APPLICATION FOR OPERATOR'S LICENSE

		License Expires June 30				0,	
1.					e Filing		
2.	Name(Print) First Initial Last				Soc.Sec.No		
	(Print) First	Initial	Last				
3.	Home Address	Street		City	State	zip	
	Date of Birth_						
	Are you a full						
6.	Have you been a resident of Wisconsin continuously for <u>ONE YEAR</u> to the date of application? Yes No						
7.	List all your residence for the past Two Years to the date of application:						
8.	Reference:	Name	Addr	ess	<u>0cc</u> 1	upation .	
	Personal:		-				
	Business:		_				
	Have you EVER been convicted of violating any: Federal Laws ANYWHERE? Wisconsin State Laws? Laws of ANY other State? Ordinances of the City of Fond du Lac? Specify offenses, giving date and places or convictions:						
	(Use reverse s	ide if addition	onal space	e is requi	ired)		
11.	Where will you be employed as a bartender?						
	Trade Name:			wner's Na	me:		
	ATE OF WISCONSIN						
the	e undersigned, B e applicant name MPLETE answer to se and correct.	s in the fore	going app	lication;	that he has r	ead and made	
(NC	OTARY PUBLIC OR	CITY CLERK MU	ST ADMIN	ISTER OATH)		
Sul	oscribed and swo	rn to before			(Applicant's S	ignature)	
					(ubbitiogue a c		
	Clerk-Notary		EE:	(Payabl	e at time of a	application)	
Red	ceipt No	Da	te				
Li	cense No	Date o	of Issuan	ce:			