

STATE OF WISCONSIN)
) ss.
MILWAUKEE COUNTY)

SUMMONS

The Licenses Committee of the Common Council of the City of Milwaukee

TO: Any Police Officer of and for the City of Milwaukee

You are hereby commanded to summon Kent Parker, Agent for "All Stars Sports Bar & Grill" for the premises at 4001 W. Fond du Lac Avenue, Milwaukee, Wisconsin, to appear before the Licenses Committee of the Common Council of the City of Milwaukee at its meeting in Room 301-B, City Hall, 200 East Wells Street, in the City and County of Milwaukee, State of Wisconsin on October 30, 2006 at 8:15 A.M. to show cause why the Class "B" Tavern License, issued to Kent Parker, Agent for "All Stars Sports Bar & Grill" at 4001 W. Fond du Lac Avenue, Milwaukee, Wisconsin should not be revoked or suspended.

TO: Kent Parker, Agent
All Stars Sports Bar & Grill
4001 W. Fond du Lac Ave.
Milwaukee, WI

Pursuant to sec. 125.12 of the Wisconsin Statutes, and Chapter 90 of the Code of Ordinances of the City of Milwaukee, you are hereby commanded to appear on October 30, 2006 at 8:15 A.M. at a hearing before the City's Licenses Committee to be held in Room 301-B, City Hall, 200 East Wells Street, Milwaukee, Wisconsin to show cause why your Class "B" Tavern License should not be revoked or suspended. The hearing is being initiated because of the City of Milwaukee's receipt of a sworn written complaint, filed by Katina Robertson-Johnson, seeking revocation of the Class "B" Tavern License issued for your establishment located at 4001 W. Fond du Lac Avenue in the City and County of Milwaukee, Wisconsin. A copy of this complaint is attached hereto. You are also being provided with a copy of sec. 90-12 of the Milwaukee Code of Ordinances.

On October 30, 2006 at 8:15 A.M., you will be given an opportunity to speak on your own behalf, and to respond to and challenge any charges or reasons given by witnesses at the aforementioned hearing in support of a revocation or suspension of your license. You may present your own supporting witnesses, under oath, at this hearing, and you may also confront and cross-examine opposing witnesses. If you wish to do so, and at your own expense, you may be accompanied by an attorney of your own choosing to represent you at this hearing.

If you, Kent Parker, fail to appear in person before the Committee on October 30, 2006 at 8:15 A.M. in Room 301-B, of City Hall, as required by the Summons, the Committee will proceed to consider the allegations of the Complaint, which allegations shall

be taken as true. If the Committee determines that the allegations are sufficient, the law requires that the license shall be revoked or suspended.

Dated as of the 18th day of October, 2006.

JAMES N. WITKOWIAK
ALDERMAN JAMES N. WITKOWIAK
CHAIRMAN LICENSES COMMITTEE

Ronald D. Leonhardt
RONALD D. LEONHARDT
CITY CLERK

Summons, copy of the Complaint, Chapter 125
of the Wisconsin Statutes and Section 90-12
of the Milwaukee Code of Ordinances served as follows:

On: Monday
At: 4420A W Medford
Date: 10-23-06
Time: 11:00
Served by: *J. D. Ulsch*

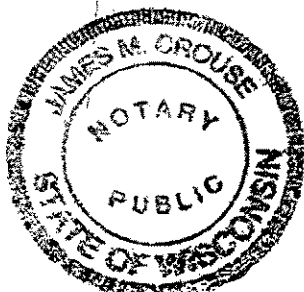
STATE OF WISCONSIN)
)
MILWAUKEE COUNTY)

COMES NOW *Sgt. Chester Ulsch*, being first duly sworn and upon his oath, who deposes and says that he is *City of Milwaukee*, and that he did, on the *23rd* day of October, 2006, serve a true and correct copy of this Summons, the attached Complaint, Wis. Stat. § 125 and Section 90-12 of the Milwaukee Code of Ordinances upon *Kent Parker* at *4420A W Medford*.

J. D. Ulsch

Subscribed and sworn to before me
this *23* day of October, 2006.

James M. Drouse
Notary Public, State of Wisconsin
My Commission: *02-14-2010*



**CITY OF MILWAUKEE
 OFFICE OF THE CITY ATTORNEY
 200 EAST WELLS STREET, ROOM 800
 MILWAUKEE, WISCONSIN 53202
 Telephone No. (414) 286-2601
 Fax No. (414) 286-8550**

FAX COVER SHEET

PLEASE DELIVER THE FOLLOWING PAGES TO:

Jinda Elmer

THESE PAGES ARE BEING TRANSMITTED FROM:

Willie Taylor

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 3

DATE: 10/24/06

TIME: _____

COMMENTS:

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT:

FAX OPERATOR: _____
PHONE NUMBER: _____

CONFIDENTIAL TRANSMISSION

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