

April 13, 2016

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

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of Bourbon Entertainment, LLC, dba Bourbon Theatre, 1415 O St, requesting a class C- 117285 liquor license.

Becki Reagan, President of Bourbon Entertainment, LLC, is requesting that she be approved as the manager of the liquor license. Ms. Reagan has not yet completed the required alcohol management training. She is scheduled to attend on May 12, 2016.

An operating agreement was made between NAR, LLC, Lincoln Live, LLC, and B.A. Productions, Inc. to form the company, Bourbon Entertainment, LLC, for the purpose of operating Bourbon Theatre. Sean Reagan and Becki Reagan are members of NAR, LLC. Joshua Hunt and Jeffrey Fortier are members of Lincoln Live, LLC. Jeremiah Moore is the sole member of B.A. Productions, Inc. Mr. Moore was the previous owner/operator of Box Awesome's Bourbon Theatre. He will remain as the in-house booking manager and act as a consultant. Lincoln Live, LLC is a subsidiary of Mammoth, Inc., a concert production and promotion company that locally books concerts at venues such as Bourbon Theatre, Rococo Theatre and Pinewood Bowl.

Becki Reagan is an experienced accountant and will take over all of the accounting functions and conduct other day-to-day operations. Sean Reagan is an attorney with Reagan Law Offices.

No areas of concern were found.

The application is included for your 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.



BRIAN JACKSON, Interim Chief of Police



**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		
MAR 28 2016		
NEBRASKA LIQUOR CONTROL COMMISSION		
Hot List: YES / NO	New/Replacing #	084758
Class Type	117285	Initial RS

TOP Denial Approved 3/30

Applicant name Bourbon Entertainment, LLC

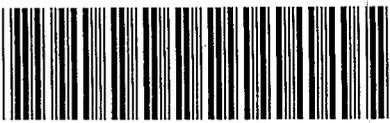
Trade name Bourbon Theatre

Previous trade name Bourbon Theatre

Contact email address sean@rmdlaw.net

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.

RECEIPT	DATE	<u>3-25-16</u>	No.	168728
	FROM	<u>Sean M Regan</u>		
	FOR	<u>New Application</u>		
		<input type="checkbox"/> CASH <input checked="" type="checkbox"/> CHECK # <u>2022</u> <input type="checkbox"/> MONEY# _____ ORDER	\$ <u>400</u> ⁰⁰	
	Received by	<u>[Signature]</u>		

Office use only	PAYMENT TYPE	<u>Chk 2022/rcpt#:</u>
	AMOUNT	<u>\$400</u> <u>168728</u>
	Received:	<u>alh</u>
	 1600005566	

RECEIVED
alh 3/25

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. 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)
4. 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. If building is owned or being purchased send a copy of the deed or purchase agreement in the name of the applicant.
6. 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. If requesting to operate on current liquor license; enclose Temporary Operating Permit (TOP) (form 125).
8. Enclose a list of any inventory or property owned by other parties that are on the premises.
9. 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. 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. Submit a copy of your business plan.

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**NEBRASKA LIQUOR
CONTROL COMMISSION**

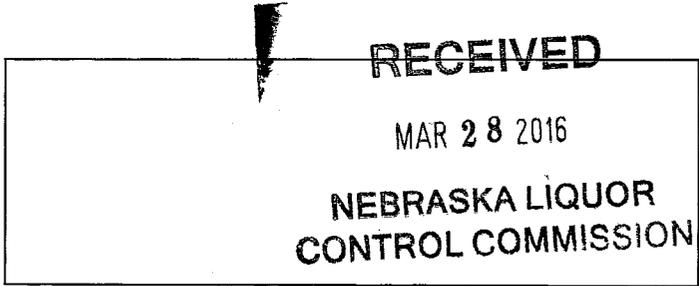
I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 60 days. Furthermore, I understand that all the information is truthful and I accept all responsibility for any false documents.

Becki Reagan
Signature

3/23/16
Date

**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/



**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 SPIRITS, ON AND OFF SALE
 - D BEER, WINE, DISTILLED SPIRITS, OFF SALE ONLY
 - 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)
- 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 Sean Reagan Phone number: 402-730-3162

Firm Name Reagan, Melton & Delaney, LLP

PREMISES INFORMATION

Trade Name (doing business as) Bourbon Theatre

Street Address #1 1415 'O' Street

Street Address #2 _____

City Lincoln

County Lancaster

Zip Code 68508

Premises Telephone number none

Business e-mail address bourbontheatre@gmail.com

Is this location inside the city/village corporate limits:

YES

x

NO

MAR 28 2016

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

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NEBRASKA LIQUOR CONTROL COMMISSION

Name Bourbon Entertainment, LLC

Street Address #1 140 North 8th Street, Suite 250

Street Address #2 _____

City Lincoln

State NE

Zip Code 68508

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 142 x width 60 in feet

Is there a basement? Yes _____ No _____

If yes, length _____ x width _____ in feet

Is there an outdoor area? Yes R No _____

If yes, length 50 x width 8 in feet

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

See attached

60'

exit

exit

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CONTROL COMMISSION

141 S O 3 F

142'

entrance

entrance

8'

out door Patio

50'

North ↓

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.

YES NO

If yes, please explain below or attach a separate page

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Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition
Sean Reagan				
Sean Reagan	11/1999	Lincoln NE	Speeding 6-10	\$25 fine
Sean Reagan	7/2001	Seward NE	Speeding 6-10	\$25 fine
Sean Reagan	12/2007	Lincoln NE	Speeding 6-10	\$25 fine
Sean Reagan	8/2013	Bellevue, NE	No seatbelt	\$10 fine

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

YES NO

If yes, give name of business and liquor license number Box Awesome, LLC

- 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 NO

If yes, give name and license number Box Awesome, LLC

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

YES 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?

____ 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 NO

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

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**NEBRASKA LIQUOR
CONTROL COMMISSION**

No silent partners

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

____ YES 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 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 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.

Union Bank & Trust; Becki L. Reagan, Jeremiah A. Moore, Sean M. Reagan
Andrea Fabiano

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.

Jeremiah A. Moore

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)
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		NEBRASKA LIQUOR CONTROL COMMISSION

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 2021
 Deed
 Purchase Agreement

14. When do you intend to open for business? Upon approval of TOP

15. What will be the main nature of business? Concert venue

16. What are the anticipated hours of operation? 6 pm to 1 am

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 TO		SPOUSE: CITY & STATE		YEAR FROM TO	
Bede Reagen	Lincoln, NE	2000	present	Same			
Sean Reagen	Lincoln, NE	2000	present	Same			
Joshua Hunt	Lawrence, KS	2000	present	Same			
Jeremiah Moore	Lincoln, NE	2000	present	Same			
Jeffrey M. Fortier	Kansas City, MO		present	Same			

If necessary attach a separate sheet.

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>

Becki L. Reagan
Signature of Applicant

Sean M. Reagan
Signature of Spouse

Becki L. Reagan
Print Name

Sean M. Reagan
Print Name

Signature of Applicant

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Signature of Spouse
MAR 28 2016
NEBRASKA LIQUOR CONTROL COMMISSION

Print Name

ACKNOWLEDGEMENT

State of Nebraska
County of Lancaster
3/25/16 date

The foregoing instrument was acknowledged before me this
by Amanda M. Lucas
name of person(s) acknowledged (individual(s) signing)

Amanda M. Lucas
Notary Public signature

State of Nebraska - General Notary
AMANDA M LUCAS
My Commission Expires
July 17, 2019

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

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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 (must show electronic stamp or barcode receipt by Secretary of States office)

Name of Registered Agent: Sean M. Reagan

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

Bourbon Entertainment, LLC

010222373

LLC Address: 140 N. 8th Street, Ste. 250

City: Lincoln

State: NE

Zip Code: 68508

LLC Phone Number: 402-476-6585

LLC Fax Number: 402-476-7499

Name of Managing/Contact Member

Name and information of contact member must be listed on following page

Last Name: Reagan

First Name: Becki

MI: L

Home Address: 1866 SW 37th Street

City: Lincoln

State: NE

Zip Code: 68522

Home Phone Number: 402-730-3163

Signature of Managing/Contact Member

ACKNOWLEDGEMENT

State of Nebraska

County of Lancaster

The foregoing instrument was acknowledged before me this

3/25/16

Date

by Amanda M. Lucas
name of person acknowledge

Amanda M. Lucas

Affix Seal

State of Nebraska - General Notary
AMANDA M LUCAS
My Commission Expires
July 17, 2019

List names of all members and their spouses (even if a spousal affidavit has been submitted)

Last Name: Reagan First Name: Becki MI: L

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): Sean M. Reagan

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership 0

Last Name: NAR, LLC First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership 45%

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Last Name: Lincoln Live, LLC First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership 45%

Last Name: BA Productions, Inc. First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership 10%

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

YES

NO

If yes, provide the following:

- 1) Name of corporation _____
- 2) Supply an organizational chart of the controlling corporation named above
- 3) Controlling corporation **MUST** be registered with the Nebraska Secretary of State, copy of articles must be submitted with application §53-126

Indicate the company's tax year with the IRS (Example January through December)

Starting Date: January

Ending Date: December

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CONTROL COMMISSION

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.

**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



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: Bourbon Entertainment, LLC

Premise information

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

Premise Trade Name/DBA: Bourbon Theatre

Premise Street Address: 1415 'O' Street

City: Lincoln County: Lancaster Zip Code: 68508

Premise Phone Number: NA

Email address: bourbontheatre@gmail.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

Becki L. Reagan

SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER

(Faxed signatures are acceptable)

Manager's information must be completed below. PLEASE PRINT CLEARLY

Last Name: Reagan First Name: Becki MI: L
 Home Address (include PO Box if applicable): 1866 SW 37th Street
 City: Lincoln County: Lancaster Zip Code: 68522
 Home Phone Number: 402-730-3163 Business Phone Number: same
 Social Security Number: _____ Drivers License Number & State: _____
 Date Of Birth: _____ Place Of Birth: Omaha, Nebraska
 Email address: beckireagan@hotmail.com

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

YES NO

Spouse's information

Spouses Last Name: Reagan First Name: Sean MI: M
 Social Security Number: _____ Drivers License Number & State: _____
 Date Of Birth: _____ Place Of Birth: Omaha, Nebraska

APPLICANT & SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST TEN (10) YEARS

APPLICANT			SPOUSE		
CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Lincoln, Nebraska	1992	present	Lincoln, Nebraska	1995	present

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NEBRASKA LIQUOR CONTROL COMMISSION

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2000	present	Commercial Investment Properties	Clint Taubenheim	402-436-3476
2007	present	Reagan Law Offices, PC, LLO	Sean Reagan	402-730-3162

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. **RECEIVED** 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
Sean Reagan	12/2007	Lincoln NE	speeding 6-10mph	\$25 fine
Sean Reagan	11/1999	Lincoln NE	Speeding 6-10mph	\$25 fine
Sean Reagan	8/2013	Belleve, NE	No seat belt	\$10 fine
Sean Reagan	7/2001	Seward, NE	Speeding 6-10mph	\$25 fine

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 (where and when) for the person making application.

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*NLCC Training Certificate Issued: _____ Name on Certificate: _____

**NEBRASKA LIQUOR
CONTROL COMMISSION**

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)

*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:
Becki Reagan / accountant	2000-present	Commercial Investment Properties, Lincoln, NE
Sean Reagan / attorney	1999-present	Reagan Law Offices, PC, LLO, Lincoln, NE

5. Have you enclosed Form 147 regarding fingerprints?

YES NO

PERSONAL OATH AND CONSENT OF INVESTIGATION

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, a spousal affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent.

Becki L Reagan
Signature of Manager Applicant

[Signature]
Signature of Spouse

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NEBRASKA LIQUOR
CONTROL COMMISSION

ACKNOWLEDGEMENT

State of Nebraska
County of Lancaster The foregoing instrument was acknowledged before me this
3/25/16 date by Amanda M. Lucas
name of person acknowledged

Amanda M. Lucas
Notary Public signature

Affix Seal
State of Nebraska - General Notary
AMANDA M LUCAS
My Commission Expires
July 17, 2019

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.

**SUBMISSION 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	
Office Use Only	
Class: _____	License #: _____

Applicant Name: **Bourbon Entertainment, LLC**

(Corporation, LLC, Partnership or Individual)

Trade Name: **Bourbon Theatre**

(Doing Business As)

(402) 730 - 3163

Phone Number

beckireagan@hotmail.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.

APPLICATION FOR TEMPORARY OPERATING PERMIT (TOP)

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814

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MAR 31 2016
NEBRASKA LIQUOR CONTROL COMMISSION

Office Use
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NEBRASKA LIQUOR CONTROL COMMISSION

- Application for a temporary operation permit (TOP) must be included with the application for liquor license. TOP will not be considered without the completed application for a liquor license.
- Enclose documentation showing sale of business; document may be in the form of a purchase agreement/contract, management agreement or promissory note. Sale of business document must include the following: name of business being sold, purchase date or closing date within 2-3 weeks of requesting TOP and must be signed by the seller and buyer.
- TOP's are valid for 90 days from date of issuance and cannot be extended past the expiration date (no exceptions).
- Seller's liquor license will terminate upon issuance of the TOP.
- If the seller's liquor license is up for renewal during the TOP it will not be necessary for the seller to renew.

NAME OF CURRENT LICENSEE (SELLER):

SELLER'S LICENSE #:

Box Awesome LLC

084758

On (date) 3-8-16 seller and buyer entered into a contract for sale of the

business known as (TRADE NAME):

Bourbon Theatre

Buyer seeks to obtain a temporary operating permit (TOP) to allow buyer to operate the business under the same terms and conditions of the current licensee; subject to approval by the Nebraska Liquor Control Commission (NLCC) for a period not to exceed 90 days (no exceptions).

Seller hereby declares that they are current on all accounts with all Nebraska licensed wholesalers under section §53-123.02. Any seller who provides false information regarding such accounts is guilty of a Class IV misdemeanor for each offense.

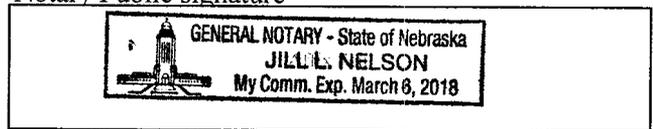
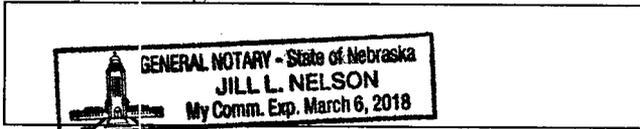


Signature of **SELLER**
Jeremiah Moore
Print Name

Signature of **BUYER**
Sean Reagan
Print Name

State of Nebraska, County of Lancaster
The foregoing instrument was acknowledged before me
this 25th day of March, 2016 (date)
by Jeremiah Moore
Name(s) of Person(s) Acknowledged [individual(s) signing document]
Jill L. Nelson
Notary Public signature

State of Nebraska, County of Lancaster
The foregoing instrument was acknowledged before me
this 25th day of March, 2016 (date)
by Sean Reagan
Name(s) of Person(s) Acknowledged [individual(s) signing document]
Jill L. Nelson
Notary Public signature



ADMINISTRATIVE REVIEW - Office use only

Date: 3/25/16 Rep: RS Application Number: 117285

Approved Denied mm

Reason for Denial:
Purchase of Assets not in correct name

3/30/16 - ok to issue FOP - mm

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NEBRASKA LIQUOR
CONTROL COMMISSION