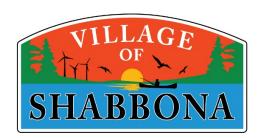
License # Date



APPLICATION FOR CLASS E NON-PROFIT LIQUOR LICENSE FOR SPECIAL EVENT

-vant Nama					
Event Name Event Locati	: on:				
	:			•	
Event Start Time:					
Non-Profit C	Organization requesting	glicense:			
Applicant In	formation:				
Name:		Phone:	E-mail:		
Home Addre	ess:				
Hawa you ha	d any other events app	proved within the Is	est twelve months? V	rec	NO
•	any officer or director				
,	•	, , , , , , , , , , , , , , , , , , , ,	·	'ES	NO
•	any officer or director	, -	·	_	_
· ·lave you or	any officer or director	, -	۲ n ever had an applica	_	_
Have you or suspended of the event as additionarequired. If	any officer or director	of your organization of your organization or operty, a certificated iliquor liability co	Yon ever had an applica Yon te of insurance namin Verage in the amount	ation for a 'ES ng the Vill of \$1,000	NO age of Shabbo 0,000 each is
Have you or suspended of the event as additionarequired. If	any officer or director or revoked? will be held on village p I insured on general an the event is not on villa	of your organization of your organization or your organization or your organization or you or	n ever had an applica Y te of insurance namin verage in the amount tificate of liquor liabil	ation for a 'ES ng the Vill of \$1,000 ity and let	liquor license NO age of Shabbo 0,000 each is ter of permiss

Class E Liquor License Approved on ____

AFFIDAVIT

STATE OF ILLINOIS)	
) SS	
COUNTY OF DEKALB)	
I (we) swear (or affirm) that I (we) will not violate any the laws of the State of Illinois or the laws of the Unite of business described herein and that the statements correct to the best of my knowledge and belief.	ed States of America, in the conduct of the place
Applicant Signature:	Date:
Subscribed and sworn to before me this day of	
Notary Public	