LARAMIE COUNTY APPLICATION: 24-HOUR CATERING/MALT BEVERAGE PERMIT
APPLICANT: The Arc of Baramie County
ADDRESS: POBOX 1812 Chayeone, Wy 82003
PHONE: 307-1032-1209 EMAIL: arcofic@gmail.com
PERMIT REQUESTED: ☐ CATERING (\$50/DAY) ☐ MALT BEVERAGE (\$50/DAY)
PERMIT FROM: 09 / 21 / 2019 THROUGH: 09 / 21 / 2019
#DAYS AT \$50 /DAY TOTAL FEE ATTACHED: \$_50.00
PURPOSE OF PERMIT: Arc of Laramie County Oxtoberfest fundraiser
PREMISES FOR WHICH PERMIT IS REQUESTED (PHYSICAL ADDRESS):
3967 Archer Complex - Buildings m&K
THE UNDERSIGNED, AS APPLICANT OR AGENT, HEREBY AGREES TO COMPLY WITH REGULATIONS OF LARAMIE COUNTY, AND THE PROVISIONS OF WYOMING STATUTES, TITLE 12, ALCOHOLIC BEVERAGES, AS APPLICABLE TO THE REQUESTED PERMIT
If licensed within another jurisdiction, I affirm by checking this box that I have secured written approval of the licensing authority of that jurisdiction prior to filing this permit application (W.S. 12-4-502(d)).
/S/ APPLICANT/AGENT Charty Henning DATE 06 120 12019
Office Use Only
24-HOUR CATERING/MALT BEVERAGE PERMIT LARAMIE COUNTY, WYOMING, PURSUANT TO W.S. 12-4-502, HEREBY ISSUES CATERING/MALT BEVERAGE PERMIT(S) TO APPLICANT FOR THE APPROVED TWENTY-FOUR (24)-HOUR PERIOD(S) FROM /
APPROVED AND ISSUED THIS DAY OF 20
BOARD OF LARAMIE COUNTY COMMISSIONERS
CHAIRMAN DATE
ATTEST://
DEBRA K LEE, LARAMIE COUNTY CLERK DATE DATE

 $\frac{\text{This Permit must be conspicuously posted on the premises for which issued.}}{020\text{-}109(R7/19)}$



TRUDY L. EISELE LARAMIE COUNTY Treasurer

MISCELLANEOUS RECEIPT

*** ORIGINAL RECEIPT ***

Misc Receipt Nbr: 569

56949

Trans Date:

06/21/2019

Received from/Description: THE ARC OF LARAMIE COUNTY On Account Of:

MALT BEVERAGE PERMIT-9/21/2019

CK#1609

Entered by: brandyc

Batch: 20190621-000339

Amount:

50.00

Payment Ty	pe Doc#	<u>Description</u>	Amount
CHECK	1609	THE ARC OF LARAMIE COUNTY	50.00
			TOTAL: 50.00