577	611	718	842	870	816	779	642	505	381	7,536
Pool Expense	833	833	833	833	833	833	833	833	833	833	833	833	10,000
Marketing / Advertising	508	556	819	892	1,100	1,494	1,546	1,412	1,277	982	713	528	11,827
Utilities	2,791	3,060	4,506	4,905	6,049	8,218	8,505	7,764	7,022	5,402	3,923	2,903	65,048
Telephone	293	318	444	470	552	648	670	628	599	494	389	293	5,797
Cable	350	350	350	350	350	350	350	350	350	350	350	350	4,200
Credit Card Expense	1,172	1,270	1,774	1,879	2,210	2,592	2,678	2,511	2,398	1,975	1,555	1,172	23,187
Management Fee	3,045	3,339	4,916	5,351	6,599	8,965	9,278	8,469	7,660	5,893	4,279	3,167	70,961
Other Expense	410	445	621	658	773	907	937	879	839	691	544	410	8,115
Accounting Services	425	425	425	425	425	425	425	425	425	425	425	425	5,100
Professional Fees	100	100	100	100	100	100	100	100	100	100	100	100	1,200
TOTAL OPERATING EXPENSES	17,616	18,819	25,145	26,693	31,302	38,635	39,812	37,094	34,687	28,422	22,502	17,879	338,606
Gross Operating Profit (GOP)	32.72%	35.92%	46.84%	49.06%	53.56%	60.11%	60.52%	59.05%	56.89%	51.68%	43.60%	34.81%	52.19%
Income Before Fixed Expenses	16,607	19,989	38,371	43,757	58,905	89,819	93,594	83,353	72,630	50,764	31,095	18,370	617,253
RESERVES & FIXED EXPENSES													
Debt Service	24,461	24,461	24,461	24,461	24,461	24,461	24,461	24,461	24,461	24,461	24,461	24,461	293,526
Real Estate Taxes	625	625	625	625	625	625	625	625	625	625	625	625	7,500
Insurance	634	696	1,024	1,115	1,375	1,868	1,933	1,764	1,596	1,228	892	660	14,784
Reserves For Replacement	508	556	819	892	1,100	1,494	1,546	1,412	1,277	982	713	528	11,837
TOTAL RESERVES & FIXED	26,227	26,337	26,929	27,092	27,560	28,447	28,565	28,262	27,958	27,296	26,690	26,273	327,637
CASH FLOW BEFORE DEBT	14,840	18,112	35,903	41,125	55,806	85,832	89,489	79,552	69,133	47,929	28,865	16,558	583,143
CASH FLOW AFTER DEBT	(9,621)	(6,349)	$11,442	$16,665	$31,345	$61,372	$65,029	$55,091	$44,672	$23,468	$4,404	($7,903)	$289,616

Five Year Numbers Projected Summary

	YEAR 1 AMOUNT		YEAR 2 AMOUNT		YEAR 3 AMOUNT		YEAR 4 AMOUNT		YEAR 5 AMOUNT	
Lodging Rooms Available	19,710		19,710		19,710		19,710		19,710	
Lodging Occupancy %	58.8%		61.8%		60.0%		61.8%		64.9%	
Total Occ. Rooms	11,593		12,173		11,826		12,181		12,790	
Average Daily Rate	$99.51		$100.51		$101.52		$100.50		$102.01	
REVENUE:										
Guest Rooms	1,153,702	97.5%	1,223,501	97.6%	1,200,518	97.6%	1,224,168	97.6%	1,304,657	97.4%
Telephone / Misc. Revenue	2,898	0.2%	3,043	0.2%	2,957	0.2%	3,045	0.2%	3,197	0.2%
Meeting Room Revenue	8,695	0.7%	9,130	0.7%	8,870	0.7%	9,136	0.7%	12,790	1.0%
Vending / Bar Revenue	17,390	1.5%	18,259	1.5%	17,739	1.4%	18,271	1.5%	19,185	1.4%
	========		========		========		========		========	
TOTAL HOTEL REVENUE	1,182,685	100.0	1,253,933	100.0	1,230,083	100.0	1,254,620	100.0	1,339,829	100.0

NOTE: The above information is a forward-looking projection of anticipated expenses and profits with regard to this project based on the professional experience of Core Distinction Group LLC (CDG) participation in other projects, similar in nature. Occupancy and ADR projections derived from market data trends reported by Smith Travel Research (STR) in the market's proximity along with to date rate shopping of local and surrounding hotels. This projection could change due to changes in the economy, both locally and overall, the acceptance of the project by the local community and patrons and the fact that CDG has not been involved in a project in this area and in a municipality with these demographics in the past. Thereby, all investors understand and acknowledge that these forward looking projections are not warranted by CDG and are subject to change and alteration.

Core Distinction Group, LLC

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NEBRASKA LIQUOR CONTROL COMMISSION

06/16/2015

5 Year Projection

The following statistics are preliminary projection based on assumed costs of prototypical hotel.

	Year 1	%	Year 2	%	Year 3	%	Year 4	%	Year 5	%
Lodging Rooms Available	19,710		19,710		19,710		19,710		19,710	
Lodging Occupancy %	58.8%	58.8%	61.8%	61.8%	60.0%	60.0%	61.8%	61.8%	64.9%	64.9%
Total Occ. Rooms	11,593		12,173		11,826		12,181		12,790	
Average Daily Rate	$99.51		$100.51		$101.52		$100.50		$102.01	
REVENUE:										
Guest Rooms	1,153,702	97.55%	1,223,501	97.57%	1,200,518	97.60%	1,224,168	97.57%	1,304,657	97.37%
Telephone / Misc Revenue	2,898	0.25%	3,043	0.24%	2,957	0.24%	3,045	0.24%	3,197	0.24%
Meeting Space	8,695	0.74%	9,130	0.73%	8,870	0.72%	9,136	0.73%	12,790	0.95%
Vending / Bar Revenue	17,390	1.47%	18,259	1.46%	17,739	1.44%	18,271	1.46%	19,185	1.43%
TOTAL HOTEL REVENUE	**1,182,685**	**100%**	**1,253,933**	**100%**	**1,230,083**	**100%**	**1,254,620**	**100%**	**1,339,829**	**100%**
Hotel Expenses										
HOTEL PAYROLL EXPENSE										
Hotel Manager	60,000	5.07%	63,000	5.02%	66,150	5.38%	69,458	5.54%	72,930	5.44%
Housekeeping	52,170	4.41%	54,778	4.37%	53,217	4.33%	54,814	4.37%	57,554	4.30%
Maintenance	5,797	0.49%	6,086	0.49%	5,913	0.48%	6,090	0.49%	6,395	0.48%
Front Desk	72,000	6.09%	74,160	5.91%	76,385	6.21%	78,676	6.27%	81,037	6.05%
Employee Benefits	7,599	0.64%	7,921	0.63%	8,067	0.66%	8,362	0.67%	8,717	0.65%
Workers Comp Insurance	4,058	0.34%	4,261	0.34%	4,139	0.34%	4,263	0.34%	4,476	0.33%
Payroll Tax	25,203	2.13%	26,276	2.10%	26,734	2.17%	27,708	2.21%	28,889	2.16%
TOTAL HOTEL PAYROLL	**226,825**	**19.18%**	**236,482**	**18.86%**	**240,604**	**19.56%**	**249,370**	**19.88%**	**259,998**	**19.41%**
HOTEL OPERATING EXPENSE										
Cleaning Supplies	4,058	0.34%	4,261	0.34%	4,139	0.34%	4,263	0.34%	4,476	0.33%
Laundry Supplies	7,536	0.64%	7,912	0.63%	7,687	0.62%	7,918	0.63%	8,313	0.62%
Linens	9,854	0.83%	10,347	0.83%	10,052	0.82%	10,354	0.83%	10,871	0.81%
Guest Supplies	11,593	0.98%	12,173	0.97%	11,826	0.96%	12,181	0.97%	12,790	0.95%
Repairs & Maintenance	4,058	0.34%	4,261	0.34%	4,730	0.38%	5,481	0.44%	6,395	0.48%
Franchise Fee	30,000	2.54%	30,000	2.39%	30,000	2.44%	30,000	2.39%	30,000	2.24%
Property Mgmt. System Expense	600	0.05%	630	0.05%	662	0.05%	695	0.06%	729	0.05%
Complimentary Breakfast	43,475	3.68%	45,648	3.64%	44,348	3.61%	45,678	3.64%	47,962	3.58%
Travel Agent Fees	5,769	0.49%	6,118	0.49%	6,003	0.49%	6,121	0.49%	6,523	0.49%
Vending / Bar Expense	8,695	0.74%	9,130	0.73%	8,870	0.72%	9,136	0.73%	9,592	0.72%
Office Supplies	7,536	0.64%	7,912	0.63%	7,687	0.62%	7,918	0.63%	8,313	0.62%
Pool Expense	10,000	0.85%	10,500	0.84%	11,025	0.90%	11,576	0.92%	12,155	0.91%
Marketing / Advertising	11,827	1.00%	12,539	1.00%	12,301	1.00%	12,546	1.00%	13,398	1.00%
Utilities	65,048	5.50%	68,966	5.50%	67,655	5.50%	69,004	5.50%	73,691	5.50%
Telephone	5,797	0.49%	6,086	0.49%	5,913	0.48%	6,090	0.49%	6,395	0.48%
Cable	4,200	0.36%	4,453	0.36%	4,368	0.36%	4,455	0.36%	4,758	0.36%
Credit Card Expense	23,187	1.96%	24,346	1.94%	23,652	1.92%	24,362	1.94%	25,580	1.91%
Management Fee	70,961	6.00%	75,236	6.00%	73,805	6.00%	75,277	6.00%	80,390	6.00%
Other Expense	8,115	0.69%	8,521	0.68%	8,278	0.67%	8,527	0.68%	8,953	0.67%
Accounting Services	5,100	0.43%	5,407	0.43%	5,304	0.43%	5,410	0.43%	5,778	0.43%
Professional Fees	1,200	0.10%	1,272	0.10%	1,248	0.10%	1,273	0.10%	1,359	0.10%
TOTAL OPERATING EXPENSES	**338,606**	**28.63%**	**355,719**	**28.37%**	**349,552**	**28.42%**	**358,264**	**28.56%**	**378,422**	**28.24%**
Gross Operating Profit (GOP) Income Before Fixed Expenses	**617,253**	**52.19%**	**661,732**	**52.77%**	**639,927**	**52.02%**	**646,986**	**51.57%**	**701,409**	**52.35%**
RESERVES & FIXED EXPENSES										
Real Estate Taxes	7,500	0.63%	70,000	5.58%	71,400	5.80%	72,828	5.80%	74,285	5.54%
Insurance	14,784	1.25%	15,674	1.25%	15,376	1.25%	15,683	1.25%	16,748	1.25%
Reserves For Replacement (NA)	11,827	1.00%	37,618	3.00%	36,902	3.00%	37,639	3.00%	53,593	4.00%
TOTAL RESERVES & FIXED	34,110	2.88%	123,292	9.83%	123,679	10.05%	126,149	10.05%	144,626	10.79%
CASH FLOW BEFORE DEBT	583,143	49.31%	538,440	42.94%	516,248	41.97%	520,836	41.51%	556,783	41.56%
Debt Service	293,526	24.82%	293,526	23.41%	293,526	23.86%	293,526	23.40%	293,526	21.91%
NET CASH FLOW	$289,616	24.49%	$244,913	19.53%	$222,722	18.11%	$227,310	18.12%	$263,257	19.65%
RETURN ON CASH INVESTMENT	**28.84%**		**24.39%**		**22.18%**		**22.64%**		**26.22%**	

NOTE: The above information is a forwards looking projection of anticipated expenses and profits with regard to this project based on the professional experience of Core Distinction Group LLC (CDG) participation in other projects, similar in nature. Occupancy and ADR projections derived from market data trends reported by Smith Travel Research (STR) in the market's proximity along with to date rate shopping of local and surrounding hotels. This projection could change due to changes in the economy, both locally and overall, the acceptance of the project by the local community and patrons and the fact that CDG has not been involved in a project in this area and in a municipality with these demographics in the past. Thereby, all investors understand and acknowledge that these forward looking projections are not warranted by CDG and are subject to change and fluctuation.

Core Distinction Group, LLC

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5 Year Break Even

The following figures are preliminary projection based on assumed costs of prototypical hotel.

Rooms:

	Year 1	%	Year 2	%	Year 3	%	Year 4	%	Year 5	%
Lodging Rooms Available	19,710		19,710		19,710		19,710		19,710	
Lodging Occupancy %	37.2%	37.2%	43.3%	43.3%	43.4%	43.4%	44.6%	44.6%	45.1%	45.1%
Total Occ. Rooms	7,332		8,531		8,554		8,793		8,883	
Average Daily Rate	$99.51		$100.51		$101.52		$100.50		$102.01	
REVENUE:										
Guest Rooms	729,643	97.31%	857,451	97.34%	868,360	97.36%	883,696	97.34%	906,132	97.14%
Telephone / Misc Revenue	1,833	0.24%	2,133	0.24%	2,139	0.24%	2,198	0.24%	2,221	0.24%
Meeting Space	3,666	0.49%	4,266	0.48%	4,277	0.48%	4,397	0.48%	6,662	0.71%
Vending / Bar Revenue	14,664	1.96%	17,062	1.94%	17,108	1.92%	17,586	1.94%	17,766	1.90%
TOTAL HOTEL REVENUE	**749,806**	**100%**	**880,911**	**100%**	**891,884**	**100%**	**907,877**	**100%**	**932,781**	**100%**
Hotel Expenses										
HOTEL PAYROLL EXPENSE										
Hotel Manager	60,000	8.00%	63,000	7.15%	66,150	7.42%	69,458	7.65%	72,930	7.82%
Housekeeping	32,994	4.40%	38,390	4.36%	38,493	4.32%	39,569	4.36%	39,974	4.29%
Maintenance	1,833	0.24%	2,133	0.24%	2,139	0.24%	2,198	0.24%	2,221	0.24%
Front Desk	65,000	8.67%	66,950	7.60%	68,959	7.73%	71,027	7.82%	73,158	7.84%
Employee Benefits	6,393	0.85%	6,819	0.77%	7,030	0.79%	7,290	0.80%	7,531	0.81%
Workers Comp Insurance	2,566	0.34%	2,986	0.34%	2,994	0.34%	3,078	0.34%	3,109	0.33%
Payroll Tax	21,098	2.81%	22,535	2.56%	23,220	2.60%	24,077	2.65%	24,865	2.67%
TOTAL HOTEL PAYROLL	**189,885**	**25.32%**	**202,812**	**23.02%**	**208,984**	**23.43%**	**216,697**	**23.87%**	**223,788**	**23.99%**
HOTEL OPERATING EXPENSE										
Cleaning Supplies	2,566	0.34%	2,986	0.34%	2,994	0.34%	3,078	0.34%	3,109	0.33%
Laundry Supplies	4,766	0.64%	5,545	0.63%	5,560	0.62%	5,715	0.63%	5,774	0.62%
Linens	6,232	0.83%	7,251	0.82%	7,271	0.82%	7,474	0.82%	7,551	0.81%
Guest Supplies	7,332	0.98%	8,531	0.97%	8,554	0.96%	8,793	0.97%	8,883	0.95%
Repairs & Maintenance	2,566	0.34%	2,986	0.34%	3,422	0.38%	3,957	0.44%	4,442	0.48%
Franchise Fee	30,000	4.00%	30,000	3.41%	30,000	3.36%	30,000	3.30%	30,000	3.22%
Property Mgmt. System Expense	600	0.08%	630	0.07%	662	0.07%	695	0.08%	729	0.08%
Complimentary Breakfast	21,996	2.93%	25,593	2.91%	25,662	2.88%	26,379	2.91%	26,649	2.86%
Travel Agent Fees	3,648	0.49%	4,287	0.49%	4,342	0.49%	4,418	0.49%	4,531	0.49%
Vending / Bar Expense	7,332	0.98%	8,531	0.97%	8,554	0.96%	8,793	0.97%	8,883	0.95%
Office Supplies	4,766	0.64%	5,545	0.63%	5,560	0.62%	5,715	0.63%	5,774	0.62%
Pool Expense	7,500	1.00%	7,875	0.89%	8,269	0.93%	8,682	0.96%	9,116	0.98%
Marketing / Advertising	7,498	1.00%	8,809	1.00%	8,919	1.00%	9,079	1.00%	9,328	1.00%
Utilities	56,235	7.50%	66,068	7.50%	66,891	7.50%	68,091	7.50%	69,959	7.50%
Telephone	3,666	0.49%	4,266	0.48%	4,277	0.48%	4,397	0.48%	4,442	0.48%
Cable	4,200	0.56%	4,934	0.56%	4,996	0.56%	5,085	0.56%	5,225	0.56%
Credit Card Expense	14,664	1.96%	17,062	1.94%	17,108	1.92%	17,586	1.94%	17,766	1.90%
Management Fee	44,988	6.00%	52,855	6.00%	53,513	6.00%	54,473	6.00%	55,967	6.00%
Other Expense	5,132	0.68%	5,972	0.68%	5,988	0.67%	6,155	0.68%	6,218	0.67%
Accounting Services	5,100	0.68%	5,992	0.68%	6,066	0.68%	6,175	0.68%	6,345	0.68%
Professional Fees	1,200	0.16%	1,410	0.16%	1,427	0.16%	1,453	0.16%	1,493	0.16%
TOTAL OPERATING EXPENSES	**241,989**	**32.27%**	**277,128**	**31.46%**	**280,034**	**31.40%**	**286,193**	**31.52%**	**292,181**	**31.32%**
Gross Operating Profit (GOP) Income Before Fixed Expenses	**317,933**	**42%**	**400,972**	**46%**	**402,866**	**45%**	**404,987**	**45%**	**416,811**	**45%**
RESERVES & FIXED EXPENSES										
Real Estate Taxes	7,500	1.00%	70,000	7.95%	71,400	8.01%	72,828	8.02%	74,285	7.96%
Insurance	9,373	1.25%	11,011	1.25%	11,149	1.25%	11,348	1.25%	11,660	1.25%
Reserves For Replacement	7,498	1.00%	26,427	3.00%	26,757	3.00%	27,236	3.00%	37,311	4.00%
TOTAL RESERVES & FIXED	24,371	3.25%	107,439	12.20%	109,305	12.26%	111,413	12.27%	123,256	13.21%
CASH FLOW BEFORE DEBT	293,562	39.15%	293,533	33.32%	293,561	32.91%	293,575	32.34%	293,556	31.47%
Debt Service	293,526	39.15%	293,526	33.32%	293,526	32.91%	293,526	32.33%	293,526	31.47%
NET CASH FLOW	$36	0.00%	$6	0.00%	$34	0.00%	$48	0.01%	$29	0.00%

NOTE: The above information is a forwards looking projection of anticipated expenses and profits with regard to this project based on the professional experience of Core Distinction Group LLC (CDG) participation in other projects, similar in nature. Occupancy and ADR projections derived from market data trends reported by Smith Travel Research (STR) in the market's proximity along with to date rate shopping of local and surrounding hotels. This projection could change due to changes in the economy, both locally and overall, the acceptance of the project by the local community and patrons and the fact that CDG has not been involved in a project in this area and in a municipality with these demographics in the past. Thereby, all investors understand and acknowledge that these forward looking projections are not warranted by CDG and are subject to change and fluctuation.

Core Distinction Group, LLC

SUBMISSSION 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

DATE RECEIVED RECEIVED
MAY 23 2016
NEBRASKA LIQUOR CONTROL COMMISSION

Office Use Only

Class:	License #:

Applicant Name: McCook Hotel Group LLC
(Corporation, LLC, Partnership or Individual)

Trade Name: Cobblestone Hotel & Suites
(Doing Business As)

(920) 237-0233 — Phone Number

pprior@whgco.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
  or checks made payable to NSP should be mailed directly to the following address:
  The Nebraska State Patrol – CID Division
  3800 NW 12th 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: John J Porior
(Please print legibly)
Date of Birth: 2/25/69 Last 4 SSN: 6323
How was payment made to NSP? ☒**NSP PAYPORT** **Or** ☐**CHECK SENT TO NSP Ck #** _____

2. Name: Jennifer Conrad
(Please print legibly)
Date of Birth: 8/9/89 Last 4 SSN: 8946
How was payment made to NSP? ☒**NSP PAYPORT** **Or** ☐**CHECK SENT TO NSP Ck #** _____

3. Name: Jeremy Griesbach
(Please print legibly)
Date of Birth: 5/30/74 Last 4 SSN: 9273
How was payment made to NSP? ☒**NSP PAYPORT** **Or** ☐**CHECK SENT TO NSP Ck #** _____

4. Name: Alex Chaput
(Please print legibly)
Date of Birth: 11/6/89 Last 4 SSN: 9151
How was payment made to NSP? ☒**NSP PAYPORT** **Or** ☐**CHECK SENT TO NSP Ck #** _____

5. Name: _____
(Please print legibly)
Date of Birth: _____ Last 4 SSN: _____
How was payment made to NSP? ☐**NSP PAYPORT** **Or** ☐**CHECK SENT TO NSP Ck #** _____

6. Name: _____
(Please print legibly)
Date of Birth: _____ Last 4 SSN: _____
How was payment made to NSP? ☐**NSP PAYPORT** **Or** ☐**CHECK SENT TO NSP Ck #** _____

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): John J Porior Title: Managing Member

Signature: _____ Date: 5-18-16

PAYPORT
NEBRASKA.GOV

YOUR RECEIPT

Nebraska State Patrol - Criminal Identification Division
3800 NW 12th Street, Suite A
Lincoln NE 68521
(402)479-4971
Antonina.Anderson-Trumble@nebraska.gov
Transaction Id: 10167518

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THANK YOU FOR USING THE NEBRASKA STATE PATROL PAYPORT SERVICE

Customer Name: John J Porior
Credit Card Number: **** **** **** 7145

nebraska total amount charged $117.86

Items	Location	Quantity	Order ID	Total Amount
Liquor License		1	20712256	$28.75
Applicant Name: **John J Porior**				
Date of Birth: **02/2/1969**				
Last four digits Soc. Security Number: **6323**				
Liquor License		1	20712256	$28.75
Applicant Name: **Jennifer Conrad**				
Date of Birth: **08/09/1989**				
Last four digits Soc. Security Number: **8946**				
Liquor License		1	20712256	$28.75
Applicant Name: **Jeremy Griesbach**				
Date of Birth: **05/30/1974**				
Last four digits Soc. Security Number: **9273**				
Liquor License		1	20712256	$28.75
Applicant Name: **Alex Chaput**				
Date of Birth: **11/16/1989**				
Last four digits Soc. Security Number: **9151**				
Total remitted to the Nebraska State Patrol - Criminal Identification Division				$115.00

JOHN J PORIOR

has earned a

Certificate of Achievement

- for those who serve or sell alcohol in Nebraska

RB-0055394

Expires: 01-27-2019 Amount Paid: $

Responsible Beverage Service Training

N E B R A S K A

RBST Online
Training Credentials

General	Credential	Number	Earned	Expires
John J Porior 1301 n hwy 83 Mccook NE 69001	RBST GENERAL	RB-0055394	01-27-2016	01-27-2019
fbst	Nebraska	Wallet	Card	

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CONTROL COMMISSION

ALEX CHAPUT

has earned a

Certificate of Achievement

- for those who serve or sell alcohol in Nebraska

RB-0063956

Expires: 05-17-2019 Amount Paid: $

Responsible Beverage Service Training

N E B R A S K A

RBST Online
Training Credentials

General	Credential	Number	Earned	Expires
Alex Chaput 8841 105th ave ne Langdon ND 58249	RBST GENERAL	RB-0063956	05-17-2016	05-17-2019
fbst	Nebraska	Wallet	Card	

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RECEIVED

NEBRASKA LIQUOR
CONTROL COMMISSION

JEREMY MICHAEL GRIESBACH

has earned a

Certificate of Achievement

- for those who serve or sell alcohol in Nebraska

RB-0063905

Expires: 05-16-2019 Amount Paid: $

Responsible Beverage Service Training

N E B R A S K A

RBST Online
Training Credentials

General	Credential	Number	Earned	Expires
Jeremy Michael Griesbach 1301 n hwy 83 Mccook NE 69001	RBST GENERAL	RB-0063905	05-16-2016	05-16-2019
fbst	Nebraska	Wallet	Card	

5. Are you borrowing any money from any source, include family or friends, to establish and/or operate the business?

X 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 X NO

If yes, explain. (all involved persons must be disclosed on application)

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No silent partners

7. Will any of the furniture, fixtures and equipment to be used in this business be owned by others?

____ YES X 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 X 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 X 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.

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.

N/A

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:

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Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
John Porior	1-27-16	RBST
Jeremy Griesbach	5-16-16	RBST
Alex Chaput	5-12-16	RBST

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

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 _____

X Deed

_____ Purchase Agreement

14. When do you intend to open for business? May 2016

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

16. What are the anticipated hours of operation? 24 Hr

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 FROM	YEAR TO	SPOUSE: CITY & STATE	YEAR FROM	YEAR TO

If necessary attach a separate sheet.

Hiland, Brenda

From: John Porior <jporior@whgco.com>
Sent: Friday, May 27, 2016 1:31 PM
To: Hiland, Brenda
Subject: RE: Liquor license application, Cobblestone Hotel & Suites I-118142
Attachments: diagram.pdf; Form 100 page 6 & 7.pdf

Hi Brenda,

1. 308-345-8000
2. Attached
3. Attached
4. Attached
5. Attached
6. Will send as soon as I receive back
7. 920-237-0233

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Thanks

John J Porior
WHG Companies, LLC
980 American Drive
Neenah WI 54956
Phone:- 920-237-0233 Ext. 144
Fax: 866-403-7287
Email: jporior@whgco.com

From: Hiland, Brenda [mailto:brenda.hiland@nebraska.gov]
Sent: Friday, May 27, 2016 12:18 PM
To: jporior@whgco.com
Subject: Liquor license application, Cobblestone Hotel & Suites I-118142
Importance: High

I am reviewing you liquor license application. There are several things required before I can proceed processing your application.

1. A telephone number for the premises is required. Please provide this to us as soon as it is assigned. This will not hold up further processing at this time.

2. Please provide the dimensions (length x width) of the licensed area as well as the dimensions of the entire building. Provide a diagram of the area to be licensed.

3. Form 100, Page 6; #5 - Are you borrowing any money from any source, including family or friends to establish and/or operate the business? You answered yes. Please list the lender.

4. Form 100, Page 6; #10 - List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and list the individual(s) who will be authorized to write checks and/or withdrawals on accounts at this institution.

5. Form 100, Page 7; #17 – List the principal residences for the past 10 years for all persons required to sign (Jeremy Griesbach, John Porior and Alex Chaput) including spouses.

6. Form 100, Page 8; Jeremy Griesbach and Alex Chaput must also sign this form as they own more than 25% of the LLC.

7. Please provide a phone number for the LLC.

Brenda Hiland
Licensing Division
Nebraska Liquor Control Commission
(402) 471-2735
(402) 471-2814 fax
web: http://www.lcc.nebraska.gov
https://www.facebook.com/NebraskaLiquorControlCommission

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MAY 27 2016
NEBRASKA LIQUOR
CONTROL COMMISSION

No virus found in this message.
Checked by AVG - www.avg.com
Version: 2015.0.6201 / Virus Database: 4568/12305 - Release Date: 05/27/16

Hiland, Brenda

From:	John Porior <jporior@whgco.com>
Sent:	Wednesday, June 01, 2016 9:17 AM
To:	Hiland, Brenda
Subject:	FW: mccook
Attachments:	mccook.pdf

Hi Brenda,

Here is Alex's signed form, let me know if you need anything else

Thanks

John J Porior
WHG Companies, LLC
980 American Drive
Neenah WI 54956
Phone:- 920-237-0233 Ext. 144
Fax: 866-403-7287
Email: jporior@whgco.com

STATE OF NEBRASKA

Pete Ricketts
Governor

NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7252 (TTY)

June 2, 2016

WHG
John J Porior
980 American Dr
Neenah, WI 54956

RE: Liquor License Class I - #118142

Dear Applicant:

The Nebraska Liquor Control Commission (NLCC) has forwarded a copy of your liquor application to the local governing body listed on the application. They shall hold a public hearing within 45 days after receipt of receiving the documentation for the purpose of making a recommendation for or against the issuance of your license. The local governing body must then return a recommendation back into the NLCC office. The Commission urges you to attend any hearing before your local governing body. **This entire application process may require approximately 60 days.**

According to the statutes, no license shall be issued by the Commission until the expiration of the time allowed (10 days after receipt of the local recommendation at the NLCC office) for receipt of any objection requiring a hearing, such as citizen protests.

Also, prior to the issuance of this license all requirements must be met with the Nebraska State Fire Marshal and the Nebraska Department of Agriculture - Dairies & Foods Sanitation Division and Nebraska State Patrol. Any building or remodeling on the proposed premises prior to receiving a license is done at your own risk. Issued licenses are mailed to your local clerk for you to pick up and pay all appropriate fees. A liquor license is effective:

1. Upon payment of the license fees
2. Physical possession of the license
3. Effective date on the license

NEBRASKA LIQUOR CONTROL COMMISSION

Brenda Hiland

Brenda Hiland
Licensing Division

cc: File

STATE OF NEBRASKA

Pete Ricketts
Governor

NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
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TRS USER 800 833-7252 (TTY)

June 2, 2016

McCook City Clerk
505 West C Street
PO Box 1059
McCook, NE 69001

RE: Liquor license Class I - 118142 for Cobblestone Hotel & Suites

Clerk:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

1) Publicize one time not less than 7 days not more than 14 days prior to date of hearing.

2) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

1) There is a recommendation of denial from the local governing body.

2) A citizens protest; or

3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE PROPERLY LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

1) Upon payment of the license fees;
2) Physical possession of the license;
3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Brenda Hiland

Brenda Hiland
Licensing Division

Enclosures

Janice Wiebusch
Commissioner

Bob Batt
Chairman

Bruce Bailey
Commissioner

An Equal Opportunity/Affirmative Action Employer

RECEIPT

From:	Brenda Hiland
Phone #:	402-471-2735
Fax #:	402-471-2814
Company Name:	Nebraska Liquor Control Commission
To:	McCook City Clerk
Re:	McCook Hotel Group LLC
DBA:	Cobblestone Hotel & Suites
Application #:	I - 118142

PLEASE COMPLETE THE BOTTOM SECTION IMMEDIATELY UPON RECEIPT OF THIS APPLICATION AND FAX OR EMAIL THIS FORM BACK ACKNOWLEDGING THE RECEIPT OF THIS APPLICATION. PLEASE DATE STAMP IF THAT OPTION IS AVAILABLE. THANK YOU.

DATE OF RECEIPT

SIGNATURE

bh

RECOMMENDATION OF THE NEBRASKA LIQUOR CONTROL COMMISSION

Date Mailed from Commission Office: **June 2, 2016**

I,_____Clerk of _____

(City, Village or County)

Nebraska, hereby report to the Nebraska Liquor Control Commission in accordance with Revised Statutes of Nebraska, Chapter 53, Sec. 134 (7) the recommendation of said city, village or county, as the case may be relative to the application for a license under the provisions of the Nebraska Liquor Control Act as applied for by:

McCook Hotel Group LLC dba Cobblestone Hotel & Suites
1301 N Hwy 83, McCook / Red Willow County, 69001
Application for Class I - 118142
45 days – 7/18/2016

1. Notice of local hearing was published in a legal newspaper in or of general circulation in city, village or county, one time not less than 7 nor more than 14 days before time of hearing.

   Check one Yes_____ No_____

   The Statutes require that such hearing shall be held not more than 45 days after the date of receipt of this notice from the Commission.

2. Local hearing was held not more that 45 days after receipt of notice from the Nebraska Liquor Control Commission.

   Check one Yes_____ No_____

3. Date of hearing of Governing Body: _____

4. Type or write the Motion as voted upon by the Governing Body. If additional Motions are made by the Governing Body, then use an additional page and follow same format.

   _____

   _____

   _____

5. Motion was made by:_____Seconded by:_____

6. Roll Call Vote: _____

   _____

7. Check one: The motion passed: _____The motion failed: _____

8. If the motion is for recommendation of denial of the applicant, then list the reasons of the governing body upon which the motion was made.

   _____

   _____

   _____

   (Attached additional page if necessary)

SIGN HERE_____**DATE**_____

clerks signature

STATE OF NEBRASKA

Pete Ricketts
Governor

NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7252 (TTY)

June 2, 2016

State Fire Marshal Office
Attn: Deb Mitchell
438 West Market Street
Albion, NE 68620

RE: New application for Cobblestone Hotel & Suites

An application has been made to this office for a retail liquor license for:

LICENSE #:	Class I - 118142
LICENSEE NAME:	McCook Hotel Group LLC
TRADE NAME:	Cobblestone Hotel & Suites
ADDRESS:	1301 N Hwy 83, McCook / Red Willow County 69001
PHONE:	308-345-8000 920-237-0233 308-386-6385
EMAIL:	jporior@whgco.com

Kindly advise the Licensing Division of the Liquor Control Commission if the premises meet the standards as set by your department.

MEETS REQUIREMENTS: **YES** _____ **NO** _____

Signed:_____

Report Due: 7/5/2016 - bh

Janice Wiebusch
Commissioner

Bob Batt
Chairman
An Equal Opportunity/Affirmative Action Employer

Bruce Bailey
Commissioner

Hiland, Brenda

From: Hiland, Brenda
Sent: Friday, May 27, 2016 12:18 PM
To: 'jporior@whgco.com'
Subject: Liquor license application, Cobblestone Hotel & Suites I-118142

Importance: High

I am reviewing you liquor license application. There are several things required before I can proceed processing your application.

1. A telephone number for the premises is required. Please provide this to us as soon as it is assigned. This will not hold up further processing at this time.
2. Please provide the dimensions (length x width) of the licensed area as well as the dimensions of the entire building. Provide a diagram of the area to be licensed.
3. Form 100, Page 6; #5 - Are you borrowing any money from any source, including family or friends to establish and/or operate the business? You answered yes. Please list the lender.
4. Form 100, Page 6; #10 - List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and list the individual(s) who will be authorized to write checks and/or withdrawals on accounts at this institution.
5. Form 100, Page 7; #17 – List the principal residences for the past 10 years for all persons required to sign (Jeremy Griesbach, John Porior and Alex Chaput) including spouses.
6. Form 100, Page 8; Jeremy Griesbach and Alex Chaput must also sign this form as they own more than 25% of the LLC.
7. Please provide a phone number for the LLC.

Brenda Hiland
Licensing Division
Nebraska Liquor Control Commission
(402) 471-2735
(402) 471-2814 fax
web: http://www.lcc.nebraska.gov
https://www.facebook.com/NebraskaLiquorControlCommission

Hiland, Brenda

From: John Porior <jporior@whgco.com>
Sent: Thursday, June 02, 2016 11:40 AM
To: Hiland, Brenda
Subject: RE: Liquor license application, Cobblestone Hotel & Suites I-118142

Yes

John J Porior
WHG Companies, LLC
980 American Drive
Neenah WI 54956
Phone:- 920-237-0233 Ext. 144
Fax: 866-403-7287
Email: jporior@whgco.com

From: Hiland, Brenda [mailto:brenda.hiland@nebraska.gov]
Sent: Thursday, June 02, 2016 11:30 AM
To: John Porior <jporior@whgco.com>
Subject: RE: Liquor license application, Cobblestone Hotel & Suites I-118142

Is this description correct? " Three story hotel approximately 173 x 65'".

Brenda Hiland
Licensing Division
Nebraska Liquor Control Commission
(402) 471-2735
(402) 471-2814 fax
web: http://www.lcc.nebraska.gov
https://www.facebook.com/NebraskaLiquorControlCommission

From: John Porior [mailto:jporior@whgco.com]
Sent: Thursday, June 02, 2016 11:21 AM
To: Hiland, Brenda
Subject: RE: Liquor license application, Cobblestone Hotel & Suites I-118142

Yes

John J Porior
WHG Companies, LLC
980 American Drive
Neenah WI 54956
Phone:- 920-237-0233 Ext. 144

Fax: 866-403-7287
Email: jporior@whgco.com

-

From: Hiland, Brenda [mailto:brenda.hiland@nebraska.gov]
Sent: Thursday, June 02, 2016 11:20 AM
To: John Porior <jporior@whgco.com>
Subject: RE: Liquor license application, Cobblestone Hotel & Suites I-118142

Is the 26' x 28' lounge included in the 173' x 65' dimensions?

Brenda Hiland
Licensing Division
Nebraska Liquor Control Commission
(402) 471-2735
(402) 471-2814 fax
web: http://www.lcc.nebraska.gov
https://www.facebook.com/NebraskaLiquorControlCommission

From: John Porior [mailto:jporior@whgco.com]
Sent: Tuesday, May 31, 2016 4:32 PM
To: Hiland, Brenda
Subject: RE: Liquor license application, Cobblestone Hotel & Suites I-118142

It is a separate room in the hotel but not separate from the building

John J Porior
WHG Companies, LLC
980 American Drive
Neenah WI 54956
Phone:- 920-237-0233 Ext. 144
Fax: 866-403-7287
Email: jporior@whgco.com

-

From: Hiland, Brenda [mailto:brenda.hiland@nebraska.gov]
Sent: Tuesday, May 31, 2016 4:25 PM
To: John Porior <jporior@whgco.com>
Subject: RE: Liquor license application, Cobblestone Hotel & Suites I-118142

Is the lounge separate? Is it outdoor?

Brenda Hiland

Licensing Division
Nebraska Liquor Control Commission
(402) 471-2735
(402) 471-2814 fax
web: http://www.lcc.nebraska.gov
https://www.facebook.com/NebraskaLiquorControlCommission

From: John Porior [mailto:jporior@whgco.com]
Sent: Tuesday, May 31, 2016 12:55 PM
To: Hiland, Brenda
Subject: RE: Liquor license application, Cobblestone Hotel & Suites I-118142

Hi Brenda,

It is a 3 story building that is approximately 173' x 65' with Lounge area approximately 26' x 28'"

Thanks

John J Porior
WHG Companies, LLC
980 American Drive
Neenah WI 54956
Phone:- 920-237-0233 Ext. 144
Fax: 866-403-7287
Email: jporior@whgco.com

-

From: Hiland, Brenda [mailto:brenda.hiland@nebraska.gov]
Sent: Tuesday, May 31, 2016 11:29 AM
To: John Porior <jporior@whgco.com>
Subject: RE: Liquor license application, Cobblestone Hotel & Suites I-118142

Is this description accurate?
Example: "One story building approximately 173' x 65' with outdoor area approximately 26' x 28'"

Brenda Hiland
Licensing Division
Nebraska Liquor Control Commission
(402) 471-2735
(402) 471-2814 fax
web: http://www.lcc.nebraska.gov
https://www.facebook.com/NebraskaLiquorControlCommission

From: John Porior [mailto:jporior@whgco.com]
Sent: Friday, May 27, 2016 1:31 PM
To: Hiland, Brenda
Subject: RE: Liquor license application, Cobblestone Hotel & Suites I-118142

Hi Brenda,

1. 308-345-8000
2. Attached
3. Attached
4. Attached
5. Attached
6. Will send as soon as I receive back
7. 920-237-0233

Thanks

John J Porior
WHG Companies, LLC
980 American Drive
Neenah WI 54956
Phone:- 920-237-0233 Ext. 144
Fax: 866-403-7287
Email: jporior@whgco.com

-

From: Hiland, Brenda [mailto:brenda.hiland@nebraska.gov]
Sent: Friday, May 27, 2016 12:18 PM
To: jporior@whgco.com
Subject: Liquor license application, Cobblestone Hotel & Suites I-118142
Importance: High

I am reviewing you liquor license application. There are several things required before I can proceed processing your application.

1. A telephone number for the premises is required. Please provide this to us as soon as it is assigned. This will not hold up further processing at this time.

2. Please provide the dimensions (length x width) of the licensed area as well as the dimensions of the entire building. Provide a diagram of the area to be licensed.

3. Form 100, Page 6; #5 - Are you borrowing any money from any source, including family or friends to establish and/or operate the business? You answered yes. Please list the lender.

4. Form 100, Page 6; #10 - List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and list the individual(s) who will be authorized to write checks and/or withdrawals on accounts at this institution.

5. Form 100, Page 7; #17 – List the principal residences for the past 10 years for all persons required to sign (Jeremy Griesbach, John Porior and Alex Chaput) including spouses.

6. Form 100, Page 8; Jeremy Griesbach and Alex Chaput must also sign this form as they own more than 25% of the LLC.

7. Please provide a phone number for the LLC.

Brenda Hiland
Licensing Division
Nebraska Liquor Control Commission
(402) 471-2735
(402) 471-2814 fax
web: http://www.lcc.nebraska.gov
https://www.facebook.com/NebraskaLiquorControlCommission

No virus found in this message.
Checked by AVG - www.avg.com
Version: 2015.0.6201 / Virus Database: 4568/12305 - Release Date: 05/27/16

No virus found in this message.
Checked by AVG - www.avg.com
Version: 2015.0.6201 / Virus Database: 4591/12335 - Release Date: 05/31/16

No virus found in this message.
Checked by AVG - www.avg.com
Version: 2015.0.6201 / Virus Database: 4591/12335 - Release Date: 05/31/16

No virus found in this message.
Checked by AVG - www.avg.com
Version: 2015.0.6201 / Virus Database: 4591/12347 - Release Date: 06/02/16

No virus found in this message.
Checked by AVG - www.avg.com
Version: 2015.0.6201 / Virus Database: 4591/12347 - Release Date: 06/02/16

RESTRICTED: This information not to be released to other than authorized personnel.

LIQUOR APPLICATION REPORT

POLICE DEPARTMENT REPORT

DATE REQUESTED: June 3, 2016 DUE DATE: June 13, 2016

APPLICANT: McCook Hotel Group

DBA: Cobblestone Hotel & Suites

APPLICANT'S ADDRESS:

PHONE NUMBER (HOME): (BUSINESS):

PROPOSED LICENSE ADDRESS: 1301 North Highway 83

TYPE OF LICENSE: Class "I" - License #118142
(Beer, Wine & Distilled Spirits, On Sale Only)

TYPE OF INVESTIGATION:

( ) Purchase of Business
( ) Upgrade of Existing License
( ) Expansion of Present Business
( ) Renewal - Long Form
(x) New and Additional License
( ) Transfer of Location
( ) Manager

TYPE OF BUSINESS:

(x) Hotel/Motel
( ) Liquor/On-Off Sale
( ) Liquor/Off-Sale Only
( ) Other - Convenience Store
( ) Restaurant/Food Service
( ) Liquor/On-Sale Only
( ) Entertainment/Bottle Club

TYPE OF OWNERSHIP: ( ) Corporation ( ) Partnership ( ) Individual
(x) Limited Liability Company (LLC)

****

Investigation Completed by: SGT OWEN McPHILLIPS

Date: 06-13-2016

EXHIBIT #4

PAGES(S) 6

PREMISE:

1. Type of Neighborhood: (**X**) Commercial; ( ) Industrial; ( ) Residential.
2. Condition:

   a) Traffic: **Traffic flow is Highway traffic, site should not pose any interruptions**

   b) Parking: **Business will have its own on-site parking**
3. Designation of Adjacent Street (Local, Collector, Minor or Major Arterial, Highway):

   Highway
4. Street Width and Profile: **Four lane state highway with center turn lane**
5. Speed Limit: **45mph**
6. Average Daily Traffic Count: **From 2014 NDOR map ADT=5215**
7. Accident Report at Adjacent Intersections: **No accidents reported in the last 6 months**
8. Analysis of Traffic Effects: **Occupying previous business, no adverse effects expected**
9. Ready for Operation: ( ) Yes (**X**) No

   If no, estimated date: **July 2016**
10. Type of Food Service: (**X**) Microwave ( ) Grill ( ) Kitchen
11. Number of Employees: Full Time: **2** Part Time: **10**
12. Does premise comply with legal distance from churches, schools, etc.?

    (**X**) Yes ( ) No

    If No, specify:
13. The Business has been inspected within the last three (3) months by the City's Building Inspector. (**X**) Yes ( ) No (If yes, attach report)
14. The Business has been inspected within the last three (3) months by the City's Fire Department. ( ) Yes (**X**) No (If yes, attach report)
15. Estimated Seating Capacity: **60**
16. Estimated Number of Customers per Day: **10**
17. Hours of Operation: **4:30 pm – 11:30 pm**

FINANCING:

18. Purchase Price:

19. Property/Equipment Value:

20. Previous Year's Gross Receipts:

21. Amount Financed: Source:

    Collateral: Co-Signers:

22. Lease Agreement:

23. Estimated Annual Payroll:

24. Estimated Gross Income: %Food: %Liquor:

MISCELLANEOUS:

25. Number of Licenses and Types within competitive distance:

26. Is another person responsible for Daily Operation? (**X**) Yes ( ) No

    If yes, who?

    (complete investigation of manager form)

PERSONAL HISTORY:

27. Applicant's name: **Jennifer Mercedes Conrad (Regional Manager)**

28. Date of Birth: **08-09-1989**

29. Sex: **F**

30. Home address: **41502 Harvest Drive, Cambridge, NE 69022**

31. Citizen of the United States? (**X**) Yes ( ) No

    If Naturalized, Certificate Number:

    Place:

32. Proper Residence has been Established? (**X**) Yes ( ) No

    If no, explain:

33. Criminal History – Has applicant been arrested and/or pled guilty to any
( ) misdemeanor? ( ) felony? (If felony, attach detailed description.)

34. Has applicant been cited for and/or been found in violation of the Liquor Laws of the State of Nebraska or other State in which previously licensed?

( ) Yes (X) No (If yes, attach detailed description)

35. Has applicant had a beneficial interest in another liquor license? (**X**) Yes ( ) No

If yes, Name, City, Address, Type of License: **Cambridge Hotel Group, Cambridge, NE, Beer/Wine**

36. Records Check Made (civil history): ( ) Yes (**X**) No (Attach Records)

37. Investigation made of character/reputation of applicant, report details of investigation:

No adverse information found.

38. Number of Hours that will be spent by applicant at license premises each week?
Approximately 18

39. Number of hours that will be spent by applicant working in occupation other than licensed premises each week? **40**

41. Applicant will oversee in person the management of licensed premises? (**X**) Yes ( ) No

42. Another person will be responsible for the management of the licensed premises?

(**X**) Yes ( ) No (If yes, attach investigative report for manager)

PERSONAL HISTORY – SPOUSE: **Not applicable – No spouse**

43. Spouses Name:

44. Date of Birth:

45. Sex:

46. Home Address:

47. Citizen of the United States? ( ) Yes ( ) No

    If no, explain:

48. Proper residence has been established? ( ) Yes ( ) No

    If no, explain:

49. Criminal History – Has spouse been arrested and/or pled guilty to any ( ) misdemeanor?

    ( ) felony? (If felony, attach detailed description.)

50. Has spouse been cited for and/or been found in violation of the Liquor Laws of the State of Nebraska or other State in which previously licensed?

    ( ) Yes ( ) No (If yes, attach detailed description.)

51. Has spouse had a beneficial interest in another liquor license? ( ) Yes ( ) No

    If yes, Name, City, Address, Type of License:

52. Records check made (civil history). ( ) Yes ( ) No (attach records)

53. Investigation made of character/reputation of spouse, report details of investigation:

54. Number of Hours that will be spent by spouse at licensed premises each week?

55. Number of Hours that will be spent by spouse working in occupation other than license premises each week?

56. Spouse will oversee in person the management of the licensed premises?

    ( ) Yes ( ) No

57. Another person will be responsible for the management of the licensed premises?

    ( ) Yes ( ) No (If yes, attach investigative report for manager.)

PERSONAL HISTORY – MANAGER:

58. Manager's Name: **Joseph Michael Ryland**

59. Date of Birth: **05-21-1985**

60. Sex: **M**

61. Home Address: **3 Clubhouse Drive, McCook, NE 69001**

62. Citizen of the United States? (**X**) Yes ( ) No

    If Naturalized, Certificate Number:

    Place:

63. Proper residence has been established? ( ) Yes (**X**) No

    If no, explain: **Moved to Nebraska from Pennsylvania two weeks ago.**

64. Criminal History – Has manager been arrested and/or pled guilty to any
    ( ) misdemeanor? ( ) felony? (If felony, attach detailed description.)

65. Has manager been cited for and/or found in violation of the Liquor Laws of the State of Nebraska or other State in which previously licensed?

    ( ) Yes (**X**) No

66. Has manager had a beneficial interest in another liquor license? ( ) Yes (**X**) No

    If yes, Name, City, Address, Type of License:

67. Records check made (civil history). ( ) Yes (**X**) No (attach records)

68. Investigation made of character/reputation of manager, report details of investigation:

    No adverse information found.

69. Number of Hours that will be spent by manager at licensed premises each week: **45**

70. Number of Hours that will be spent by manager working in occupation other than licensed premises each week: **0**

LIQUOR APPLICATION REPORT

PLANNING REPORT

DATE REQUESTED: June 3, 2016 DUE DATE: June 13, 2016

PROPOSED LICENSED PREMISES __X___IS, _____IS NOT WITHIN THE CORPORATE LIMITS OF THE MUNICIPALITY.

IF NOT, DO NOT PROCEED WITH THIS REPORT. SIGN AND DATE BELOW AND RETURN THIS FORM TO THE CITY CLERK.

****

APPLICANT: McCook Hotel Group LLC; dba Cobblestone Hotel & Suites

LOCATION: 1301 No Hwy 83

REQUESTED LICENSE: Class "I" - (Beer, Wine & Distilled Spirits, On Sale Only)

EXISTING ZONING: Highway Commercial

The proposed licensed premises _X__is, _____is not a permitted use in this zoning classification.

EXISTING LAND USE: Storage units (previous), New hotel (current build)

NORTH: Glass Express (Commercial), Royal Crown Storage (commercial)

SOUTH: Vacant property (Commercial)

EAST: SW Neb. Crematory (Business Commercial), Webb's Body Shop (BC)

WEST: Vacant property (HC), Kenney's Marine (HC)

GENERAL NEIGHBORHOOD/AREA LAND USES: The neighborhood consists of commercial uses along with some vacant properties.

PROXIMITY TO SCHOOLS, CHURCHES, HOSPITALS, LIBRARIES, HOMES FOR THE AGED AND PUBLIC INSTITUTIONS (please specify):

Significant distances from all uses.

EXHIBIT #5

PAGES(S) 2

ANALYSIS OF NEIGHBORHOOD EFFECTS: No significant effects due to surrounding uses.

PARKING REQUIREMENTS/PROBLEMS: All requirements have been met and are in compliance.

DATE: 6-9-16

SIGNED: [signature]

Building Official

CITY MANAGER'S REPORT
JUNE 20, 2016 CITY COUNCIL MEETING

ITEM: **4A**

Approve the minutes of the June 6, 2016 regular City Council meeting.

BACKGROUND:

Receive and approve the minutes.

FISCAL IMPACT: None.

RECOMMENDATION:

Approve the minutes of the June 6, 2016 regular City Council meeting.

APPROVALS:

Lea Ann Doak, City Clerk — June 14, 2016

MCCOOK CITY COUNCIL
June 6, 2016
6:30 P.M.

A MEETING OF THE MAYOR AND COUNCIL OF THE CITY OF MCCOOK, NEBRASKA convened in open, regular, and public session at 6:30 o'clock P.M. in the City Council Chambers.

Present: Mayor Gonzales, Councilmembers Hepp, Calvin, Weedin.

Absent: Councilmember McDowell.

City Officials present: City Manager Schneider, City Attorney Mustion, City Clerk Doak, Utilities Director Dutcher, Fire Chief Harpham, Public Works Director Potthoff, and Senior Services Director Siegfried.

Notice of the meeting was given in advance thereof by publication in the McCook Daily Gazette on June 6, 2016, the designated method of giving notice, a copy of the proof of publication being attached to these minutes. Advance notice of the meeting was also given to the Mayor and members of the City Council and a copy of the Acknowledgment of Receipt of such notice is attached to these minutes. Availability of the agenda was communicated in the advance notice to the Mayor and Council. All proceedings hereafter shown were taken while the meeting was open to the attendance of the public.

Mayor Gonzales announced that a copy of the Open Meetings Act was posted by the entrance to the Council Chambers and available for public review. Invocation was provided by Bruce Lester, pastor of Evangelical Free Church. Following the Pledge of Allegiance to the flag of the United States of America, Mayor Gonzales called the meeting to order.

1. Citizen's Comments.

There were no citizen's comments.

2. Announcements & Recognitions.

There were no announcements or recognitions.

3. Presentations.

A. Presentation by Isaiah Petty on the rehabilitation of the sand volleyball court in Kelley Park as his Eagle Scout Project and approve the Parks Advisory Board's recommendation to allow this project to move forward.

Isaiah Petty presented his request to rehabilitate the sand volleyball court in Kelley Park as his Eagle Scout Project.

Upon a motion by Councilmember Calvin, seconded by Councilmember Weedin, the Council voted to approve the Parks Advisory Board's recommendation to allow this project to move forward. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, Weedin. NAY: None. ABSENT: McDowell.

4. Public Hearings.

A. Conduct a public hearing on the application of Lyle & Sharla Laverack; dba "Club Paradise", for a Class "IB" - (Beer, Wine Distilled Spirits, On Sale, Beer Off Sale Only) License under the Nebraska Liquor Control Commission, to be located at 1006 West "B" Street, McCook, Nebraska.

Upon a motion by Mayor Gonzales, seconded by Councilmember Hepp, the Council voted to recess as a City Council and convene a public hearing for the purpose of receiving public comment on the application of Lyle & Sharla Laverack; dba "Club Paradise", for a Class "IB" - (Beer, Wine Distilled Spirits, On Sale, Beer Off Sale Only) License under the Nebraska Liquor Control Commission, to be located at 1006 West "B" Street, McCook, Nebraska with the City Attorney to act as hearing officer. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, Weedin. NAY: None. ABSENT: McDowell.

The City Attorney offered and received into evidence Exhibit #1 - City Manager's Report prepared for the June 6, 2016 City Council meeting (1 page); Exhibit #2 - Notice of Hearing published (1 page); Exhibit #3 - the application and all attachments received from the Nebraska Liquor Control Commission (27 pages); and Exhibit #4 - Police Report (6 pages).

In the absence of the Chief of Police, City Manager Schneider reviewed the application and stated that city staff recommends approval of the application.

There being no one else present to comment, upon a motion by Councilmember Weedin, seconded by Councilmember Hepp, the Council voted to adjourn the public hearing and to reconvene as a City Council. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, Weedin. NAY: None. ABSENT: McDowell.

B. Recommend approval to the Nebraska Liquor Control Commission the application of Lyle & Sharla Laverack; dba "Club Paradise", for a Class "IB" - (Beer, Wine Distilled Spirits, On Sale, Beer Off Sale Only) License under the Nebraska Liquor Control Commission, to be located at 1006 West "B" Street, McCook, Nebraska.

Upon a motion by Councilmember Calvin, seconded by Councilmember Weedin, the Council voted to recommend approval to the Nebraska Liquor Control Commission the application of Lyle & Sharla Laverack; dba "Club Paradise", for a Class "IB" - (Beer, Wine Distilled Spirits, On Sale, Beer Off Sale Only) License under the Nebraska Liquor Control Commission, to be located at 1006 West "B" Street, McCook, Nebraska. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, Weedin. NAY: None. ABSENT: McDowell.

5. Consent Agenda.

Councilmember Weedin requested that Item N be removed from the Consent Agenda and placed on the Regular Agenda.

Mayor Gonzales requested that Item J and Item K be removed from the Consent Agenda and placed on the Regular Agenda.

A. Approve the minutes of the May 16, 2016 regular City Council meeting.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to approve the minutes of the May 16, 2016 regular City Council meeting. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

B. Approve the application for a Special Designated Liquor License submitted by Schmick's Market, Inc., Liquor License #IDK-084561, a dance/reception to be held at the McCook Municipal Auditorium, 302 West 5th Street, on August 27, 2016 from 4:00 P.M. to 11:59 P.M.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to approve the application for a Special Designated Liquor License submitted by Schmick's Market, Inc., Liquor License #IDK-084561, a dance/reception to be held at the McCook Municipal Auditorium, 302 West 5th Street, on August 27, 2016 from 4:00 P.M. to 11:59 P.M. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

C. Approve the application for a Special Designated Liquor License submitted by Schmick's Market, Inc., Liquor License #IDK-084561, for a dance/reception to be held at the Red Willow County Fairgrounds Community Building, 1412 West 5th Street, on July 2, 2016, from 4:00 P.M. to 11:59 P.M.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to approve the application for a Special Designated Liquor License submitted by Schmick's Market, Inc., Liquor License #IDK-084561, for a dance/reception to be held at the Red Willow County Fairgrounds Community Building, 1412 West 5th Street, on July 2, 2016, from 4:00 P.M. to 11:59 P.M. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

D. Approve the application for a Special Designated Liquor License submitted by JBN, Inc., dba "Hi-Times Liquor Mart 1", Liquor License #DK-100025, for a dance/reception to be held at the McCook Municipal Auditorium, 302 West 5th Street, on July 8, 2016 from 12:00 P.M. to 12:30 A.M. on July 9, 2016.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to approve the application for a Special Designated Liquor License submitted by JBN, Inc., dba "Hi-Times Liquor Mart 1", Liquor License #DK-100025, for a dance/reception to be held at the McCook Municipal Auditorium, 302 West 5th Street, on July 8, 2016 from 12:00 P.M. to 12:30 A.M. on July 9, 2016. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

E. Approve the application for a Special Designated Liquor License submitted by Mo Dough LLC, Liquor License #IK-057785, for a reception to be held at the Peter and Dolores Graff Event Center, 104 East "M" Street, on November 10, 2016 from 1:00 P.M. to 1:00 A.M.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to approve the application for a Special Designated Liquor License submitted by Mo Dough LLC, Liquor License #IK-057785, for a reception to be held at the Peter and Dolores Graff Event Center, 104 East "M" Street, on November 10, 2016 from 1:00 P.M. to 1:00 A.M. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

F. Approve the application for a Special Designated Liquor License submitted by Mo Dough LLC, Liquor License #IK-057785, for a reception to be held at the McCook AFRC, 38709 Hwy 6 & 34, on October 1, 2016 from 8:00 A.M. to 1:00 A.M.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to approve the application for a Special Designated Liquor License submitted by Mo Dough LLC,

Liquor License #IK-057785, for a reception to be held at the McCook AFRC, 38709 Hwy 6 & 34, on October 1, 2016 from 8:00 A.M. to 1:00 A.M. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

G. Approve the request from Rich Cappel to close the north half of the 100 Block of West Second Street on Friday, June 24, 2016 from 8:00 A.M. to 5:30 P.M. for NAPA's Re-Grand Opening.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to approve the request from Rich Cappel to close the north half of the 100 Block of West Second Street on Friday, June 24, 2016 from 8:00 A.M. to 5:30 P.M. for NAPA's Re-Grand Opening. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

H. Receive and file the Financial Report for the period ending April 30, 2016.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to receive and file the Financial Report for the period ending April 30, 2016. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

I. Approve and authorize the Mayor to sign the 2016/2017 contract with the West Central Area Agency on Aging (WCNAAA) for the purpose of defining and specifying the separate and mutual responsibilities of each in the management, operation, support, monitoring, and evaluation of the McCook Heritage Senior Center.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to approve and authorize the Mayor to sign the 2016/2017 contract with the West Central Area Agency on Aging (WCNAAA) for the purpose of defining and specifying the separate and mutual responsibilities of each in the management, operation, support, monitoring, and evaluation of the McCook Heritage Senior Center. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

L. Authorize staff to accept the grant offer agreement with the Federal Aviation Administration for Project No. 3-31-0052-014-2016 for the construction of a new 6 place t-hangar at McCook Ben Nelson Regional Airport and authorize the Mayor to sign.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to uthorize staff to accept the grant offer agreement with the Federal Aviation Administration for Project No. 3-31-0052-014-2016 for the construction of a new 6 place t-hangar at McCook Ben Nelson Regional Airport and authorize the Mayor to sign. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

M. Approve the route for the Young Professionals Group Color Run to be held on July 18, 2016 beginning at 7:00 A.M.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to approve the route for the Young Professionals Group Color Run to be held on July 18, 2016 beginning at 7:00 A.M. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

O. Receive and file the 2016/2017 Budget Schedule.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to receive and file the 2016/2017 Budget Schedule. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

P. Approve the application for Great Plains to occupy city right of way for the purpose of installing an underground fiber optic cable to serve the Red Willow County Fairgrounds and authorize the Mayor to sign the application.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to approve the application for Great Plains to occupy city right of way for the purpose of installing an underground fiber optic cable to serve the Red Willow County Fairgrounds and authorize the Mayor to sign the application. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

6. Regular Agenda.

5J. Approve the request from the Prairie Roots Festival Committee for the use of Barnett Park including the west shelter house, electricity, fishing ponds, utility fields, sand volleyball courts, permission to block off the park road in front of the west shelter house, use of additional picnic tables, benches, trash cans and use of the Kelley Park Disc Golf Course and Skate Park for their Hear Nebraska Concert event on Sunday, August 7, 2016.

Dale Dueland, Ronda Graff, and Matt Sehnert, members of the Prairie Roots Festival Committee, presented their request for the Hear Nebraska Concert to be held on August 7, 2016 in Barnett Park.

Upon a motion by Mayor Gonzales, seconded by Councilmember Calvin, the Council voted to approve the request from the Prairie Roots Festival Committee for the use of Barnett Park including the west shelter house, electricity, fishing ponds, utility fields, sand volleyball courts, permission to block off the park road in front of the west shelter house, use of additional picnic tables, benches, trash cans and use of the Kelley Park Disc Golf Course and Skate Park for their Hear Nebraska Concert event on Sunday, August 7, 2016. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

5K. Approve the application for a Special Designated Liquor License submitted by the McCook Area Chamber of Commerce for a Beer Garden in conjunction with the Prairie Roots Festival to be held in Barnett Park, South Highway 83, on August 7, 2016 from 8:00 A.M. to 1:00 A.M.

Upon a motion by Mayor Gonzales, seconded by Councilmember Hepp, the Council voted to approve the application for a Special Designated Liquor License submitted by the McCook Area Chamber of Commerce for a Beer Garden in conjunction with the Prairie Roots Festival to be held in Barnett Park, South Highway 83, on August 7, 2016 from 8:00 A.M. to 1:00 A.M. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

5N. Approve Change Order Number 1 for the McCook Downtown Parking Lot Improvement Project in the amount of $5,545.82 and authorize the Mayor to sign.

Upon a motion by Councilmember Calvin, seconded by Councilmember Hepp, the Council voted to approve Change Order Number 1 for the McCook Downtown Parking Lot Improvement Project in the amount of $5,545.82 and authorize the Mayor to sign. The motion passed upon the following roll call vote: YEA: Gonzales, Hepp, Calvin, McDowell, Weedin. NAY: None. McDowell.

A. Approve Ordinance No. 2016-2933 providing for the rezone of Block Eight (8), Lots Seven (7) through twelve (12), Brown's Park Addition to the City of McCook, Red Willow County, Nebraska, (a/k/a) from Business Commercial (BC) to Residential Medium Density (RM) District.

Considered upon its second reading, Ordinance No. 2016-2933 entitled:

AN ORDINANCE OF THE CITY OF MCCOOK, NEBRASKA AMENDING ORDINANCE NO. 2013-2897 BY CHANGING THE ZONING CLASSIFICATION OF BLOCK EIGHT (8), LOTS SEVEN (7) THROUGH TWELVE (12), BROWN'S PARK ADDITION TO THE CITY OF MCCOOK, RED WILLOW COUNTY, NEBRASKA FROM BUSINESS COMMERCIAL (BC) TO RESIDENTIAL MEDIUM DENSITY (RM); PROVIDED FOR THE REPEAL OF ANY OTHER CONFLICTING ORDINANCES; AND PROVIDING A TIME AND DATE FROM AND AFTER WHICH THIS ORDINANCE SHALL TAKE EFFECT AND BE ENFORCED.

Ordinance No. 2016-2933 was read by title only. Motion was made by Councilmember Weedin, seconded by Councilmember Hepp, to approve Ordinance No. 2016-2933 on its second reading. Upon roll call vote the following Councilmembers voted YEA: Gonzales, Hepp, Calvin, Weedin. NAY: None. ABSENT: McDowell. Motion carried. Whereupon the Mayor declared said Ordinance No. 2016-2933 approved on its second reading.

B. Council Comments.

Mayor Gonzales reminded the Council that their budget considerations need to be submitted to the staff by June 20.

- **Adjournment.**

There being no further business to come before the Council, Mayor Gonzales declared the meeting adjourned at 7:07 P.M.

_____
Michael D. Gonzales, Mayor

ATTEST:

_____
Lea Ann Doak, City Clerk-Treasurer

CITY MANAGER'S REPORT
JUNE 20, 2016 SPECIAL CITY COUNCIL MEETING

ITEM: **4B**

RECOMMENDATION:

Approve the application for a Special Designated Liquor License submitted by the Fraternal Order of Eagles, Liquor License #I-03700, for a Dance/Fund Raiser/Beer Garden to be held in the parking lot of the Eagles Club, 805 East "B" Street, on August 27, 2016, from 5:00 P.M. to 11:00 P.M.

BACKGROUND:

The Fraternal Order of Eagles would like to hold this event in their parking lot. They are making application to allow them to serve alcohol at this temporary location. Approval of the City Council is required with all applications.

FISCAL IMPACT: None.

RECOMMENDATION:

Approve the application for a Special Designated Liquor License submitted by the Fraternal Order of Eagles, Liquor License #I-03700, for a Dance/Fund Raiser/Beer Garden to be held in the parking lot of the Eagles Club, 805 East "B" Street, on August 27, 2016, from 5:00 P.M. to 11:00 P.M.

APPROVALS:

Lea Ann Doak, City Clerk — June 13, 2016

Nathan A. Schneider, City Manager — June 13, 2016

FRATERNAL ORDER OF EAGLES
MCCOOK AERIE #2769
GENERAL FUND
805 EAST B. STREET
MC COOK, NE 69001-3830

F.O.E.

9025

MNB
McCook National Bank
220 NORRIS AVENUE • McCOOK, NEBRASKA 69001
(308) 345-4055

76-78/1041

DOUBLE VOUCHER

Details on back.

Security Features Included.

PAY Forty Dollars + NO/100 — 6-6-16 DATE — $40.00 AMOUNT

TO THE ORDER OF NE LIQUOR Control Commission

[signature]

[signature]

[signature]

MP

⑈009025⑈ ⑆104100783⑆ 800 13 6⑈

FRATERNAL ORDER OF EAGLES

DETACH AND RETAIN THIS STATEMENT
THE ATTACHED CHECK IS IN PAYMENT OF ITEMS DESCRIBED BELOW.
IF NOT CORRECT PLEASE NOTIFY US PROMPTLY. NO RECEIPT DESIRED.
Deluxe Corporation 1-800-328-0304 or www.deluxe.com/shop
PRODUCT 55200N

9025

DATE	DESCRIPTION	AMOUNT	DISTRIBUTIONS ACCT. NO.	DISTRIBUTIONS AMOUNT
	Special Designated License			

EMPLOYEE _____

PERIOD ENDING	EARNINGS HOURS	EARNINGS RATE	EARNINGS AMOUNT EARNED AT REGULAR RATE	EARNINGS OVERTIME AND OTHER	TOTAL EARNINGS	DEDUCTIONS WITHHOLDING U.S. INC. TAX	DEDUCTIONS SOCIAL SECURITY	DEDUCTIONS MEDICARE TAX	DEDUCTIONS STATE INCOME TAX		TOTAL DEDUCTIONS	NET PAY

June 6, 2016

Fraternal Order of Eagles
805 East B St.
McCook, NE 69001

McCook City Council:

The Fraternal Order of Eagles is requesting your approval to go forth to obtain a temporary liquor permit from the Nebraska Liquor Control Commission. We would like to have an outdoor Beer Garden/Fund Raiser/Dance in our parking lot on August 27, 2016. The reason for this event is to raise money for our many charities that we donate to each year. Your consideration and approval would very much be appreciated. We will have a representative from our Aerie at your City Council Meeting if there are any questions concerning this event!

Fraternally;

Kip Lytle
Secretary-McCook Aerie #2769

APPLICATION FOR SPECIAL DESIGNATED LICENSE

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/
Email Applications: michelle.porter@nebraska.gov

DO YOU NEED POSTERS? YES___ NO X

NON PROFIT APPLICANTS
(Check one that best applies)

Municipal___ Political___ Fine Arts___ Fraternal___ Religious___ Charitable___ Public Service

LIQUOR LICENSE HOLDERS

Liquor license number and class (i.e. C-55441) Class I 03700

COMPLETE ALL QUESTIONS

1. Type of alcohol to be served and/or consumed: Beer X Wine X Distilled Spirits X

2. Licensee name (last, first,), corporate name or limited liability company (LLC) name
(As it reads on your liquor license)

NAME: Eagles, Fraternal Order

ADDRESS: 805 East B St.

CITY McCook NE **ZIP** 69001

3. Location where event will be held; name, address, city, county, zip code

BUILDING NAME F.O.E. # 2769

ADDRESS: 805 East B St. **CITY** McCook NE

ZIP 69001 **COUNTY and COUNTY #** Redwillow 48

a. Is this location within the city/village limits? YES X NO___

b. Is this location within the 150' of church, school, hospital or home for aged/indigent or for veterans and/or wives? YES X NO___

c. Is this location within 300' of any university or college campus? YES___ NO X

4. Date(s) and Time(s) of event (no more than six (6) **consecutive** days on one application)

Date	Date	Date	Date	Date	Date
8-27-16					
Hours	**Hours**	**Hours**	**Hours**	**Hours**	**Hours**
From 5 PM	From	From	From	From	From
To 11 PM	To	To	To	To	To

a. Alternate date:_____

b. Alternate location:_____
(Alternate date or location must be specified in local approval)

5. Indicate type of activity to be carried on during event:

Dance X Reception___ Fund Raiser X Beer Garden X Sampling/Tasting___

Other _____

6. Description of area to be licensed
Inside building, dimensions of area to be covered **IN FEET** _____x_____
(not square feet or acres)
*Outdoor area dimensions of area to be covered **IN FEET** 72' x 63'
***SKETCH OF OUTDOOR AREA (or attach copy of sketch) (sample sketch)**

See Attached

If outdoor area, how will premises be enclosed?
X Fence; ___snow fence ☐ chain link ☐ cattle panel
___other _____
___Tent

7. How many attendees do you expect at event? 100

8. If over 150 attendees. Indicate the steps that will be taken to prevent underage persons from obtaining alcohol beverages. (Attach separate sheet if needed)
Still Security Personal Will be present - ID's Will be Checked

9. Will premises to be covered by license comply with all Nebraska sanitation laws? YES ☒ NO ☐

a. Are there separate toilets for both men and women? YES ☒ NO ☐

10. **Where will you be purchasing your alcohol?**

Wholesaler X **Retailer** ____ (includes wineries) **Both** _____ **BYO** _____

11. Will there be any games of chance operating during the event? YES __ NO X

If so, describe activity _____

NOTE: Only games of chance approved by the Department of Revenue, Charitable Gaming Division are permitted. All other forms of gambling are prohibited by State Law: There are no exceptions for Non Profit Organizations or any events raising funds for a charity. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

12. Any other information or requests for exemptions: _____

13. Name and **telephone number/cell phone number** of immediate **supervisor.** This person will be at the location of the event when it occurs, able to answer any questions from Commission and/or law enforcement before and during the event, and who will be responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to. **PLEASE PRINT LEGIBLY**

Print name of Event Supervisor Marilynn O'Neil

Signature of Event Supervisor Marilynn O'Neil

Event Supervisor phone: Before 308-737-1074 During 308-737-1074

Email address _____

Consent of Authorized Representative/Applicant

14. I declare that I am the authorized representative of the above named license applicant and that the statements made on this application are true to the best of my knowledge and belief. I also consent to an investigation of my background including all records of every kind including police records. I agree to waive any rights or causes of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol. I further declare that the license applied for will not be used by any other person, group, organization or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the holder of this Special Designated License.

sign here _____ Secretary 6-6-16

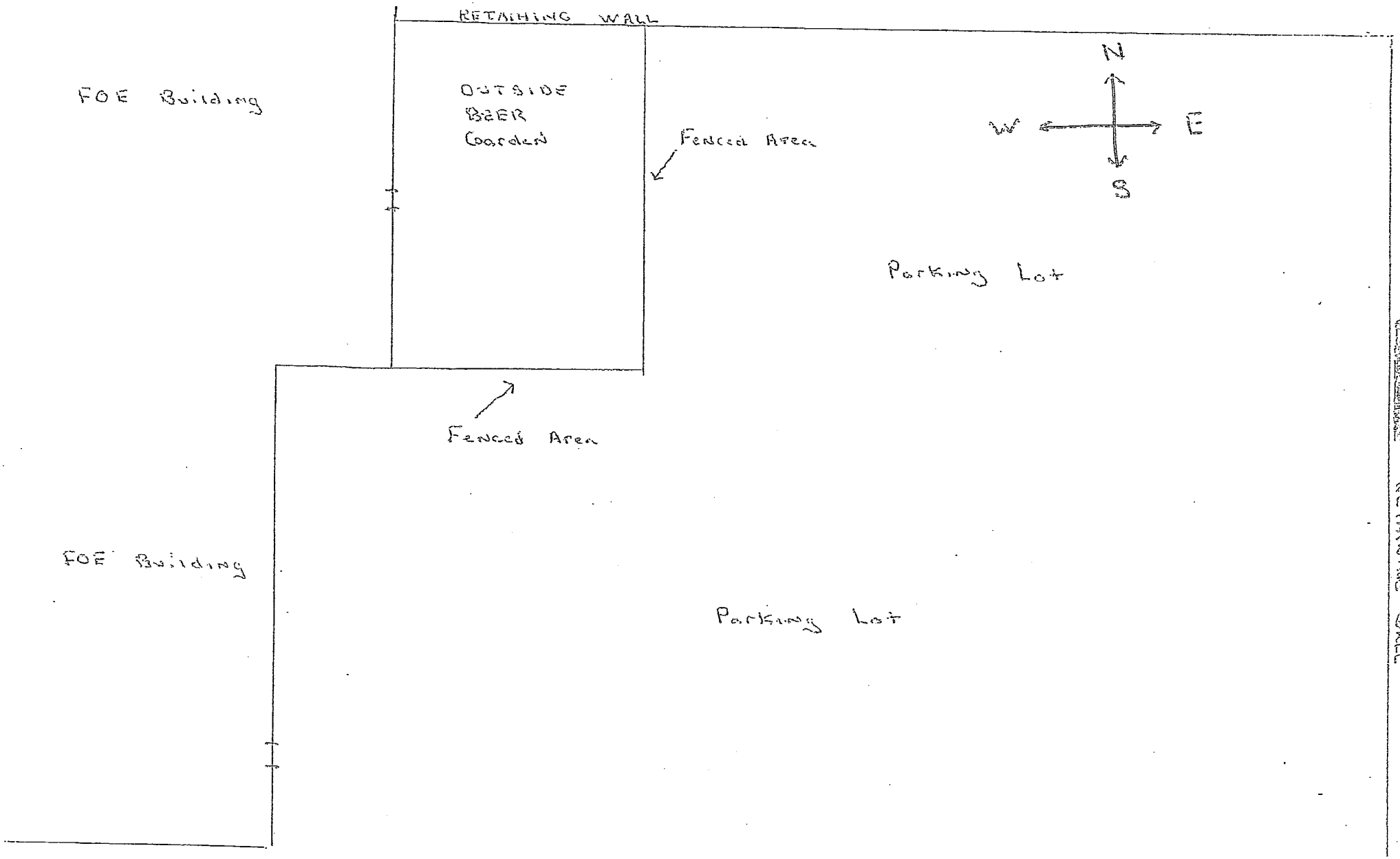
Authorized Representative/Applicant Title Date

Kip L. Lytle

Print Name

This individual must be listed on the application as an officer or stockholder unless a letter has been filed appointing an individual as the catering manager allowing them to sign all SDL applications.

The law requires that no special designated license provided for by this section shall be issued by the Commission without the approval of the local governing body. For the purposes of this section, the local governing body shall be the city or village within which the particular place for which the special designated license is requested is located, or if such place is not within the corporate limits of a city or village, then the local governing body shall be the county within which the place for which the special designated license is requested is located.


RETAINING WALL
FOE Building
OUTSIDE
BEER
Garden
Fenced Area
N
W
E
S
Parking Lot
Fenced Area
FOE Building
Parking Lot
RETAINING WALL

This page is required to be completed by Non Profit applicants only.

Application for Special Designated License
Under Nebraska Liquor Control Act
Affidavit of Non-Profit Status

I HEREBY DECLARE THAT THE CORPORATION MAKING APPLICATION FOR A SPECIAL DESIGNATED LICENSE UNDER THE NEBRASKA LIQUOR CONTROL ACT IS EITHER A MUNICIPAL CORPORATION, A FINE ARTS MUSEUM INCORPORATED AS A NONPROFIT CORPORATION, A RELIGIOUS NONPROFIT CORPORATION WHICH HAS BEEN EXEMPTED FROM THE PAYMENT OF FEDERAL INCOME TAXES, A POLITICAL ORGANIZATION WHICH HAS BEEN EXEMPTED FROM THE PAYMENT OF FEDERAL INCOME TAXES, OR ANY OTHER NONPROFIT CORPORATION, THE PURPOSE OF WHICH IS FRATERNAL, CHARITABLE, OR PUBLIC SERVICE AND WHICH HAS BEEN EXEMPTED FROM THE PAYMENT OF FEDERAL INCOME TAXES AS PER §53-124.11(1).

AS SIGNATORY I CONSENT TO THE RELEASE OF ANY DOCUMENTS SUPPORTING THIS DECLARATION AND ANY DOCUMENTS SUPPORTING THIS DECLARATION WILL BE PROVIDED TO THE NEBRASKA LIQUOR CONTROL COMMISSION, THE NEBRASKA STATE PATROL OR ANY AGENT OF THE LIQUOR CONTROL COMMISSION IMMEDIATELY UPON DEMAND. I ALSO CONSENT TO THE INVESTIGATION OF THIS CORPORATE ENTITY TO DETERMINE IT'S NONPROFIT STATUS.

I AGREE TO WAIVE ANY RIGHTS OR CAUSES OF ACTION AGAINST THE NEBRASKA LIQUOR CONTROL COMMISSION, THE NEBRASKA STATE PATROL OR ANY PARTY RELEASING INFORMATION TO THE AFOREMENTIONED PARTIES.

Fraternal Order of Eagles
NAME OF CORPORATION

01-539406
FEDERAL ID NUMBER

N.S.G.
SIGNATURE OF TITLE OF CORPORATE OFFICERS

THE ABOVE INDIVIDUAL STATES THAT THE STATEMENT ABOVE IS TRUE AND CORRECT: IF ANY FALSE STATEMENT IS MADE ON THIS APPLICATION, THE APPLICANT SHALL BE DEEMED GUILTY OF PERJURY AND SUBJECT TO PENALTIES PROVIDED BY LAW. (SEC. §53-131.01) NEBRASKA LIQUOR CONTROL ACT

SUBSCRIBED IN MY PRESENCE AND SWORN TO BEFORE ME THIS 6th DAY OF June, 2016.

Chelsey Benes
NOTARY PUBLIC SIGNATURE & SEAL

GENERAL NOTARY - State of Nebraska
CHELSEY L. BENES
My Comm. Exp. April 2, 2019

CITY MANAGER'S REPORT
JUNE 20, 2016 CITY COUNCIL MEETING

ITEM: **4C**

Receive and file the Financial Report for the period ending May 31, 2016.

BACKGROUND:

The Treasurer's Report (Attachment A) gives the beginning cash balances as of October 1, 2015, plus Total (YTD) Receipts, minus Total (YTD) Disbursements, giving the ending cash balance on May 31, 2016.

Per the Banking Services Agreement with McCook National Bank, all funds are deposited into the Public Funds Account at a higher rate of interest. The bank then sweeps in increments of $100,000 to the Primary Operating Account to cover the checks as they clear the bank.

All of the bank accounts are interest bearing, except the Payroll Account and the Purchase Account. The Payroll Account is also a sweep account and maintains a $1,000 balance. The Purchase Account is our VISA credit card.

Attachment B gives the ending cash balances by fund as of May 31, 2016.

Attachment C is a Financial Summary of Revenue and Expense by Fund for the quarter ending May 31, 2016.

Staff is always available to address any questions that the Council may have. The Department Heads receive monthly financial reports and it is their responsibility to monitor their individual budgets. It is the bottom-line per department that is monitored. If they go over on a line item, that must adjust for it in another line item.

FISCAL IMPACT: None.

RECOMMENDATION:

Receive and file the Financial Report for the period ending May 31, 2016.

APPROVALS:

Lea Ann Doak — June 14, 2016
Lea Ann Doak, City Clerk-Treasurer

/s/ Nate Schneider — June 14, 2016
Nathan A. Schneider, City Manager

ATTACHMENT A

City of McCook, Nebraska
TREASURER'S REPORT
Period Ending May 31, 2016

Beginning Cash on Hand, October 1, 2015				
McCook National Bank - Public Funds	$	12,650,694.00		
McCook National Bank - Primary Operating	$	88,531.82		
McCook National Bank - LB840 Funds	$	604,744.74		
McCook National Bank - Payroll	$	1,000.00		
McCook National Bank - CRA	$	175,170.25		
Purchases Account	$	10,000.00		
Petty Cash	$	925.81		
NDEQ Irrevocable Escrow	$	75,241.45		
TOTAL BEGINNING CASH			**$**	**13,606,308.07**
Receipts:				
Taxes	$	2,742,741.82		
Fees, Permits and Licenses	$	335,587.45		
Intergovernmental Services	$	1,099,219.70		
Charges - Current Services	$	1,078,232.36		
Public Utilities	$	2,134,461.51		
Use of Money & Property	$	1,410,348.26		
Interfund Transfers	$	2,998,217.83		
Other Revenue	$	1,509,394.22		
PLUS TOTAL RECEIPTS			**$**	**13,308,203.15**
Disbursements:				
Personal Services	$	3,567,040.53		
Supplies	$	701,991.31		
Services & Charges	$	3,945,023.15		
Budget Transfers	$	2,156,887.45		
Capital Outlay	$	2,527,929.84		
Unapplied/Accounts Payable	$	792.05		
MINUS TOTAL DISBURSEMENTS			**$**	**12,899,664.33**
Ending Cash Balance May 31, 2016				
McCook National Bank - Public Funds	$	12,913,669.22		
McCook National Bank - Primary Operating	$	343,556.17		
McCook National Bank - LB840 Funds	$	651,818.56		
McCook National Bank - Payroll	$	1,000.00		
McCook National Bank - CRA	$	16,857.34		
Petty Cash	$	975.00		
Purchase Account	$	9,885.80		
NDEQ Irrevocable Escrow	$	77,084.80		
TOTAL ENDING CASH	$	14,014,846.89	**$**	**14,014,846.89**

Dated: June 13, 2016

-s- Lea Ann Doak, City Clerk

ATTACHMENT B

City of McCook, Nebraska
TREASURER'S REPORT
CASH BALANCE BY FUNDS
Period Ending May 31, 2016

Beginning Cash on Hand, October 1, 2015	Beginning Cash	YTD Revenue	YTD Expenditures	Ending Cash
General Fund - 10	$ 2,155,497.17	$ 4,091,797.74	$ 4,231,722.79	$ 2,015,572.12
General Fund Unapplied/Accts. Payable	$ 2,495.10		$ -107.95	$ 2,603.05
Street Fund - 15	$ 0.00	$ 137,515.82	$ 0.00	$ 137,515.82
Special Revenue - 20	$ 1,012,230.08	$ 397,872.36	$ 612,718.36	$ 797,384.08
Debt Service - 30	$ 437,991.52	$ 2,133.00	$ 0.00	$ 440,124.52
Community Rrdevelopment Authority - 40	$ 237,410.68	$ 621,703.30	$ 779,712.21	$ 79,401.77
Economic Development Fund - 45	$ 569,199.31	$ 368,748.94	$ 302,867.69	$ 635,080.56
ED Fund Unapplied/Accts. Payable				$ 0.00
Trust & Agency - 60	$ 240,577.68	$ 113,025.69	$ 111,918.52	$ 241,684.85
Internal Service Fund - 65	$ 289,429.77	$ 1,390,139.57	$ 1,219,514.52	$ 460,054.82
Enterpirse Fund - 70	$ 7,542,192.50	$ 5,428,455.31	$ 5,153,165.56	$ 7,817,482.25
Enterprise Fund Unapplied/Accts. Payable	$ 736.18		$ 900.00	$ -163.82
Capital Improvement - 80	$ 1,118,548.08	$ 756,811.42	$ 487,252.63	$ 1,388,106.87
	$ 13,606,308.07			$ 14,014,846.89
		$ 13,308,203.15	$ 12,899,664.33	

Dated: June 13, 2016

-s- Lea Ann Doak, City Clerk

ATTACHMENT C

STATEMENT OF REVENUES - BUDGET VS. ACTUAL

AS OF: MAY 31ST, 2016

10 -GENERAL FUND

FINANCIAL SUMMARY

% OF YEAR COMPLETED: 66.67

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY REVENUE	YEAR-TO-DATE REVENUE	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
REVENUE SUMMARY							
GENERAL REVENUE	7,538,788	7,538,788	910,928.58	4,033,950.86	4,164,628.74	3,504,837.14	46.49
RESERVES/CO TREASURER BAL	896,656	896,656	6,250.00	57,846.88	67,586.05	838,809.12	93.55
TOTAL REVENUES	8,435,444	8,435,444	917,178.58	4,091,797.74	4,232,214.79	4,343,646.26	51.49

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY EXPENDITURES	YEAR-TO-DATE EXPENDITURES	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
ADMINISTRATION	509,306	509,306	45,080.31	315,130.24	284,111.13	194,175.76	38.13
PUBLICITY	9,420	9,420	140.00	1,888.54	2,580.71	7,531.46	79.95
AUDITORIUM	40,638	40,638	1,613.29	21,129.77	20,626.80	19,508.23	48.00
COUNCIL	589,915	589,915	27,405.39	183,417.52	197,911.25	406,497.48	68.91
POLICE	1,610,601	1,610,601	101,494.78	1,001,849.40	921,648.41	608,751.60	37.80
MUNICIPAL CENTER	89,653	89,653	7,672.68	54,613.95	58,376.99	35,039.05	39.08
FIRE	1,082,570	1,082,570	63,925.98	601,371.76	596,656.06	481,198.24	44.45
AMBULANCE	108,061	108,061	4,801.13	75,192.52	66,614.16	32,868.48	30.42
CIVIL DEFENSE	19,859	19,859	890.18	7,489.13	10,707.94	12,369.87	62.29
BUILDING & ZONING	69,809	69,809	4,609.43	54,982.72	51,852.12	14,826.28	21.24
LIBRARY	301,070	301,070	21,869.10	183,120.50	193,157.39	117,949.50	39.18
STREET	1,100,072	1,100,072	48,860.81	561,255.87	475,417.05	538,816.13	48.98
STREET LIGHTS	0	0	0.00	0.00	0.00	0.00	0.00
CEMETERY	208,772	208,772	10,590.02	132,087.95	89,962.00	76,684.05	36.73
PARKS	266,432	266,432	10,733.26	166,308.77	101,684.88	100,123.23	37.58
BALL PARKS	124,662	124,662	6,673.99	51,196.37	56,870.17	73,465.63	58.93
POOL	91,574	91,574	11,558.59	15,843.43	12,799.09	75,730.57	82.70
AIRPORT	144,203	144,203	11,247.00	90,081.31	81,951.39	54,121.69	37.53
UNEMPLOYMENT	25,000	25,000	0.00	24,184.00	0.00	816.00	3.26
UNCOLLECTABLE TAX	65,500	65,500	3,256.10	6,374.75	7,029.59	59,125.25	90.27
SENIOR CENTER	355,212	355,212	33,705.16	217,090.81	227,599.15	138,121.19	38.88
PUBLIC TRANSPORTATION	144,449	144,449	14,672.13	87,128.59	94,161.99	57,320.41	39.68
HEALTH OPERATING	527,400	527,400	43,950.00	351,600.00	351,600.00	175,800.00	33.33
RESERVES/CO TREASURER BAL	896,656	896,656	3,333.00	28,384.89	4,461.31	868,271.11	96.83
TOTAL EXPENDITURES	8,380,834	8,380,834	478,082.33	4,231,722.79	3,907,779.58	4,149,111.21	49.51
REVENUES OVER/(UNDER) EXPENDITURES	54,610	54,610	439,096.25	(139,925.05)	324,435.21	194,535.05	356.23

STATEMENT OF REVENUES - BUDGET VS. ACTUAL

AS OF: MAY 31ST, 2016

15 -STREET FUND

FINANCIAL SUMMARY

% OF YEAR COMPLETED: 66.67

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY REVENUE	YEAR-TO-DATE REVENUE	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
REVENUE SUMMARY							
STREET IMPROVEMENTS	132,356	132,356	0.00	137,515.82	0.00	(5,159.82)	3.90-
TOTAL REVENUES	132,356	132,356	0.00	137,515.82	0.00	(5,159.82)	3.90-

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY EXPENDITURES	YEAR-TO-DATE EXPENDITURES	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
STREET IMPROVEMENTS	132,356	132,356	0.00	0.00	0.00	132,356.00	100.00
TOTAL EXPENDITURES	132,356	132,356	0.00	0.00	0.00	132,356.00	100.00
REVENUES OVER/(UNDER) EXPENDITURES	0	0	0.00	137,515.82	0.00	(137,515.82)	0.00

STATEMENT OF REVENUES - BUDGET VS. ACTUAL

AS OF: MAY 31ST, 2016

20 -SPECIAL REVENUE

FINANCIAL SUMMARY % OF YEAR COMPLETED: 66.67

REVENUE SUMMARY

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY REVENUE	YEAR-TO-DATE REVENUE	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
FAA GRANTS	750,000	750,000	0.00	0.00	0.00	750,000.00	100.00
INTERCITY BUS GRANT 1994	0	0	0.00	0.00	0.00	0.00	0.00
ACE REVENUE SHARING	31,701	31,701	29.00	11,052.96	8,047.67	20,648.04	65.13
MCCOOK RECREATIONAL TRAIL	50,539	50,539	34.00	255.00	82,016.92	50,284.00	99.50
CDBG BOOE PUBLIC WORKS	758,958	758,958	192,299.06	192,299.06	0.00	566,658.94	74.66
ENHANCED E911	252,428	252,428	2,098.90	36,925.11	28,157.03	215,502.89	85.37
SECURE OUR SCHOOLS GRANT	0	0	0.00	0.00	0.00	0.00	0.00
INSURANCE REIMBURSEMENT	526,510	526,510	377.00	6,119.10	6,435.68	520,390.90	98.84
NSP GRANT	0	0	0.00	0.00	0.00	0.00	0.00
PSAP FUNDS	162,511	162,511	4,765.43	42,888.87	38,199.36	119,622.13	73.61
MUNICIPAL FACILITY CONST	43,635	43,635	0.00	0.00	0.00	43,635.00	100.00
FOX THEATRE RESTORE-CDBG	0	0	0.00	0.00	0.00	0.00	0.00
ENERGY GRANTS	0	0	0.00	0.00	0.00	0.00	0.00
DOWNTOWN REVITAL - CDBG	470,694	470,694	0.00	9,750.00	0.00	460,944.00	97.93
SKATE PARK IMPROVEMENTS	115,251	115,251	8,027.26	98,582.26	10,000.00	16,668.74	14.46
AUD/CONVEN CTR FEASIBILI	0	0	0.00	0.00	0.00	0.00	0.00
TOTAL REVENUES	3,162,227	3,162,227	207,630.65	397,872.36	172,856.66	2,764,354.64	87.42

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY EXPENDITURES	YEAR-TO-DATE EXPENDITURES	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
FAA GRANTS	750,000	750,000	0.00	17,987.38	0.00	732,012.62	97.60
INTERCITY BUS GRANT 1994	0	0	0.00	0.00	0.00	0.00	0.00
ACE REVENUE SHARING	31,701	31,701	0.00	0.00	0.00	31,701.00	100.00
MCCOOK RECREATIONAL TRAIL	50,539	50,539	0.00	0.00	20,981.65	50,539.00	100.00
CDBG BOOE PUBLIC WORKS	758,958	758,958	0.00	205,385.05	900.00	553,572.95	72.94
ENHANCED E911	252,428	252,428	676.71	13,513.00	15,914.60	238,915.00	94.65
SECURE OUR SCHOOLS GRANT	0	0	0.00	0.00	0.00	0.00	0.00
INSURANCE REIMBURSEMENT	526,510	526,510	1,998.82	13,720.79	46,051.41	512,789.21	97.39
NSP GRANT	0	0	0.00	0.00	0.00	0.00	0.00
PSAP FUNDS	162,511	162,511	1,373.95	14,060.11	17,443.11	148,450.89	91.35
MUNICIPAL FACILITY CONST	43,635	43,635	0.00	8,850.00	10,117.70	34,785.00	79.72
FOX THEATRE RESTORE-CDBG	0	0	0.00	0.00	0.00	0.00	0.00
ENERGY GRANTS	0	0	0.00	(0.01)	0.00	0.01	0.00
DOWNTOWN REVITAL - CDBG	470,694	470,694	169,507.02	209,064.41	5,850.00	261,629.59	55.58
SKATE PARK IMPROVEMENTS	115,251	115,251	0.00	130,137.63	0.00	(14,886.63)	12.92-
AUD/CONVEN CTR FEASIBILI	0	0	0.00	0.00	0.00	0.00	0.00
TOTAL EXPENDITURES	3,162,227	3,162,227	173,556.50	612,718.36	117,258.47	2,549,508.64	80.62
REVENUES OVER/(UNDER) EXPENDITURES	0	0	34,074.15	(214,846.00)	55,598.19	214,846.00	0.00

STATEMENT OF REVENUES - BUDGET VS. ACTUAL

AS OF: MAY 31ST, 2016

30 -DEBT SERVICE

FINANCIAL SUMMARY

% OF YEAR COMPLETED: 66.67

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY REVENUE	YEAR-TO-DATE REVENUE	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
REVENUE SUMMARY							
GENERAL OBLIGATION	15,530	15,530	0.00	0.00	0.00	15,530.00	100.00
RESERVES/CO TREAS BALANCE	0	0	0.00	0.00	0.00	0.00	0.00
AIRBASE JUDGEMENT	483	483	0.00	0.00	0.00	483.00	100.00
SPECIAL ASSESSMENTS	358,873	358,873	243.00	1,818.00	2,650.29	357,055.00	99.49
BOND RESERVE	62,219	62,219	42.00	315.00	316.00	61,904.00	99.49
TOTAL REVENUES	437,105	437,105	285.00	2,133.00	2,966.29	434,972.00	99.51

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY EXPENDITURES	YEAR-TO-DATE EXPENDITURES	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
GENERAL OBLIGATION	15,530	15,530	0.00	0.00	0.00	15,530.00	100.00
RESERVES/CO TREAS BALANCE	0	0	0.00	0.00	0.00	0.00	0.00
AIRBASE JUDGEMENT	483	483	0.00	0.00	0.00	483.00	100.00
SPECIAL ASSESSMENTS	358,873	358,873	0.00	0.00	0.00	358,873.00	100.00
BOND RESERVE	62,219	62,219	0.00	0.00	0.00	62,219.00	100.00
TOTAL EXPENDITURES	437,105	437,105	0.00	0.00	0.00	437,105.00	100.00
REVENUES OVER/(UNDER) EXPENDITURES	0	0	285.00	2,133.00	2,966.29	(2,133.00)	0.00

STATEMENT OF REVENUES - BUDGET VS. ACTUAL

AS OF: MAY 31ST, 2016

40 -COMMUNITY DEVELOPMENT

FINANCIAL SUMMARY

% OF YEAR COMPLETED: 66.67

REVENUE SUMMARY

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY REVENUE	YEAR-TO-DATE REVENUE	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
RETRO DEVELOPMENT PROJECT	0	0	0.00	0.00	0.00	0.00	0.00
VALMONT PROJECT	0	0	0.00	0.00	0.00	0.00	0.00
SITEL PROJECT	0	0	0.00	0.00	0.00	0.00	0.00
KEYSTONE BUS CENTER PROJ	31,000	31,000	13,160.92	13,859.56	14,141.71	17,140.44	55.29
CITY INVESTMENTS	62,219	62,219	42.74	327.15	325.19	61,891.85	99.47
NORTH POINTE	0	0	0.00	0.00	208,000.00	0.00	0.00
CLARY VILLAGE LLC	0	0	0.00	0.00	0.00	0.00	0.00
MCCOOK HOTEL GROUP	0	0	0.00	607,516.59	0.00	(607,516.59)	0.00
TOTAL REVENUES	93,219	93,219	13,203.66	621,703.30	222,466.90	(528,484.30)	566.93-

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY EXPENDITURES	YEAR-TO-DATE EXPENDITURES	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
RETRO DEVELOPMENT PROJECT	0	0	0.00	0.00	5,257.22	0.00	0.00
VALMONT PROJECT	0	0	0.00	0.00	0.00	0.00	0.00
KEYSTONE BUS CENTER PROJ	31,000	31,000	13,859.56	13,859.56	14,141.71	17,140.44	55.29
CITY INVESTMENTS	62,219	62,219	0.00	10.00	0.00	62,209.00	99.98
NORTH POINTE	0	0	0.00	98,651.06	68,708.94	(98,651.06)	0.00
CLARY VILLAGE LLC	0	0	0.00	59,675.00	0.00	(59,675.00)	0.00
MCCOOK HOTEL GROUP	0	0	0.00	607,516.59	0.00	(607,516.59)	0.00
TOTAL EXPENDITURES	93,219	93,219	13,859.56	779,712.21	88,107.87	(686,493.21)	736.43-
REVENUES OVER/(UNDER) EXPENDITURES	0	0	(655.90)	(158,008.91)	134,359.03	158,008.91	0.00

STATEMENT OF REVENUES - BUDGET VS. ACTUAL

AS OF: MAY 31ST, 2016

45 -ECONOMIC DEVELOPMENT FUND

FINANCIAL SUMMARY

% OF YEAR COMPLETED: 66.67

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY REVENUE	YEAR-TO-DATE REVENUE	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
REVENUE SUMMARY							
ECONOMIC DEVELOPMENT FUN	671,521	671,521	34,680.54	278,669.94	315,388.31	392,851.06	58.50
KEYSTONE BOND	0	0	0.00	0.00	0.00	0.00	0.00
KEYSTONE BOND RESERVE	112,000	112,000	0.00	0.00	0.00	112,000.00	100.00
KEYSTONE BOND REDEMPTION	135,120	135,120	11,260.00	90,079.00	92,839.00	45,041.00	33.33
TOTAL REVENUES	918,641	918,641	45,940.54	368,748.94	408,227.31	549,892.06	59.86

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY EXPENDITURES	YEAR-TO-DATE EXPENDITURES	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
ECONOMIC DEVELOPMENT FUN	671,521	671,521	101,286.34	295,482.69	528,824.16	376,038.31	56.00
KEYSTONE BOND	0	0	0.00	0.00	0.00	0.00	0.00
KEYSTONE BOND RESERVE	112,000	112,000	0.00	0.00	0.00	112,000.00	100.00
KEYSTONE BOND REDEMPTION	135,120	135,120	0.00	7,385.00	9,455.00	127,735.00	94.53
TOTAL EXPENDITURES	918,641	918,641	101,286.34	302,867.69	538,279.16	615,773.31	67.03
REVENUES OVER/(UNDER) EXPENDITURES	0	0	(55,345.80)	65,881.25	(130,051.85)	(65,881.25)	0.00

STATEMENT OF REVENUES - BUDGET VS. ACTUAL

AS OF: MAY 31ST, 2016

60 -AGENCY FUND

FINANCIAL SUMMARY

% OF YEAR COMPLETED: 66.67

REVENUE SUMMARY

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY REVENUE	YEAR-TO-DATE REVENUE	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
PERPETUAL CARE	121,630	121,630	383.00	4,063.00	3,133.00	117,567.00	96.66
SENIOR CENTER CONTRIBUTIO	46,138	46,138	31.00	787.00	9,225.00	45,351.00	98.29
SCHOOL	8,700	8,700	75.00	6,610.00	7,175.00	2,090.00	24.02
FIRE CONTRIBUTIONS	5,011	5,011	0.00	0.00	1,696.00	5,011.00	100.00
LIBRARY MEMORIAL	19,181	19,181	0.00	8,587.50	7,186.47	10,593.50	55.23
VON REISEN LIBRARY TRUST	0	0	0.00	0.00	0.00	0.00	0.00
COMMUNITY BETTERMENT	163,532	163,532	12,380.38	85,983.73	95,228.61	77,548.27	47.42
POLICE/DARE CONTRIBUTIONS	6,230	6,230	888.53	1,039.46	1,342.34	5,190.54	83.32
PUBLIC WORKS CONTRIBUTION	10,676	10,676	0.00	0.00	0.00	10,676.00	100.00
AMBULANCE CONTRIBUTIONS	3,250	3,250	575.00	955.00	347.37	2,295.00	70.62
MAIN STREET IMPROVEMENTS	0	0	0.00	0.00	0.00	0.00	0.00
COMMUNITY PARAMEDIC PROG	0	0	0.00	5,000.00	0.00	(5,000.00)	0.00
TOTAL REVENUES	384,348	384,348	14,332.91	113,025.69	125,333.79	271,322.31	70.59

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY EXPENDITURES	YEAR-TO-DATE EXPENDITURES	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
PERPETUAL CARE	121,630	121,630	0.00	315.00	0.00	121,315.00	99.74
SENIOR CENTER CONTRIBUTIO	46,138	46,138	0.00	0.00	0.00	46,138.00	100.00
SCHOOL	8,700	8,700	5,800.00	6,535.00	6,900.00	2,165.00	24.89
FIRE CONTRIBUTIONS	5,011	5,011	0.00	1,200.00	188.21	3,811.00	76.05
LIBRARY MEMORIAL	19,181	19,181	219.29	5,387.88	4,732.84	13,793.12	71.91
VON REISEN LIBRARY TRUST	0	0	0.00	0.00	88.83	0.00	0.00
COMMUNITY BETTERMENT	163,532	163,532	11,650.00	98,147.00	130,319.48	65,385.00	39.98
POLICE/DARE CONTRIBUTIONS	6,230	6,230	0.00	110.00	982.71	6,120.00	98.23
PUBLIC WORKS CONTRIBUTION	10,676	10,676	0.00	0.00	2,500.00	10,676.00	100.00
AMBULANCE CONTRIBUTIONS	3,250	3,250	0.00	0.00	75.82	3,250.00	100.00
MAIN STREET IMPROVEMENTS	0	0	0.00	0.00	1,300.16	0.00	0.00
COMMUNITY PARAMEDIC PROG	0	0	0.00	223.64	0.00	(223.64)	0.00
TOTAL EXPENDITURES	384,348	384,348	17,669.29	111,918.52	147,088.05	272,429.48	70.88
REVENUES OVER/(UNDER) EXPENDITURES	0	0	(3,336.38)	1,107.17	(21,754.26)	(1,107.17)	0.00

STATEMENT OF REVENUES - BUDGET VS. ACTUAL

AS OF: MAY 31ST, 2016

65 -INTERNAL SERVICE FUND

FINANCIAL SUMMARY

% OF YEAR COMPLETED: 66.67

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY REVENUE	YEAR-TO-DATE REVENUE	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
REVENUE SUMMARY							
FLEX DEPENDENT CARE	31,200	31,200	688.44	6,780.50	8,254.79	24,419.50	78.27
FLEX - MEDICAL	65,000	65,000	2,855.42	29,918.65	24,717.05	35,081.35	53.97
SELF INSURED HEALTH INSUR	1,885,519	1,885,519	128,889.00	1,353,440.42	978,572.00	532,078.58	28.22
TOTAL REVENUES	1,981,719	1,981,719	132,432.86	1,390,139.57	1,011,543.84	591,579.43	29.85

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY EXPENDITURES	YEAR-TO-DATE EXPENDITURES	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
FLEX DEPENDENT CARE	31,200	31,200	867.55	7,041.60	9,053.99	24,158.40	77.43
FLEX - MEDICAL	65,000	65,000	2,168.83	30,222.25	24,593.17	34,777.75	53.50
SELF INSURED HEALTH INSUR	1,885,519	1,885,519	104,987.37	1,182,250.67	1,103,742.49	703,268.33	37.30
TOTAL EXPENDITURES	1,981,719	1,981,719	108,023.75	1,219,514.52	1,137,389.65	762,204.48	38.46
REVENUES OVER/(UNDER) EXPENDITURES	0	0	24,409.11	170,625.05	(125,845.81)	(170,625.05)	0.00

STATEMENT OF REVENUES - BUDGET VS. ACTUAL

AS OF: MAY 31ST, 2016

70 -ENTERPRISE FUND

FINANCIAL SUMMARY

% OF YEAR COMPLETED: 66.67

REVENUE SUMMARY

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY REVENUE	YEAR-TO-DATE REVENUE	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
SOLID WASTE-LANDFILL POST	0	0	0.00	0.00	0.00	0.00	0.00
SOLID WASTE - RECYCLING	94,600	94,600	11,721.94	60,653.80	64,819.78	33,946.20	35.88
SOLID WASTE - COLLECTION	791,324	791,324	60,528.26	481,652.95	482,572.50	309,671.05	39.13
SOLID WASTE - TRANSFER ST	1,007,784	1,007,784	82,627.72	591,432.60	686,043.26	416,351.40	41.31
LANDFILL RESERVE	461,129	461,129	4,048.00	32,161.00	31,922.00	428,968.00	93.03
SOLID WASTE - DISPOSAL	277,176	277,176	23,780.54	146,950.50	166,583.07	130,225.50	46.98
WATER MAINTENANCE & OPERA	4,573,211	4,573,211	161,108.61	1,305,728.25	1,253,713.08	3,267,482.75	71.45
WATER BOND & INTEREST RED	2,240,373	2,240,373	43,809.00	404,826.00	361,884.00	1,835,547.00	81.93
WATER CAPITAL - REPLACEME	1,703,680	1,703,680	21,280.00	169,516.00	168,788.00	1,534,164.00	90.05
WATER CAPITAL - DEVELOPME	0	0	0.00	0.00	0.00	0.00	0.00
WATER QUALITY SOLUTION	161,370	161,370	118.09	881.80	882.08	160,488.20	99.45
SEWER MAINTENANCE & OPERA	1,966,743	1,966,743	106,248.33	884,877.48	919,709.19	1,081,865.52	55.01
SEWER BOND & INTEREST RES	36,772	36,772	25.00	20,154.48	20,291.20	16,617.52	45.19
SEWER CAPITAL - REPLACEME	1,010,734	1,010,734	37,085.00	296,576.00	315,004.00	714,158.00	70.66
SEWER CAPITAL - DEVELOPME	1,279	1,279	1.00	8.00	8.00	1,271.00	99.37
SEWER - PHASE III AMMONIA	10,675	10,675	0.00	0.00	0.00	10,675.00	100.00
ELECTRIC UTILITY	1,325,000	1,325,000	307,668.62	1,033,036.45	1,051,557.37	291,963.55	22.03
TOTAL REVENUES	15,661,850	15,661,850	860,050.11	5,428,455.31	5,523,777.53	10,233,394.69	65.34

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY EXPENDITURES	YEAR-TO-DATE EXPENDITURES	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
SOLID WASTE-LANDFILL POST	16,550	16,550	0.00	5,805.95	8,769.85	10,744.05	64.92
SOLID WASTE - RECYCLING	103,107	103,107	6,939.95	56,732.31	54,362.03	46,374.69	44.98
SOLID WASTE - COLLECTION	791,324	791,324	57,928.83	460,658.08	513,828.84	330,665.92	41.79
SOLID WASTE - TRANSFER ST	982,727	982,727	73,324.57	574,427.32	641,875.78	408,299.68	41.55
LANDFILL RESERVE	461,129	461,129	0.00	0.00	0.00	461,129.00	100.00
SOLID WASTE - DISPOSAL	277,176	277,176	23,780.54	146,950.50	166,583.07	130,225.50	46.98
WATER MAINTENANCE & OPERA	4,573,211	4,573,211	229,549.29	1,296,004.55	1,228,700.14	3,277,206.45	71.66
WATER BOND & INTEREST RED	2,240,373	2,240,373	0.00	303,452.01	291,266.40	1,936,920.99	86.46
WATER BOND & INTEREST RES	0	0	0.00	0.00	0.00	0.00	0.00
WATER CAPITAL - REPLACEME	1,703,680	1,703,680	0.00	88,643.86	14,589.22	1,615,036.14	94.80
WATER CAPITAL - DEVELOPME	0	0	0.00	0.00	0.00	0.00	0.00
WATER QUALITY SOLUTION	161,370	161,370	0.00	0.00	735.21	161,370.00	100.00
SEWER MAINTENANCE & OPERA	1,966,743	1,966,743	92,651.28	830,189.25	839,905.26	1,136,553.75	57.79
SEWER BOND & INTEREST RES	36,772	36,772	0.00	0.00	0.00	36,772.00	100.00
SEWER CAPITAL - REPLACEME	1,010,734	1,010,734	0.00	388,515.28	202,903.82	622,218.72	61.56
SEWER CAPITAL - DEVELOPME	1,279	1,279	0.00	0.00	0.00	1,279.00	100.00
SEWER - PHASE III AMMONIA	10,675	10,675	0.00	0.00	0.00	10,675.00	100.00
ELECTRIC UTILITY	1,325,000	1,325,000	245,168.62	1,001,786.45	1,082,807.37	323,213.55	24.39
TOTAL EXPENDITURES	15,661,850	15,661,850	729,343.08	5,153,165.56	5,046,326.99	10,508,684.44	67.10
REVENUES OVER/(UNDER) EXPENDITURES	0	0	130,707.03	275,289.75	477,450.54	(275,289.75)	0.00

STATEMENT OF REVENUES - BUDGET VS. ACTUAL

AS OF: MAY 31ST, 2016

80 -CAPITAL IMPROVEMENTS FUND

FINANCIAL SUMMARY

% OF YEAR COMPLETED: 66.67

REVENUE SUMMARY

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY REVENUE	YEAR-TO-DATE REVENUE	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
CAPITAL IMPROVEMENTS #2	0	0	0.00	0.00	0.00	0.00	0.00
CAPITAL IMPROVE #2 RES	0	0	0.00	0.00	0.00	0.00	0.00
CAPITAL IMPROVEMENTS #3	736,667	736,667	66,094.75	500,029.60	509,960.91	236,637.40	32.12
CAPITAL IMPROVE #3 RES	334,805	334,805	291.00	2,469.00	2,544.00	332,336.00	99.26
CAPITAL IMPROVE 1/2%	368,333	368,333	33,047.38	250,014.82	291,470.56	118,318.18	32.12
CAPITAL IMPROVE 1/2% RES	768,345	768,345	623.00	4,298.00	3,267.00	764,047.00	99.44
TOTAL REVENUES	2,208,150	2,208,150	100,056.13	756,811.42	807,242.47	1,451,338.58	65.73

	ORIGINAL BUDGET	CURRENT BUDGET	MONTHLY EXPENDITURES	YEAR-TO-DATE EXPENDITURES	PRIOR YEAR YEAR-TO-DATE	BUDGET REMAINING	% BUDGET REMAINING
CAPITAL IMPROVEMENTS #2	0	0	0.00	0.00	0.00	0.00	0.00
CAPITAL IMPROVE #2 RES	0	0	0.00	0.00	0.00	0.00	0.00
CAPITAL IMPROVEMENTS #3	736,667	736,667	0.00	331,422.00	301,297.50	405,245.00	55.01
CAPITAL IMPROVE #3 RES	735,878	735,878	0.00	22,610.00	412,292.59	713,268.00	96.93
CAPITAL IMPROVE 1/2%	581,183	581,183	69,198.53	133,220.63	64,026.31	447,962.37	77.08
CAPITAL IMPROVE 1/2% RES	154,422	154,422	0.00	0.00	94,472.25	154,422.00	100.00
TOTAL EXPENDITURES	2,208,150	2,208,150	69,198.53	487,252.63	872,088.65	1,720,897.37	77.93
REVENUES OVER/(UNDER) EXPENDITURES	0	0	30,857.60	269,558.79	(64,846.18)	(269,558.79)	0.00

CITY MANAGER'S REPORT
JUNE 20, 2016 SPECIAL CITY COUNCIL MEETING

ITEM: **5A**

RECOMMENDATION:

Approve Ordinance No. 2016-2933 providing for the rezone of Block Eight (8), Lots Seven (7) through twelve (12), Brown's Park Addition to the City of McCook, Red Willow County, Nebraska, (a/k/a) from Business Commercial (BC) to Residential Medium Density (RM) District upon its third and final reading.

BACKGROUND:

An application to modify the zoning designation of property located at 305 East 12th Street and legally described as Lots 7-12, Block 8, Brown's Park Addition to the City of McCook, has been received. The applicants, Rob and Barbara Pinkal are requesting to change the zoning designation from Business Commercial to Residential Medium Density. The reason for the request is to allow the applicants to proceed with a building permit for a house and garage. The applicants purchased the property in 2012. Historically, this property did have a residence on it. It was demolished in approximately 2010 or 2011. The real estate at issue currently is flanked to the east and west by Business Commercial zones. The property is adjacent to Residential districts to the north.

On review of the area, there is a combination of business and residential structures. A change from Business Commercial to Residential Medium Density District would not negatively impact the layout of the area. Staff recommends approval of the application.

Council approved this Ordinance on first reading on May 16, 2016 and on its second reading on June 6, 2016. It is not ready for approval upon its third and final reading.

FISCAL IMPACT: None.

RECOMMENDATION:

Approve Ordinance No. 2016-2933 providing for the rezone of Block Eight (8), Lots Seven (7) through twelve (12), Brown's Park Addition to the City of McCook, Red Willow County, Nebraska, (a/k/a) from Business Commercial (BC) to Residential Medium Density (RM) District upon its third and final reading.

APPROVALS:

Lea Ann Doak — June 14, 2016
Lea Ann Doak, City Clerk

/s/ Nate Schneider — June 14, 2016
Nathan A. Schneider, City Manager

ORDINANCE NO. 2016-2933

AN ORDINANCE OF THE CITY OF MCCOOK, NEBRASKA AMENDING ORDINANCE NO. 2013-2897 BY CHANGING THE ZONING CLASSIFICATION OF BLOCK EIGHT (8), LOTS SEVEN (7) THROUGH TWELVE (12), BROWN'S PARK ADDITION TO THE CITY OF MCCOOK, RED WILLOW COUNTY, NEBRASKA FROM BUSINESS COMMERCIAL (BC) TO RESIDENTIAL MEDIUM DENSITY (RM); PROVIDED FOR THE REPEAL OF ANY OTHER CONFLICTING ORDINANCES; AND PROVIDING A TIME AND DATE FROM AND AFTER WHICH THIS ORDINANCE SHALL TAKE EFFECT AND BE ENFORCED.

NOW, THEREFORE, BE IT ORDAINED BY THE MAYOR AND COUNCIL OF THE CITY OF MCCOOK, NEBRASKA:

SECTION 1. In accordance with Article 27 of Ordinance No. 2013-2897 of the City of McCook, Red Willow County, Nebraska, the zoning classification of the following described property shall be and is hereby changed from Business Commercial (BC) to Residential Medium Density (RM), to wit:

Block Eight (8). Lots Seven (7) through Twelve (12), Brown's Park Addition to the City of McCook, Red Willow County, Nebraska.

SECTION 2. The City Clerk of the City of McCook, Nebraska is hereby directed to change the official zoning map of the City of McCook, Nebraska to show the above-described property to have a zoning classification of Residential Medium Density (RM).

SECTION 3. The provisions of Ordinance 2013-2897 are hereby amended as provided herein.

SECTION 4. This ordinance shall be in full force and take effect from and after its passage, approval and publication as required by law.

PASSED AND APPROVED THIS 16th day of May, 2016.

-s- Michael D. Gonzales, Mayor

ATTEST:

-s- Lea Ann Doak, City Clerk

Publish: