REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Keggiz L. Belanger
Address: Z52 E. Hinkland Ave
City: Milmankee ZIP CODE: 53202
Organization Represented (if any): Siegel-Gallagher
XI wish to speak. * Hilwankee Moderne
I do not wish to speak.
In favor of license
Not in favor of license

2

OFFICE OF THE CITY CLERK CITY OF MILWAUKEE

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: ToDD+a
Address: 2512 W Frederick AVE
City: ZIP CODE: 53211
Organization Represented (if any):
I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license



REGISTRATIONFORM



Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: CHAZ HASTINES
Address: 11310 W SILVER SPRING RO
City: Mlcaferles ZIP CODE: 53225
Organization Represented (if any): A THEE MILWAUKEE MARKEY - DANDSOL
I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Pat O'Brien
Address: 756 N Milmke St
City: ZIP CODE: 53202
Organization Represented (if any): WAM DC Wisconsin Ave Milnelee Developed loss
X I wish to speak.
I do not wish to speak.
In favor of license
X Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Old World Time St.
Please PRINT
Name: Martha / pre
Address: 1846 Wort 1 Mossey Suit
City: 14/2 ZIP CODE: 53/205
Organization Represented (if any):
LI wish to speak. Durith Milwarker
I do not wish to speak.
In favor of license
Not in favor of license

5

OFFICE OF THE CITY CLERK CITY OF MILWAUKEE

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Angela Damiani
Address: 161 W. W. Sconsin Are HIL
City: VIWaull ZIP CODE: 53203
Organization Represented (if any): West With Taok Force
\(\sum_{\text{I}} \) wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

6

OFFICE OF THE CITY CLERK CITY OF MILWAUKEE

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT	
Name: Wichael Alac	
Address: 720 N. 92 Warld 3rd 57 # 1110	
City: Milwaykee ZIP CODE: 53203	
Organization Represented (if any):	
I wish to speak.	
I do not wish to speak.	
In favor of license	
Not in favor of license	

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT					
Name: NICK MENTY	8				
Address: 120 N old	world	3°6d	5+	AP+	11/0
City: Mlvaycee	ZIP CODE:	532	03		
Organization Represented (if any):	50.000				
I wish to speak.					
I do not wish to speak.					
In favor of license					
Not in favor of license					

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT	
Name: Steve Miracle	
Address: 770 N 012	World 3.2 +1904
City: Milnaulcec	ZIP CODE: 33703
Organization Represented (if any):	
✓ I wish to speak.	
I do not wish to speak.	
In favor of license	
✓ Not in favor of license	

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: DAUTO PEPCHISTI
Address: 720 N. OCD NONCD 3ND 57. #800
City: MIC WADNEE ZIP CODE: 53753
Organization Represented (if any): THE Grand Mascand STA
Dwish to speak.
I do not wish to speak.
In favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Mill Wall
Address: 120 N. Od World 3rd St. Ad
City: Milloul (00 ZIP CODE: 53603)
Organization Represented (if any):
I wish to speak.
I do not wish to speak.
In favor of license
X Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT	
Name: Thi VINCENT	
Address: 1374 N 3151 STREET	
City: Milwaukee ZIP CODE: 53208	
Organization Represented (if any):	
I wish to speak.	
I do not wish to speak.	
In favor of license	
Not in favor of license	

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT	
Name: Mark Hospe	
Address: 100 Main St.	
City: Warkesha ZIP CODE: 53/86	
Organization Represented (if any):	
I wish to speak.	
I do not wish to speak.	
In favor of license	
Not in favor of license	

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT	
Name: Regina Estrada	
Address: 720 N old World 3rd St #403	
City: Mi wantee ZIP CODE: 53203	
Organization Represented (if any):	
XI wish to speak.	
I do not wish to speak.	
In favor of license	
XNot in favor of license	

14

OFFICE OF THE CITY CLERK CITY OF MILWAUKEE

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT	
Name: Taylor Imm	
Address: 720 NOLD WORLD 3Rd ST.	#402
City: Milvantee ZIP CODE: 53203	
Organization Represented (if any):	
I wish to speak.	
I do not wish to speak.	
In favor of license	
V Not in favor of license	

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT	
Name: New Koberts	
Address: 734 Old World Third St	
City: Mil Wanker ZIP CODE: 53203	
Organization Represented (if any):	
I wish to speak.	
I do not wish to speak.	
In favor of license	
Not in favor of license	

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: CAVMENCLAX
Address: 734 NO/d world 3rd 5+ #47
City: MILWAUKEE ZIP CODE: 53203
Organization Represented (if any):
✓ I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT	
Name: Shane M. Kowal	
Address: 734 N. old world 3rd St Apt 23	
City: Mikwaskee WI ZIP CODE: 53207	
Organization Represented (if any):	
Y I wish to speak.	
I do not wish to speak.	
Not in favor of license	

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Janan Najeeb
Address: 5235 S. 27th St.
City: ZIP CODE:
Organization Represented (if any): Muslim Women's Coal itior
I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Not in favor of license

Please PRINT
Name: Dana World-Patterson
Address: 7080x 11908
City:
Organization Represented (if any): Human Trafficking Taskforce XI wish to speak. I do not wish to speak.
In favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: C. Michelle Bryant
Address: 275 W. Wisconsin Ave
City: Milw ZIP CODE: 53203
City: NIW ZIP CODE: 53203 Organization Represented (if any): African World Fastival
I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

RE: 04 KRAHN, Scott A, Agent for "Six Star Holdings, LLC", Class B Tavern, Food Dealer, and Public Entertainment Premises License Applications Requesting Adult Entertainment, Disc Jockey, Dancing by Performers, Patron Contests, and Patrons Dancing as agent for "Silk Exotic" at 730 N Old World Third St.

Please PRINT
Name: Melissa McVVIII
Address: Wisconsin Cheese Mart
City: MINAUKAE ZIP CODE: 53703
Organization Represented (if any):
I wish to speak.
I do not wish to speak.
In favor of license

Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: DAVID Weik
Address: 720 W 010 WORD 380
City: M. 1 LANCO ZIP CODE: 53202
Organization Represented (if any):
I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Linel Schram
Address: 220 N OW 312 Sx
City: ZIP CODE: 53203
Organization Represented (if any): US RRB
I wish to speak.
I do not wish to speak.
In favor of license Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Mchilas Wolf
Address: 720 N. ya Wodd 3rd St
City: ZIP CODE: 53203
Organization Represented (if any):
✓ I wish to speak.
I do not wish to speak.
In favor of license
X Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

DDINI

Please PRINI
Name: Mark Endres
Address: 720 N. Old Warld 3th St #1/06
City: Milwarker, WI ZIP CODE: 53203
Organization Represented (if any):
Wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

26

OFFICE OF THE CITY CLERK CITY OF MILWAUKEE

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: <u>Veter</u> Wyont
Address: 720 N. Old World 3rd St.
City: Milwakee ZIP CODE: 53203
Organization Represented (if any):
X I wish to speak.
I do not wish to speak.
In favor of license
X Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT	
Name: EMILL WOUSE	
Address: 720 N. ad World 3rd St FATT	
City: MIWAUKO ZIP CODE: 53308	
Organization Represented (if any):	
X I wish to speak.	
I do not wish to speak.	
In favor of license	
Not in favor of license	

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Leah Harrand
Address: 720 N. Old World Third St. Apt 806
City: Milurukee ZIP CODE: 53203
Organization Represented (if any):
I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Allison Eggers
Address: 720 N Old World 3rd St.
City: Milwaukee ZIP CODE: 53203
Organization Represented (if any):
I wish to speak. I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Jame: Samantha Cooper
Address: 720 N. 012 World 3rd St. #1004
City: MKe ZIP CODE: 53203
Organization Represented (if any):
X I wish to speak.
I do not wish to speak.
In favor of license
Whot in favor of license

31

OFFICE OF THE CITY CLERK CITY OF MILWAUKEE

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Undsey Wicker
Address: 720 W Did worrld 3rd
City: ZIP CODE: 53203
Organization Represented (if any):
Twish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Andrew Hill
Address: 720 N old world 3rd
City: MIlwankee W.T ZIP CODE: 53203
Organization Represented (if any): Grand WI 53203
I wish to speak.
I do not wish to speak.
In favor of license
VNot in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

RE: 04 KRAHN, Scott A, Agent for "Six Star Holdings, LLC", Class B Tavern, Food Dealer, and Public Entertainment Premises License Applications Requesting Adult Entertainment, Disc Jockey, Dancing by Performers, Patron Contests, and Patrons Dancing as agent for "Silk Exotic" at 730 N Old World Third St.

Not in favor of license

Please PRINT
Name: Janet Millor
Address: 720 N. Old World Third St.
City: MWaukee ZIP CODE: 53203/
Organization Represented (if any): Brand Wisconsin Benedict
X I wish to speak.
I do not wish to speak.
In favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Jennifer Zinn
Address: 720 N. Old World Third Street #50
City: Milwaukee, WI ZIP CODE: 53203
Organization Represented (if any):
I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

34

OFFICE OF THE CITY CLERK CITY OF MILWAUKEE

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: STEVE LOF
Address: 600 E. WELLS
City: Milwaukee ZIP CODE: 53202
Organization Represented (if any): BID #21
✓ I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license



REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Rev-Thomas Perrin, S.D.S.
Address: 7100 Old Loomis Rd.
City: <u>Greendale</u> ZIP CODE: 53802
Organization Represented (if any):
X I wish to speak.
I do not wish to speak.
In favor of license
X Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: CHRIS BEDAR
Address: 3486 N SUMMIT AVE
City: MILW ZIP CODE: 53211
Organization Represented (if any):
I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Jd Hervess
Address: 83 W W1560-51
City: ZIP CODE: 53233
Organization Represented (if any):
I wish to speak.
I wish to speak I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: KNRIOCE MONTES 40 CARRAGO-
Address: 124-1-Wilesaute
City: Milliande WZ ZIP CODE: 53202
Organization Represented (if any):
I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Bruce Block
Address: 1000 N. Water Street Swife 2100
City: MolNankee ZIP CODE: 53202
Organization Represented (if any): BID N. 21
I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT	
Name: Joel Schutz	
Address: 3222 W. 88th Street	
City: Milwaukee ZIP CODE: 53222	
Organization Represented (if any):	
I wish to speak.	
I do not wish to speak.	
In favor of license	
Not in favor of license	

REGISTRATIONFORM

Licenses Committee Meeting

Room 301-B, 3rd Floor, City Hall

1:30 PM

Please PRINT
Name: Stacie Callies Westown
Address: 224 & Mason St. unit A
City: Milwaelle ZIP CODE: 53202
Organization Represented (if any):
I wish to speak.
I do not wish to speak.
In favor of license
Not in favor of license