

	24-HOUF	R/DAILY ALCOHOLIC BEVERAGE SALES PERMIT
Applicant:		Omsai Hospitality, LLC
	ade Name (DBA):	Red Lion Hotel & Conference Center
Address:	· · · —	4 W Fox Farm Rd, Cheyenne WY 82007
	307-631-5461	Email Address: jennifer.walker@redlion.com
		E OF PERMIT (CHOOSE ONLY ONE)
	EVERAGE (a)/W.S. 12-2-201(b))	CATERING (WS 12-4-502(b)) CATERING (WS 12-2-203(g)(ii))
	EVERAGE FOR MICRO (WS 12-4-415(e))	(WS 12-4-414-(g))
Pe	ermit Date(s): <u></u>	1 37 1 24 through 9 1 37 1 24
#	Day(s) at <b>\$50</b> /D	ay Total Permit Fee: \$ 50.00 (non-refundable
Event Name:	:	Dancing with the Stars
Event Locati	ion:	Archer Complex, 3801 Archer Parkway
		on, I affirm by checking this box that I have secured written approval of the on prior to filing this permit application. (w.s. 12-4-502(d))
By filing this a requirements of Under penalty of	application, the applicant f all applicable state and l	
By filing this a requirements of Under penalty of	application, the applicant f all applicable state and l	on prior to filing this permit application. (W.S. 12-4-502(d)) and their representatives agree to sell alcoholic beverages and operate under local laws and rules, and submit any required sales tax and reports.
By filing this a requirements of	application, the applicant f all applicable state and l of perjury and the possibl	on prior to filing this permit application. (w.s. 12-4-502(d)) a and their representatives agree to sell alcoholic beverages and operate und local laws and rules, and submit any required sales tax and reports. The revocation or cancellation of the permit, I swear the above stated facts are true finite Name Date
By filing this a requirements of Under penalty of and accurate. This permit au designated abo	application, the applicant f all applicable state and l of perjury and the possibl <u>Walkk</u> Applicant Signature <u>24-HOUR/D</u> Ithorizes the applicant a	and their representatives agree to sell alcoholic beverages and operate under local laws and rules, and submit any required sales tax and reports. The revocation or cancellation of the permit, I swear the above stated facts are true 
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	TAMMY L. DEISCH LARAMIE COUNTY Treasurer MISCELLANEOUS RECEIPT		
	*** ORIGINAL RECEIPT ***		
Misc Receipt Nbr: 93669	Tra	ins Date:	09/18/2024
<b>Received from/Description:</b> WALKER, JENNIFER	<b>On Account Of:</b> WALKER, JENI 204 W FOX FAI CK# 1257	NIFER	
Entered by: micheller	Batch: 20240918-000067	Amount	t: 50.00

Payment Type	Doc#	Description	Amount
CHECK	1257	WALKER, JENNIFER	50.00
		тот	AL: 50.00