

Lincoln



Nebraska's Capital City

April 12, 2002

Mayor Wesely and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Salem Oil Company, d.b.a. Airport Amoco, 3100 N.W. 12<sup>th</sup> Street requesting a class B liquor license for this location.

This location will be a convenience store selling gas and other quick service items.

Charles Salem, president of Salem Oil Company, requests that Jeffrey Scott be approved as the manager of this liquor license.

Background information on Jeffrey Scott is as follows:

Jeffrey Scott was born in Beatrice, Nebraska. He attended the University of Nebraska graduating in 1992. Mr. Scott has been employed by Salem Oil Company since 1991.

Shareholder information is included in your packet for review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



**Police Department**  
575 South 10th Street / Lincoln, Nebraska 68508 / Phone: 402-441-7204 / Fax: 402-441-8492 / Website: [www.ci.lincoln.ne.us](http://www.ci.lincoln.ne.us)

A nationally accredited law enforcement agency



Liquor License Investigation

Business (DBA) AIRPORT AMOCO

Manager       Owner       Other

Name: Jeffrey Scott

US Citizen?       Yes       No

Has applicant ever been cited for liquor law violations?       No       Yes  
Explain \_\_\_\_\_

Does applicant have an interest in another liquor license?       No       Yes  
Explain \_\_\_\_\_

Is spouse qualified to hold a license?       Yes       No       N/A

How is applicant if not an owner to be paid?       Salary       Hourly

How many hours will applicant be at the establishment?      55-60

Any other employment?       No       Yes, explain \_\_\_\_\_

Any previous experience with a liquor license?       Yes       No

Any criminal convictions?       No       Yes  
Comments Shoplift 1984

Is applicant a property owner in Lincoln?       Yes       No

Is applicant involved in any civil litigation?       No       Yes  
Comments \_\_\_\_\_

Photo       Records Check       References

Comments \_\_\_\_\_

Interview Date 4/10/02

# Application for Corporate Manager

\*Must Be A Nebraska Resident\*

Please submit in Triplicate

Return to: Nebraska Liquor Control Commission, PO Box 95046  
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571 Fax: (402) 471-2814 Web address: <http://www.nol.org/home/NLCC/COMMISSION>

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MAR 20 2002 FEB 27 2002

NEBRASKA LIQUOR CONTROL COMMISSION

## LIQUOR LICENSE INFORMATION

|                                    |         |                        |          |
|------------------------------------|---------|------------------------|----------|
| NAME OF LICENSED CORPORATION       |         | CLASS & LICENSE NUMBER |          |
| SALEM OIL COMPANY                  |         | B                      |          |
| TRADE NAME OF LICENSED PREMISE     |         |                        |          |
| Airport Amoco                      |         |                        |          |
| STREET ADDRESS OF LICENSED PREMISE | CITY    | COUNTY                 | ZIP CODE |
| 3100 NW 12th Street                | Lincoln | Lancaster              | 68521    |

On behalf of the corporation, I designate this individual as corporate manager.

**Signature of Corporate President/CEO:**



## APPLICANT INFORMATION (MUST BE 21 OR OVER)

|                                    |                                      |                        |                                |                |
|------------------------------------|--------------------------------------|------------------------|--------------------------------|----------------|
| NAME (LAST, FIRST, MIDDLE, MAIDEN) | SEX                                  | SOCIAL SECURITY NUMBER | DATE OF BIRTH                  | PLACE OF BIRTH |
| Scott, Jeffrey Jon                 | F <input checked="" type="radio"/> M |                        |                                | Beatrice, NE   |
| HOME STREET ADDRESS                | CITY                                 | COUNTY                 | STATE                          | ZIP CODE       |
| 1500 Irving Street                 | Lincoln                              | Lancaster              | NE                             | 68521          |
| HOME TELEPHONE NUMBER              | BUSINESS TELEPHONE NUMBER            |                        | DRIVERS LICENSE NUMBER & STATE |                |
| (402) 438-5891                     | (402) 475-8504                       |                        |                                |                |

## SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE NONE)

|   |                             |                                |
|---|-----------------------------|--------------------------------|
| FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) | SOCIAL SECURITY NUMBER      | DRIVERS LICENSE NUMBER & STATE |
| Scott, Bonnie Sue Vlcek                 |                             |                                |
| DATE OF BIRTH:                          | PLACE OF BIRTH: Lincoln, NE |                                |

**1. READ CAREFULLY** – Answer completely and accurately.

Has anyone who is a party to this application or their spouse, ever been convicted of or plead guilty to any criminal charge? Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or 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

**2.** Have you or your spouse ever made application for any liquor license or manager for any liquor license? **IF YES,** for what premise give license number and date.

YES       NO

# STATE OF NEBRASKA

Set date 7-8-02  
P.H. + 22-08

April 2, 2002

NEBRASKA LIQUOR CONTROL COMMISSION  
Forrest D. Chapman  
Executive Director

301 Centennial Mall South, 5th Floor  
PO Box 95046  
Lincoln, Nebraska 68509-5046  
Phone (402) 471-2571  
Fax (402) 471-2814  
TDD (402) 471-2571  
TDD USER 300 533-7399 (TTY)



Mike Johanns  
Governor

Office of the City Clerk  
555 So 10th St., Suite 103  
Lincoln, NE 68508

A2-035721  
139

FILED  
CITY OF LINCOLN  
NEBRASKA  
APR 3 PM 2 47

Dear Local Governing Body:

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) 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

Mary Messner

Licensing Division

Enclosures  
Rhonda R. Flower  
Commissioner

Bob Logsdon  
Chairman

R.L. (Dick) Coyne  
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001  
REV. 12 99

# Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

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FEB 27 2002

NEBRASKA LIQUOR  
CONTROL COMMISSION

- INSTRUCTIONS:**
- 1) Application and application for manager must be typewritten and submitted **in triplicate**
  - 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder, b) chief executive officer, c) proposed manager and d) all spouses
  - 3) Information regarding spouses must be completed

MAR 20 2002

NEBRASKA LIQUOR  
CONTROL COMMISSION

|  |  |                        |  |   |  |                              |  |
|--|--|------------------------|--|---|--|------------------------------|--|
| Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation |  | SALEM OIL COMPANY      |  | Total Number of Shares (if corporation)                           |  | 84                           |  |
| Corporate Street Address (1)   |  | 1234 North 14th Street |  | Mailing address for receipt of Liquor Control Commission Mailings |  | Box 81006, Lincoln, NE 68501 |  |
| City   |  | Lincoln                |  | County  |  | Lancaster                    |  |
| State  |  | NE                     |  | Zip Code  |  | 68508                        |  |
| Name of Registered Agent   |  | Charles R. Salem       |  | Name of Proposed Manager  |  | Jeffrey J. Scott             |  |
| <b>IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER</b>                  |  |                        |  |   |  |                              |  |
| Name   |  | Charles R. Salem       |  | Title   |  | President                    |  |
| Home Address (1)   |  | 2825 Stratford Avenue  |  | Date of Birth   |  | Social Security Number       |  |
| City   |  | Lincoln                |  | State   |  | NE                           |  |
| State  |  | NE                     |  | Zip Code  |  | 68502                        |  |
| Home Telephone Number  |  | 402-435-0434           |  | Date of Birth   |  | Social Security Number       |  |

### Corporation/LLC Application for License - Form 3

| PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES  |                        |               |           |                     |
|---|------------------------|---------------|-----------|---------------------|
| Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases | Social Security Number | Date of Birth | Title     | Number of Shares/ % |
| NAME: Charles Robert Salem<br>Spouse Name: Sherene Lee Salem  |                        |               | President | 75                  |
| NAME: Sherene Lee Salem<br>Spouse Name: Charles Robert Salem  |                        |               | Secretary | 0                   |
| NAME: _____<br>Spouse Name: _____   |                        |               |           |                     |
| NAME: _____<br>Spouse Name: _____   |                        |               |           |                     |
| NAME: _____<br>Spouse Name: _____   |                        |               |           |                     |
| NAME: _____<br>Spouse Name: _____   |                        |               |           |                     |

(If Necessary, Continue on Separate Sheet)

**Corporation/LLC Application for License - Form 3**  
Nebraska Liquor Control Commission

Is this Corporation/LLC controlled by another Corporation?  YES  NO

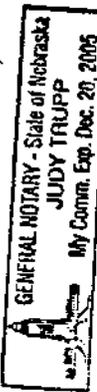
Name of Control Corporation

**IF YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned**

Please indicate below your corporate tax year with the IRS

Starting Date: 9-1 Ending Date: 8-31

STATE OF NEBRASKA )  
 )  
 ) ss. )  
 )  
LANCASTER County )



*Judy Truopp*  
Notary Public Signature & Seal

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format

**RECEIVED**

FEB 27 2002

NEBRASKA LIQUOR  
CONTROL COMMISSION

**RECEIVED**

MAR 20 2002

NEBRASKA LIQUOR  
CONTROL COMMISSION

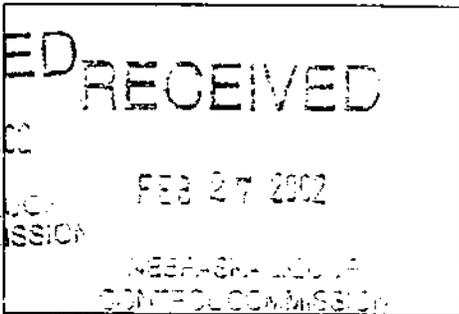
By *Chub R. Salo*  
PRESIDENT/MEMBER

*Sharon Lee Salo*  
SECRETARY/MEMBER

**APPLICATION FOR LICENSE**

Nebraska Liquor Control Commission  
 PO Box 95046, 301 Centennial Mall South  
 Lincoln, NE 68509-5046

<http://www.nol.org/>  
 Phone: (402) 471-2574  
 Fax: (402) 471-2814



**INSTRUCTIONS:** Include: 1. Applicable fees payable to Liquor Control Commission  
 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouses of corporations) file an affidavit of no interest with application. Commission form 4178  
 3. Corporations must include copy of articles of incorporation as filed with the Secretary of State office in the state of Nebraska  
 4. Commission checklist, form 4251  
 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders/member holding over 25% stock/interest.  
 6. All applications must be typewritten or printed clearly.  
 7. Submit in Triplicate

**CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH**

| Class of License<br>(Check applicable class)   | Registration Fee | License Fees             | Corporate Surety Bond |
|--|------------------|--------------------------|-----------------------|
| <input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits                                      | \$45.00          | Collected at Local Level | exempt                |
| <input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits                                     | \$45.00          | Collected at Local Level | exempt                |
| <input checked="" type="checkbox"/> B Beer, Off Sale Only - Indicate Inside or Outside Corporate Limits      | \$45.00          | Collected at Local Level | exempt                |
| <input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits                                | \$45.00          | Collected at Local Level | exempt                |
| <input type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits                       | \$45.00          | Collected at Local Level | exempt                |
| <input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits                      | \$45.00          | \$150.00                 | exempt                |
| <input type="checkbox"/> D1 Spirits, Wine, Beer, Off Sale only - within extraterritorial zoning jurisdiction | \$45.00          | \$150.00                 | exempt                |
| <input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits                       | \$45.00          | Collected at Local Level | exempt                |
| <input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, on Sale)  | \$45.00          | Collected at Local Level | exempt                |
| <input type="checkbox"/> H Nonprofit Corporation   | \$45.00          | Collected at Local Level | exempt                |
| <input type="checkbox"/> K Wine Only, Off Sale   | \$45.00          | Collected at Local Level | exempt                |
| <input type="checkbox"/> O Boat  | \$45.00          | \$ 50.00                 | exempt                |
| <input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits                                    | \$45.00          | Varies \$100 to \$1,000  | \$10,000 min.         |
| <input type="checkbox"/> X Wholesale Liquor  | \$45.00          | \$500.00                 | \$ 5,000 min.         |
| <input type="checkbox"/> W Wholesale Beer  | \$45.00          | \$250.00                 | \$ 5,000 min.         |
| <input type="checkbox"/> Y Farm Winery   | \$45.00          | \$250.00                 | \$ 5,000 min.         |
| <input type="checkbox"/> L Craft Brewery (Brew Pub)  | \$45.00          | \$250.00                 | \$ 5,000 min.         |

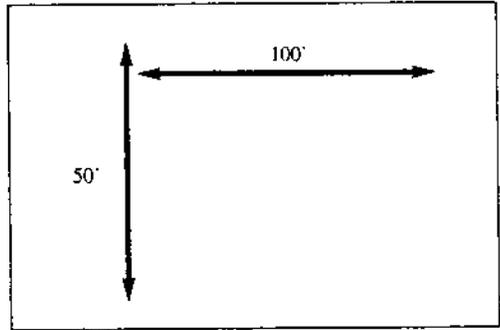
| TYPE OF APPLICATION  | CORPORATE SURETY BOND INFORMATION   |
|--|---|
| Type of application being applied for (place appropriate number in box)<br><div style="border: 1px solid black; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 5px;">3</div> 1= Individual License requires Form 1 to be attached.<br>2= Partnership License requires Form 2 to be attached.<br>3= Corporate License requires Form 3 and 4 and Manager Application be attached. | Bond Company - for Classes L V W X Y only<br><div style="border: 1px solid black; width: 100%; height: 30px; margin: 5px;"></div> Start Date Month/Day/Year      Bond Number<br><div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="border: 1px solid black; width: 40%; height: 25px;"></div> <div style="border: 1px solid black; width: 40%; height: 25px;"></div> </div> |

**SECTION A - LOCATION INFORMATION - Must be completed by all applicants**

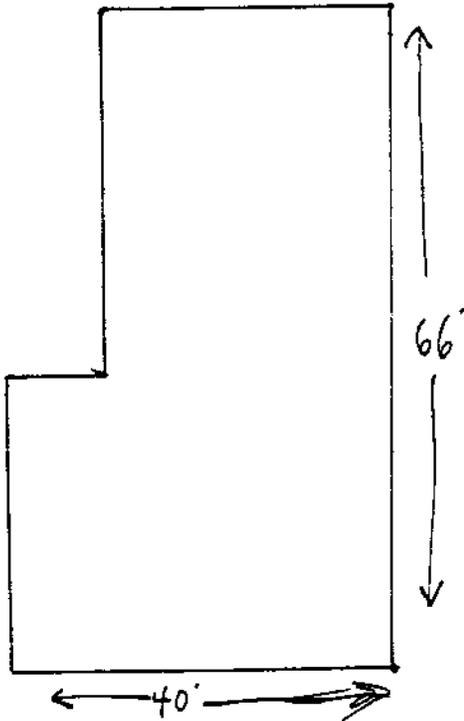
|  |           |          |  |           |          |
|--|-----------|----------|--|-----------|----------|
| Trade Name (name of business)                  |           |          | Telephone Number at premise to be licensed                           |           |          |
| Airport Amoco                                  |           |          | 402-475-8504   |           |          |
| 1) Street Address of Proposed licensed premise |           |          | 2) Mailing Address for receipt of Liquor Control Commission mailings |           |          |
| 3100 NW 12th Street                            |           |          | Box 81006  |           |          |
| City   | County    | Zip Code | City   | County    | Zip Code |
| Lincoln  | Lancaster | 68521    | Lincoln  | Lancaster | 68501    |

**DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED**

In the space provided draw the area to be licensed. This should include storage areas, basement, 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 in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement approximately 30' x 50' at the East end.



*This is a one-story building*

| SECTION B  |     | OTHER INFORMATION REQUIRED |                      |  |   |  |
|--|-----|----------------------------|----------------------|--|---|--|
|  | Yes | No                         | Explanation/Comments |  |   |  |
| <p>1. <b>READ CAREFULLY.</b> Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor or violation of a federal or state law; or 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.</p> |     |                            |                      |  | X |  |

|   | Yes | No | Explanation/Comments  |
|---|-----|----|---|
| 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).   |     | X  |   |
| 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.   |     | X  |   |
| 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.   |     | X  |   |
| 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.   |     | X  |   |
| 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.   |     | X  |   |
| 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?   |     | X  |   |
| 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.                                |     | X  |   |
| 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.   |     | X  |   |
| 10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.   |     |    | Wells Fargo<br>1248 O Street<br>Lincoln, NE 68508<br><i>Charles R. Salem</i>                                  |
| 11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.   |     |    | Salem Oil Co., 1648 South St.<br>Lincoln, NE #43562<br>Salem Oil Co., 630 W. Prospector<br>Lincoln, NE #51966 |
| 12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.  |     |    | Jeffrey Jon Scott<br><br>54 hours per week  |
| 13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.  |     |    | None, but he is registered for Responsible Hospitality Council Management Training in May, 2002.              |
| 14. 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 interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed). |     |    | <i>Deed Enclosed</i><br><i>Lease Enclosed</i>   |
| 14. When do you intend to open for business?  |     |    | 4-1-02  |

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

| NAME                 | FROM (YEAR) | TO (YEAR) | RESIDENCE (CITY, STATE) |
|----------------------|-------------|-----------|-------------------------|
| Charles Robert Salem | 1945        | present   | Lincoln, NE             |
| Sherene Lee Salem    | 1945        | present   | Lincoln, NE             |
|                      |             |           |                         |
|                      |             |           |                         |
|                      |             |           |                         |
|                      |             |           |                         |

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waives(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 or 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 and/or inaccurate.

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. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign here Charles Robert Salem sign here \_\_\_\_\_  
 sign here Sherene Lee Salem sign here \_\_\_\_\_  
 sign here \_\_\_\_\_ sign here \_\_\_\_\_  
 sign here \_\_\_\_\_ sign here \_\_\_\_\_

Subscribed in my presence and sworn to before me this 28<sup>th</sup> day of February, 2002

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

RECEIVED (SEAL)  
 MAR 20 2002  
 NEBRASKA LIQUOR CONTROL COMMISSION

GENERAL NOTARY - State of Nebraska  
 JUDY TRUFP  
 My Comm. Exp. Dec. 31, 2005

sign here \_\_\_\_\_  
 Notary Public Signature

RECEIVED RECEIVED

MAR 20 2002

FEB 27 2002

NEBRASKA LIQUOR CONTROL COMMISSION  
AFFIDAVIT OF NON PARTICIPATION

NEBRASKA LIQUOR CONTROL COMMISSION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53-125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on application.

[Handwritten Signature]

Signature of Spouse

GENERAL NOTARY - State of Nebraska  
JUDY TRUPP  
My Comm. Exp. Dec. 20, 2005

SUBSCRIBED in my presence and sworn to before me this 25<sup>th</sup> day of February, 2002.

[Handwritten Signature]

Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

[Handwritten Signature]  
Signature of Licensee/Applicant

Jeffrey Jon Scott  
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 25<sup>th</sup> day of February, 2002.

GENERAL NOTARY - State of Nebraska  
JUDY TRUPP  
My Comm. Exp. Dec. 20, 2005

[Handwritten Signature]

Signature of Notary Public

RECEIVED

MAR 20 2002

RECEIVED

NEBRASKA LIQUOR CONTROL COMMISSION  
AFFIDAVIT OF NON PARTICIPATION

FEB 27 2002

NEBRASKA LIQUOR  
CONTROL COMMISSION

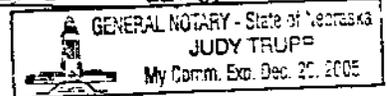
The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53-125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on application.

*Asherson Lee Adams*

Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 25<sup>th</sup> day of

February, 2002.



*Judy Trupp*

Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

*Charles R. Salem*

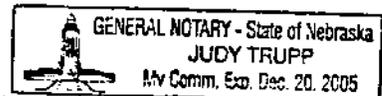
Signature of Licensee/Applicant

Charles R. Salem

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 25<sup>th</sup> day of

February, 2002.



*Judy Trupp*

Signature of Notary Public

Lincoln



Nebraska's Capital City

April 10, 2002

Mayor Wesely and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Sam's West Inc, d.b.a. Sam's Club 4700 North 27<sup>th</sup> Street requesting that Roland Meirose be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Roland Meirose was born in Yankton, South Dakota. He attended University of Nebraska graduating in 1985.

Roland Meirose has been employed by Wal-Mart Stores since 1985. He has attended the Responsible Hospitality Management training class.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police

