AGENDA
HAMPShIRE LIQuOR COMMISSION MEETING
December 7, 2017
6:30 P.M.

1. Call to Order.

2. Establish Quorum.


5. Adjournment.
HAMPShIRE LIQUOR COMMISSION

November 16, 2017

Village President Jeff Magnussen, Chairman, called the meeting to order at 6:00 p.m.
Present: Trustee Klein, Kraus

Also present: Tom Minnihan

Trustee Kraus moved, to approve the minutes for August 10, 2017.

Seconded by Klein
Motion carried by voice vote
Ayes: All
Nays: None
Absent: None

Mr. Minnihan’s mentioned he will have video gaming, about seven T.V’s and will not have a kitchen but something small to cook hot dogs and burgers, plus a small clay oven for pizza. Parking shouldn’t be a problem the owner will be marking more spaces by the curve to park.

Trustee Kraus moved, to approve a Class A-1 liquor license to Minnihan’s Sports Bar at 1000 State Street.

Seconded by Trustee Klein
Motion carried by voice vote
Ayes: Klein, Kraus, Magnussen
Nays: None
Absent: None

The Village Board will need to create an A-1 Liquor License at the December 7, 2017 meeting at 7 p.m.

Trustee Klein moved, to table number 5 on the agenda.

Seconded by Trustee Kraus
Motion carried by voice vote
Ayes: All
Nays: None
Absent: None

Village President Magnussen would like the liquor commission to think about pro-rating liquor licenses and will discuss this at a later time.

Next Liquor meeting will be held on December 7, 2017 at 6:30 to review the yearly applications for 2018.

Adjournment
Trustee Klein moved, to adjourn the Liquor Commission meeting at 6:22 p.m.

Seconded by Trustee Kraus
Motion carried by voice vote
Ayes: All
Nays: None
Absent: None

Jeff Magnusson, Village President
APPLICATION FOR ALCOHOLIC LIQUOR

DATE: 11/27/17

NAME OF BUSINESS: Corner Spot Inc The Kave SALES TAX ID: 3907-6105

NAME OF APPLICANT: David Ruth

ADDRESS OF BUSINESS: 123 Washington Ave.

BUSINESS PHONE NO.: 847-287-5651

MAILING ADDRESS: 320 S. State Street Hampshire, IL 60140

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

   - Class A-1 - $1,500.00
   - Class A-2 - $1,250.00
   - Class B-1 - $1,500.00
   - Class B-2 - $1,500.00
   - Class C-1 - $1,500.00
   - Class C-2 - $1,500.00
   - Class C-3 - $1,750.00
   - Class C-4 - $1,750.00
   - Class D - $1,750.00
   - Class E - $1,750.00
   - Class F - $1,500.00
   - Class G - $75.00
   - Class H - $500.00
   - Class I - $500.00

2. License Period:

   Commencing on January 1, 2018 and ending December 31, 2018 or
   Commencing on _______________ and ending December 31, ____________

3. Type of Business Entity (check one):

   - Individual
   - Corporation
   - Partnership
   - Other (specify)
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

   NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: David Ruth

BIRTHDAY: 3/30/82

HOME ADDRESS: 320 Jake Ln, Hampshire

DRIVERS LICENSE#: ___________________________ HOME PHONE#: 847-287-5651

BUSINESS STATUS: President

PERCENTAGE OF STOCK HELD: 100%

Name: ___________________________

BIRTHDAY: ___________________________

HOME ADDRESS: ___________________________

DRIVERS LICENSE#: ___________________________ HOME PHONE#: ___________________________

BUSINESS STATUS: ___________________________

PERCENTAGE OF STOCK HELD: ___________________________

(If additional space is required, please attach a separate sheet of paper)

5. Is the applicant a citizen of the United States? __YES

   If naturalized, state date and place of naturalization: ___________________________

   If an Illinois corporation, state date of corporation: 2006 March

   If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act: ___________________________

6. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. Tavern

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. 123 Washington Ave

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. __YES

   If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued: ___________________________
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license? \[YES\]

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith? \[YES\]

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated? \[YES\]

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission? \[YES\]

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.

SIGNATURE OF APPLICANT (S)

CORPORATION SIGNATURES

Pres. \\
Sec. \\

INDIVIDUAL OR PARTNERSHIP SIGNATURES

STATE OF \[Illinois\]  
County of \[Kane\]  

The undersigned swears that all statements are true and correct.

CORPORATE SEAL

Subscribed and sworn to before me this 21st day of \[Nov\], 2017.

Notary Public
Western Surety Company
LICENSE AND PERMIT BOND

KNOW ALL PERSONS BY THESE PRESENTS:

That we, Corner Spot USA The Bar, of Chicago, Illinois as Principal, and WESTERN SURETY COMPANY, a corporation duly licensed to do surety business in the State of Illinois, as Surety, are held and firmly bound unto the

State of Illinois

in the penal sum of One Thousand Five Hundred and $00/00 DOLLARS ($1,500.00), lawful money of the United States, to be paid to the Obligee, for which payment well and truly to be made, we bind ourselves and our legal representatives, firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH, That whereas, the Principal has been licensed, hereby

by the Obligee.

NOW THEREFORE, if the Principal shall faithfully perform the duties and in all things comply with the laws and ordinances, including all amendments thereto, pertaining to the license or permit applied for, then this obligation to be void, otherwise to remain in full force and effect until June 27th, 2017, unless renewed by Continuation Certificate.

This bond may be terminated at any time by the Surety upon sending notice in writing, by First Class U.S. Mail, to the Obligee and to the Principal at the address last known to the Surety, and at the expiration of thirty (30) days from the mailing of said notice, this bond shall ipso facto terminate and the Surety shall thereupon be relieved from any liability for any acts or omissions of the Principal subsequent to said date. Regardless of the number of years this bond shall continue in force, the number of claims made against this bond, and the number of premiums which shall be payable or paid, the Surety's total limit of liability shall not be cumulative from year to year or period to period, and in no event shall the Surety's total liability for all claims exceed the amount set forth above. Any revision of the bond amount shall not be cumulative.

Dated this 28th day of June, 2017

Corner Spot USA The Bar
Principle

Western Surety Company
By

Principal
Paul T. Brindisi, Vice President
STATE OF SOUTH DAKOTA, ss
COUNTY OF MINNEHAHA

On the 26th day of June, 2017, before me, the undersigned officer, personally appeared Paul E. Buhl, who acknowledged himself to be the aforesaid officer of WESTERN SURETY COMPANY, a corporation, and that he as such officer, being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation by himself as such officer.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

M. Bent
NOTARY PUBLIC
SOUTH DAKOTA

My Commission expires March 2, 2020

ACKNOWLEDGMENT OF PRINCIPAL
(Individual or Partners)

On the____, day of____, 20__, before me personally appeared

known to me to be the individual____ described in and who executed the foregoing instrument and acknowledged to me that____ executed the same.

My commission expires____

ACKNOWLEDGMENT OF PRINCIPAL
(Corporate Officer)

On the____, day of____, 20__, before me personally appeared

who acknowledged himself/herself to be the____, a corporation, and that he/she as such officer being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing the name of the corporation by himself/herself as such officer.

My commission expires____

Western Surety Company
CNA Surety
PO Box 53789
St Louis, MO 63185-7789

Principal Information:
Carter Spitz, dba The Kave
120 Lake Lane
Hampshire, IL 60140
Agency Code: 12-12600

General Insurance Services
2233 Classic Court
Lake Barrington, IL 60010

YOU CAN PAY ONLINE BY VISITING ONLINEPAY.CNASURETY.COM

Transaction Description:

Transaction Effective Date: 06/27/2017

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Written By: Western Surety Company
Description: Liquor
Obligee: Village of Hampshire

Effective Date: 06/27/2017
Expiration Date: 06/27/2018
Current Penalty: 51,500.00
Renewal Method: CNAS Surety INVOICE

Net Amount Due: 332.50

Change Detail:

Agent: You may remove stub below to use as a billing/credit invoice

CNA Surety

INVOICE

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PRINCIPAL: Carter Spitz, dba The Kave
120 Lake Lane, Hampshire, IL 60140

RISK STATE: IL
DESCRIPTION: Liquor

AGENCY CODE: 12-12600

OBLIGEE: Village of Hampshire

Your agent: General Insurance Services
2233 Classic Court
Lake Barrington, IL 60010
Western Surety Company

0003001 012186000000006272017 00601006325656100 0000000325007
## Certificate of Liability Insurance

**Producer**
GIS Cornerstone, LLC  
2233 Classic Ct  
Lake Barrington, IL 60010

**Insured**
Corner Spot, Inc. dba The Kave  
David Ruth  
320 Jako Lane  
Hampshire, IL 60140

**Coverages**
- **Commercial General Liability**
  - Policy Number: BP27900  
  - Limits: $1,000,000  
  - Issued to: The Kave

- **Automobile Liability**
  - Limits: $2,000,000  
  - Issued to: The Kave

- **Workers' Compensation and Employers' Liability**
  - Limits: $1,000,000  
  - Issued to: The Kave

**Description of Operations and Locations**
- The operations at 123 Washington Ave., Hampshire, IL include: Bodily Injury, Property Damage & Injury to Means of Support.

**Certificate Holder**
Village of Hampshire  
PO Box 451  
Hampshire, IL 60140

**Cancellation**
- Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.

**Authorized Representative**
RL Valence

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**ACORD 25 (2015/03)**

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APPLICATION FOR ALCOHOLIC LIQUOR

DATE: 11/20/2017

NAME OF BUSINESS: RED OX RESTAURANT & BAR

SALES TAX ID: 3413-0667

NAME OF APPLICANT: MARIA B. VICKI, INC., DBA RED OX RESTAURANT & BAR

ADDRESS OF BUSINESS: 129 E. OAK KNOLL, HAMPShIRE IL 60140

BUSINESS PHONE NO.: (847) 683-2300

MAILING ADDRESS: 129 E. OAK KNOLL, HAMPShIRE IL 60140

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

   - Class A-1 - $1,500.00
   - Class A-2 - $1,250.00
   - Class B-1 - $1,500.00
   - Class B-2 - $1,500.00
   - Class C-1 - $1,500.00
   - Class C-2 - $1,500.00
   - Class C-3 - $1,750.00
   - Class C-4 - $1,500.00
   - Class D - $1,750.00
   - Class E - $1,750.00
   - Class F - $1,500.00
   - Class G - $75.00
   - Class H - $500.00
   - Class I - $500.00

2. License Period:

   Commencing on January 1, 2018 and ending December 31, 2018 or Commencing on and ending December 31, __________

3. Type of Business Entity (check one):

   - Individual
   - Corporation
   - Partnership
   - Other (specify)
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: DIMITRA PANTIELIS
BIRTHDAY: 12 - 10 - 1958
HOME ADDRESS: 1410 PHEASANT TRAIL HAMPShIRE, IL 60140
DRIVERS LICENSE# P534 - 1745 895 HOME PHONE# 847-683-7041
BUSINESS STATUS: OWNER
PERCENTAGE OF STOCK HELD: 100%

Name: ____________________________
BIRTHDAY: _________________________
HOME ADDRESS: ____________________
DRIVERS LICENSE# __________________ HOME PHONE# __________________
BUSINESS STATUS: __________________
PERCENTAGE OF STOCK HELD: __________________
(If additional space is required, please attach a separate sheet of paper)

5. Is the applicant a citizen of the United States? YES
   If naturalized, state date and place of naturalization: JULY 23rd, 1985 CHICAGO

If an Illinois corporation, state date of corporation: 11/19/2002
If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act.

6. State the character of the applicant’s business, and in case of a corporation, the objects for which it was formed. FULL SERVICE RESTAURANT & LOUNGE

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. 1 STORY BUILDING AT 129 E. OAK KNOLL, HAMPShIRE, IL. FULL SERVICE RESTAURANT AND LOUNGE.

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. YES
   If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued: VILLAGE OF HAMPShIRE, STATE OF ILLINOIS, ATP.
9. Has the applicant ever had any previous liquor license revoked?  NO
   If answer is in the affirmative, state the date and reason for such revocation. 

10. Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?  YES

11. State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.  YES NOVEMBER 2003.
   Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.

12. State the name of the person who will generally be managing the ongoing affairs of this business at these premises.  DIMITRA PANTELIS
   State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof.  YES NOVEMBER 2003.
   Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.

13. Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?  YES

14. If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued?  YES OWN IT.
   If the answer is in the affirmative, attach a copy of said lease to the application.

15. State whether the applicant has ever been convicted of a felony offense under any Federal or State law?  NO

16. State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?  NO.

17. State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more stock?  NO
   If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?  NO.

18. Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?  NO

19. Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?  NO
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license? **YES**

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith? **YES**

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated? **YES**

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission? **YES**

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.

SIGNATURE OF APPLICANT (S)

CORPORATION SIGNATURES

Pres. [Signature]

Sec. [Signature]

INDIVIDUAL OR PARTNERSHIP SIGNATURES

SIGNATURE OF APPLICANT (S)

Pres. [Signature]

Sec. [Signature]

STATE OF [ILLINOIS]

County of [Kane]

The undersigned swears that all statements are true and correct.

CORPORATE SEAL

Subscribed and sworn to before me this ______ day of ______, 20____.

[Signature]

Notary Public

OFFICIAL SEAL

DEBBIE J DONOHUE

NOTARY PUBLIC - STATE OF ILLINOIS

MY COMMISSION EXPIRES 01/13/21
**CERTIFICATE OF LIABILITY INSURANCE**

**DATE ISSUED:** 11/6/2016

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

**PRODUCER**

Linda Lee Enterprises Inc  
DBA: FTS Insurance  
14045 W. Petronella Dr., Ste. 2  
Libertyville, IL 60048

**INSURED**

Maria & Vikki Inc.  
DBA: Red Ox Restaurant & Bar  
129 E Oak Knoll Drive  
Rampshire, IL 60140

**COVERAGES**

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**WORKERS COMPENSATION AND EMPLOYERS LIABILITY**

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**LOCATION:** 129 E Oak Knoll Drive, Hampshire, IL 60140

**CERTIFICATE HOLDER**

(847) 683-4915  
Village of Hampshire  
243 S State Street  
PO Box 457  
Hampshire, IL 60140-0457

**CANCELLATION**

Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.

Authorized Representative

Allen Stueck/NER

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Western Surety Company

CONTINUATION CERTIFICATE

Western Surety Company hereby continues in force Bond No. 14540751 briefly described as "RESTAURANT/LIQUOR VILLAGE OF HAMPShIRE"

for MARIA & VIKKI, INC. DBA RED OX RESTAURANT & BAR, as Principal,
in the sum of $ FIVE THOUSAND AND NO/100 Dollars, for the term beginning November 26, 2017, and ending November 26, 2018, subject to all the covenants and conditions of the original bond referred to above.

This continuation is issued upon the express condition that the liability of Western Surety Company under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed the total sum above written.

Dated this 12 day of October, 2017.

WESTERN SURETY COMPANY

By Paul T. Buda, Vice President

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.
The State of Illinois Liquor License must be FRAMED and displayed on the licensed premises in plain view of the general public.
APPLICATION FOR ALCOHOLIC LIQUOR

DATE: November 10, 2017

NAME OF BUSINESS: ROAD RANGER, L.L.C.  
SALES TAX ID: 26380730

NAME OF APPLICANT: ROAD RANGER, L.L.C.

ADDRESS OF BUSINESS: 19 N 681 US HWY 20, HAMPSHIRE, IL 60140

BUSINESS PHONE NO.: 815-209-9013

MAILING ADDRESS: 4930 EAST STATE STREET, ROCKFORD, IL 61108-2289

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

<table>
<thead>
<tr>
<th>Class A-1 - $1,500.00</th>
<th>Class C-4 - $1,500.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class A-2 - $1,250.00</td>
<td>Class D - $1,750.00</td>
</tr>
<tr>
<td>XXX Class B-1 - $1,500.00</td>
<td>Class E - $1,750.00</td>
</tr>
<tr>
<td>Class B-2 - $1,500.00</td>
<td>Class F - $1,500.00</td>
</tr>
<tr>
<td>Class C-1 - $1,750.00</td>
<td>Class G - $75.00</td>
</tr>
<tr>
<td>Class C-2 - $1,500.00</td>
<td>Class H - $500.00</td>
</tr>
<tr>
<td>Class C-3 - $1,750.00</td>
<td>Class I - $500.00</td>
</tr>
</tbody>
</table>

2. License Period:

   Commencing on January 1, 2018 and ending December 31, 2018 or
   Commencing on ___________ and ending December 31, ___________.

3. Type of Business Entity (check one):

   - [X] Corporation (L.L.C.)
   - [□] Individual
   - [□] Partnership
   - [□] Other (specify)
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: ____________________________________________

BIRTHDAY: ____________________________

HOME ADDRESS: ____________________________________________

DRIVERS LICENSE# ____________________________ HOME PHONE# ____________________________

BUSINESS STATUS: ____________________________________________

PERCENTAGE OF STOCK HELD: ____________________________

Name: ____________________________________________

BIRTHDAY: ____________________________

HOME ADDRESS: ____________________________________________

DRIVERS LICENSE# ____________________________ HOME PHONE# ____________________________

BUSINESS STATUS: ____________________________________________

PERCENTAGE OF STOCK HELD: ____________________________

(If additional space is required, please attach a separate sheet of paper)

5. Is the applicant a citizen of the United States? N/A - L.L.C.

If naturalized, state date and place of naturalization: N/A

If an Illinois corporation, state date of corporation: ORGANIZED JANUARY 24, 1995

If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act: N/A

6. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. SEE ORGANIZATIONAL DOCUMENTS ON FILE WITH THE VILLAGE

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. 19 N 681 US HWY 20 C-STORE WITH MOTOR FUEL SALES at HAMPSTEAD, KANE COUNTY, IL

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. YES

If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued. SEE ATTACHED EXHIBIT A
9. Has the applicant ever had any previous liquor license revoked?  
   NO  
   If answer is in the affirmative, state the date and reason for such revocation.  
   N/A

10. Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?  
   YES

11. State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.  
   YES - VARIOUS DATES (SHOULD BE ON FILE WITH THE VILLAGE)  
   Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.

12. State the name of the person who will generally be managing the ongoing affairs of this business at these premises.  
   JEFFREY THOMAS RAPP  
   State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof.  
   JULY 2016  
   Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.

13. Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?  
   YES - COPIES ATTACHED HERETO AS A COURTESY

14. If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued?  
   YES  
   If the answer is in the affirmative, attach a copy of said lease to the application.

   MEMORANDUM OF LEASE PREVIOUSLY PROVIDED TO VILLAGE

15. State whether the applicant has ever been convicted of a felony offense under any Federal or State law?  
   IT HAS NOT

16. State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?  
   IT HAS NOT

17. State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?  
   IT HAS NOT  
   If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?  
   N/A

18. Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?  
   NO

19. Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?  
   NO
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license? YES

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith? YES

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated? YES

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission? N/A

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.

SIGNATURE OF APPLICANT (S)

CORPORATION SIGNATURES

Pres. D.A.M. SAPORTA, MANAGER

Sec. STEVEN E. BROOKS - SECRETARY

INDIVIDUAL OR PARTNERSHIP SIGNATURES

STATE OF ILLINOIS )
COUNTY OF WINNEBAGO ) SS

The undersigned swears that all statements are true and correct.

CORPORATE SEAL

Subscribed and sworn to before me this 10TH day of NOVEMBER, 2017.

[Signature]

Notary Public
Western Surety Company

CONTINUATION CERTIFICATE

Western Surety Company hereby continues in force Bond No. 69614427 briefly described as LIQUOR VILLAGE OF HAMPShIRE for ROAD RANGER, L.L.C., in the sum of $ ONE THOUSAND FIVE HUNDRED AND NO/100 Dollars, for the term beginning December 31, 2017, and ending December 31, 2018, subject to all the covenants and conditions of the original bond referred to above.

This continuation is issued upon the express condition that the liability of Western Surety Company under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed the total sum above written.

Dated this 17 day of November, 2017.

WESTERN SURETY COMPANY

By

Paul T. Brunat, Vice President

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.
CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFESSION NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVE AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUE INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Commercial Lines - 314-875-2750
Wells Fargo Insurance Services USA, Inc.
1 N Jefferson, Bldg C, 3rd Floor
St. Louis, MO 63103

INSURED
Road Ranger, LLC, Ranger Holdings, LLC and its subsidiaries
4930 East State Street
Rockford, IL 61108

CERTIFICATE HOLDER
CANCELLATION

Village of Hampshire
234 S State Street
Hampshire, IL 60140

AUTHORIZED REPRESENTATIVE

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APPLICATION FOR ALCOHOLIC LIQUOR

DATE: 11/16/2017

NAME OF BUSINESS: Arrowhead CITGO

SALES TAX ID: 4115-5157

NAME OF APPLICANT: Bhangoo Inc.

ADDRESS OF BUSINESS: 19H 479 US Hwy 20, Hampshire, IL

BUSINESS PHONE NO.: (847) 453-3449

MAILING ADDRESS: ______________________________________

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter IIIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

   Class A-1 - $1,500.00
   Class A-2 - $1,250.00
   Class B-1 - $1,250.00
   Class B-2 - $1,500.00
   Class C-1 - $1,500.00
   Class C-2 - $1,500.00
   Class C-3 - $1,750.00
   Class C-4 - $1,500.00
   Class D - $1,750.00
   Class E - $1,750.00
   Class F - $1,500.00
   Class G - $ 75.00
   Class H - $ 500.00
   Class I - $ 500.00

2. License Period:

   Commencing on January 1, 2018 and ending December 31, 2018 or
   Commencing on _______________ and ending December 31, __________

3. Type of Business Entity (check one):

   □ Individual
   □ Partnership
   □ Corporation
   □ Other (specify)
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: NAVDEEP SINGH BHANGOO
BIRTHDAY: 04-04-1980
HOME ADDRESS: 1522 MONROE STREET, LAKE IN THE HILLS, IL
DRIVERS LICENSE# B52063780097 HOME PHONE#
BUSINESS STATUS: PRESIDENT
PERCENTAGE OF STOCK HELD: 100%

Name:
BIRTHDAY:
HOME ADDRESS:
DRIVERS LICENSE# HOME PHONE#
BUSINESS STATUS:
PERCENTAGE OF STOCK HELD:
(If additional space is required, please attach a separate sheet of paper)

5. Is the applicant a citizen of the United States? YES.
   If naturalized, state date and place of naturalization:

   If an Illinois corporation, state date of corporation: JUNE 2013
   If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act.

6. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. TRUCK STOP

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. ROUTE 20 EXIT 1-90

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality.
   If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued.
9. Has the applicant ever had any previous liquor license revoked? [No]
   If answer is in the affirmative, state the date and reason for such revocation.

10. Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business? [Yes]

11. State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof. [Yes]

   Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.

12. State the name of the person who will generally be managing the ongoing affairs of this business at these premises. [Navdeep Singh Bhangoo]

   State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof. [Yes]

   Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.

13. Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village? [Yes]

14. If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? [Yes]

   If the answer is in the affirmative, attach a copy of said lease to the application.

15. State whether the applicant has ever been convicted of a felony offense under any Federal or State law? [No]

16. State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor? [No]

17. State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock? [Yes]

   If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?

18. Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station? [No]

19. Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors? [No]
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license? \[\text{YES}\]

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith? \[\text{YES}\]

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated? \[\text{YES}\]

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission? \[\text{YES}\]

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.

SIGNATURE OF APPLICANT (S)

CORPORATION SIGNATURES

Pres. \[\text{Signature}\]

Sec. \[\text{Signature}\]

INDIVIDUAL OR PARTNERSHIP SIGNATURES

STATE OF \[\text{Signature}\] )

County of \[\text{Signature}\] ) SS

The undersigned swears that all statements are true and correct.

CHRISTOPHER W SPEICHER
Official Seal
Notary Public - State of Illinois
My Commission Expires Sep 2, 2020

Subscribed and sworn to before me this \[\text{day of November, 2017}\].

Notary Public
UTICA MUTUAL INSURANCE COMPANY
NEW HARTFORD, NEW YORK
LICENSE AND PERMIT BOND

BOND NO: SU4617891

KNOW ALL MEN BY THESE PRESENTS:

that we, Bhangoo

19 N 479 US HWY

Hampshire, IL 60140

as Principal, and UTICA MUTUAL INSURANCE
COMPANY, 180 Genesee Street, New Hartford, New York 13413, a corporation organized under the
laws of the State of New York and licensed to transact business in the State of Illinois

as Surety, are held and firmly bound unto Village Of Hampshire

as Obligee, in the sum of One Thousand Five Hundred Dollars

($1,500) good and lawful money of the United States of America, for which payment well and
truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly
and severally, firmly by these presents.

WHEREAS, the said Principal has applied to said Obligee for a license or permit to do business as a
Business license to sell Liquor in the State

NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, that, if the said Principal shall
faithfully observe and honestly comply with the provisions of all Laws or Ordinances of the Obligee
regulating the business for which license or permit is issued, then this obligation shall be void; otherwise
to be and remain in full force and effect. This bond shall remain in force for the period beginning on the

9 day of August 2017 and ending on the 9 day of August 2018

This Bond may be cancelled by the Surety, thirty (30) days after written notice of cancellation has been
sent to the Obligee. This bond is executed upon the express condition that the Surety’s liability under
said Bond, and any and all renewals thereof, shall not be cumulative from year to year.

Signed, sealed and dated this 1 day of June 2017

Principal: Bhangoo

By: ____________________________ (Attorney-in-Fact)

UTICA MUTUAL INSURANCE COMPANY

By: ____________________________

Asif Hamidi
POWER OF ATTORNEY

Know all men by these presents, the UTICA MUTUAL INSURANCE COMPANY, as a New York Corporation, having its principal office in the Town of New Hartford, County of Oneida, State of New York, does hereby make, constitute and appoint

As its true and lawful Attorney(s) in fact in their respective capacity if more than one is named above to make, execute, sign, seal and delivery for and on its behalf as surety and as its act and deed without power of ratification and all powers and undertakings and other writings obligatory in the nature thereof (except bonds guaranteeing the payment of principal and interest of notes, mortgage bonds and mortgages) provided the amount of no one bond or undertaking exceeds One Thousand Four Hundred Dollars ($1,400).

The execution of such bonds and undertakings shall be as binding upon said UTICA MUTUAL INSURANCE COMPANY as fully and to all intents and purposes as if the same had been duly executed and acknowledged by its regularly elected officers and its Home Office in New Hartford, New York.

This Power of Attorney is granted under and by authority of the following resolution adopted by the Directors of the UTICA MUTUAL INSURANCE COMPANY on the 27th day of November, 1981.

"Resolved, that the President or any Vice-President, in conjunction with the Secretary or any Assistant Secretary, be and they are hereby authorized and empowered to appoint Attorneys in fact of the Company, in its name and as its agents, to execute and acknowledge for and on its behalf as surety and all bonds, contracts of indemnity and all other writings obligatory in the nature thereof, with power to attach therein the said of the Company. Any such writings so executed by such Attorney in fact shall be binding upon the Company as if they had been duly acknowledged by the regularly elected Officers of the Corporation in their own proper persons.

"Now therefore, the signatures of such officers and the seal of the Corporation may be affixed to any such Power of Attorney by a facsimile, and any such Power of Attorney bearing such facsimile signatures or seal shall be valid and binding upon the Company."

In Witness Whereof, the UTICA MUTUAL INSURANCE COMPANY has caused these presents to be signed by its Authorized Officers, this 24th day of February, 1981.

[Signature]
President

[Signature]
Secretary

STATE OF NEW YORK
COUNTY OF ONEIDA

On this 24th day of February, 2016, before me, a Notary Public in and for the State of New York, personally came RICHARD P. CREFOCO and LOUISA S. HUFFMAN to me known, who acknowledged execution of the foregoing instrument and, being by me duly sworn, do declare and say, that they are President and Secretary respectively of UTICA MUTUAL INSURANCE COMPANY, and that the seal affixed to said instrument is the corporate and of UTICA MUTUAL INSURANCE COMPANY, and that the said corporate seal is affixed and that signatures subscribed to said instrument by authority and under the Board of Directors of said Corporation.

In Testimony Whereof, I have hereunto set my hand at New Hartford, New York, this day and year last above written.

[Signature]
Notary Public

STATE OF NEW YORK
COUNTY OF ONEIDA

I, LOUISA S. HUFFMAN, Secretary of the Utica Mutual Insurance Company, do hereby certify that the foregoing Power of Attorney executed by said Utica Mutual Insurance Company and the above-quoted Resolution of the Board of Directors adopted November 27, 1981 are true in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the Seal of the said Corporation at New Hartford, New York, this day of , 2016.

[Signature]
Secretary
UTICA MUTUAL INSURANCE COMPANY
FINANCIAL STATEMENT AS OF DECEMBER 31, 2016

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>LIABILITIES AND SURPLUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. Governmental Direct Guaranteed Bonds</td>
<td>Reserve for All Losses</td>
</tr>
<tr>
<td>$ 40,377,884</td>
<td>$ 846,401,254</td>
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<td>All Other Bonds</td>
<td>Unearned Premiums</td>
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<td>1,436,585,119</td>
<td>361,537,442</td>
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<td>Stocks</td>
<td>Reserve for Claim Expenses</td>
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<tr>
<td>488,506,456</td>
<td>267,825,545</td>
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<td>Mortgages</td>
<td>Liabilities</td>
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<tr>
<td>4,284,379</td>
<td>4,782,075</td>
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<tr>
<td>Cash and Short-Term Investments</td>
<td>Tax &amp; Accrued</td>
</tr>
<tr>
<td>31,872,679</td>
<td>7,227,496</td>
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<tr>
<td>Equities &amp; Deposits in Pools and Associations</td>
<td>Federal Income Tax</td>
</tr>
<tr>
<td>4,224,302</td>
<td>3,367,319</td>
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<tr>
<td>Premiums in Course of Collection</td>
<td>Amounts Withheld or Account of Others</td>
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<tr>
<td>220,736,990</td>
<td>11,138,480</td>
</tr>
<tr>
<td>Interest Due and Accrued</td>
<td>Provisions for Reinsurance</td>
</tr>
<tr>
<td>17,818,270</td>
<td>5,716,321</td>
</tr>
<tr>
<td>Other Admitted Assets</td>
<td>Miscellaneous Accounts Payable</td>
</tr>
<tr>
<td>153,860,570</td>
<td>79,136,353</td>
</tr>
<tr>
<td>Total Admitted Assets</td>
<td>Total Liabilities</td>
</tr>
<tr>
<td>$ 2,982,250,200</td>
<td>$1,516,165,500</td>
</tr>
</tbody>
</table>

Surplus Funds:

| Dividend Reserve                           | $ 640,864,867 |
| General Voluntary Reserve                  | 1,500,000     |
| Special Contingent Surplus                 | 1,760,000     |
| Dividends In Contingent Surplus            | 896,481,581   |
| Total                                      | $ 646,964,867 |

STATE OF NEW YORK
COUNTY OF ONEIDA

Richard P. Creedon, President & CEO of the UTICA MUTUAL INSURANCE COMPANY, New Hartford, New York, being duly sworn, says that he is the above described officer of said Corporation, and that on the 31st day of December, 2016, all of the assets shown above were the absolute property of the said Corporation, free and clear from all liens or claims thereon except as above stated, and that the foregoing statement is a full and true exhibit of all assets and liabilities of the said Corporation at the close of business December 31, 2016, according to the best of his knowledge, information and belief.

Subscribed and sworn to before me the 20th day of March, 2017.

President & CEO

Kathleen M. O'Sullivan
Notary Public in the State of New York
Appointed in Oneida County
My Commission Expires July 15, 2018

8-B-50. Filed 03.2017
FOUNDERS INSURANCE COMPANY
A MULTIPLE LINE STOCK COMPANY
1111 EAST TOUHY AVENUE, SUITE 300, DES PLAINES, IL 60018
(800) 972-8778 / Fax (847) 795-0080

Liquor Liability
Renewal Ext Dec

DIRECT BILL
EFFECTIVE 08/01/17

POLICY NUMBER  FROM POLICY PERIOD TO  EFFECTIVE DATE
ELIL100675  08/01/17  08/01/18  12:01 AM STANDARD TIME  2185

NAMED INSURED AND ADDRESS  PRODUCER
BHANGOO INC.
DBA: ARROWHEAD CITGO
19 N 479 US HIGHWAY 20
HAMPSTHIRE  IL 60140

RELIANCE INSURANCE AGENCY
12 W. NAPERVILLE ROAD
WESTMONT  IL 60559
(630) 852-9900

THE NAMED INSURED IS BHANGOO INC.

COVERAGES
THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS/POLICIES FOR WHICH A
PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

COVERED PART/POLICY ATTACHED  PREMIUM
COMMERCIAL LIQUOR LIABILITY COVERAGE  $535.00

TOTAL ADVANCE PREMIUM  $535.00

FORMS THAT APPLY TO APPLICABLE COVERAGE PARTS
ENDORSEMENT NO  EDITION DATE DESCRIPTION
IL-CSL  02-09  Illinois Liquor Liability Coverage Part

ADDITIONAL INSURED(S)

AI#  CITY  NAME AND ADDRESS
1  VILLAGE OF HAMPSTHIRE  234 S STATE STREET  HAMPSTHIRE  IL 60140

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THE
COVERAGE PARTS/POLICIES ATTACHED, WE AGREE WITH YOU TO PROVIDE THE INSURANCE
DESCRIBED THEREIN.

Special Interest  www.foundersinsurance.com  DATE 07/31/17
Liquor Liability Renewal Ext Dec

DIRECT BILL

EFFECTIVE 08/01/17

<table>
<thead>
<tr>
<th>POLICY NUMBER</th>
<th>FROM POLICY PERIOD</th>
<th>TO POLICY PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
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<td>08/01/17</td>
<td>08/01/18</td>
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NAMED INSURED AND ADDRESS

BHANGOO INC.
DBA: ARROWHEAD CITGO
19 N 479 US HIGHWAY 20
HAMPShIRE IL 60140

PRODUCER

RELIANCE INSURANCE AGENCY
12 W. NAPERVILLE ROAD
WESTMONT IL 60559
(630) 852-9900

LOCATION ADDRESS(ES)

LOCATION 01
19 N 479 US HIGHWAY 20
HAMPShIRE IL 60140

COVERAGES

DESCRIPTION: Liquor/Convenience/Grocery - Stores

<table>
<thead>
<tr>
<th>LOC</th>
<th>ITEM</th>
<th>TERR</th>
<th>CLASS</th>
<th>BASIS</th>
<th>TYPE</th>
<th>DBD</th>
<th>AMT</th>
<th>EXPOSURE</th>
<th>PREMIUM</th>
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COVERAGE

PER PERSON OCCURRENCE AGGREGATE
Combined Single Limit 1,000,000 1,000,000

ADDITIONAL FORMS AND ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART ONLY

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<th>DATE</th>
<th>LOC</th>
<th>ITEM</th>
<th>LIMIT</th>
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<td>CG 21 87</td>
<td>01-15</td>
<td>Cond. Exclusion Terrorism</td>
<td>1 2</td>
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<td>07-04</td>
<td>Addl Insd Designate Pers</td>
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TOTAL ADVANCE PREMIUM .............. $535.00

======

Special Interest
APPLICATION FOR ALCOHOLIC LIQUOR

DATE: 11-07-17

NAME OF BUSINESS: CASEY'S GENERAL STORE #3066

NAME OF APPLICANT: CASEY'S RETAIL COMPANY

ADDRESS OF BUSINESS: 820 WARNER, PO BOX 443, HAMPSHIRE, IL 60140

BUSINESS PHONE NO.: (847)-683-9110

MAILING ADDRESS: CASEY'S RETAIL COMPANY, PO BOX 3001, ANKENY, IA 50021-8045

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

   _______ Class A-1 - $1,500.00
   _______ Class A-2 - $1,250.00
   _______ Class B-1 - $1,500.00
   XXX Class B-2 - $1,500.00
   _______ Class C-1 - $1,500.00
   _______ Class C-2 - $1,500.00
   _______ Class C-3 - $1,750.00
   _______ Class C-4 - $1,500.00
   _______ Class D - $1,500.00
   _______ Class E - $1,500.00
   _______ Class F - $1,500.00
   _______ Class G - $75.00
   _______ Class H- $500.00
   _______ Class I- $500.00

2. License Period:

   Commencing on January 1, 2018 and ending December 31, 2018 or
   Commencing on ________________ and ending December 31, ____________

3. Type of Business Entity (check one):

   ☐ Individual
   ☑ Corporation
   ☐ Partnership
   ☐ Other [specify]
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license? YES

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith? YES

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated? YES

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission? YES

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.

FOR CASEY'S RETAIL COMPANY

SIGNATURE OF APPLICANT (S)

CORPORATION SIGNATURES

Pres.

INDIVIDUAL OR PARTNERSHIP SIGNATURES

BY JOHN C. SOUPENE, PRESIDENT

Sec.

BY JULIA L. JACKOWSKI, SECRETARY

STATE OF IOWA

County of POLK

The undersigned swears that all statements are true and correct.

FOR CASEY'S RETAIL COMPANY

CORPORATE SEAL

Subscribed and sworn to before me this 7TH day of NOVEMBER, 2017.

Notary Public

Commission Number 156893
MY COMM. EXP. 11-24-20
CONTINUATION CERTIFICATE
(to be filed with the obligee)

<table>
<thead>
<tr>
<th>BOND NO.</th>
<th>AMOUNT</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>IL 57104</td>
<td>1,500</td>
<td>LIQUOR RETAILER</td>
</tr>
</tbody>
</table>

OBLIGEE        VILLAGE OF HAMPSHIRE

MERCHANTS BONDING COMPANY (MUTUAL) hereby continues in force Bond for:

PRINCIPAL CASEY'S RETAIL COMPANY

DBA

All liability under this Continuation Certificate is effective 12/01/17 and terminates midnight 12/01/18.

This continuation is executed upon the express condition that the Company's liability under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed in the aggregate the largest single amount named in the Bond, the endorsement attached thereto, or any continuation certificate.

Witness the signature of its President under the corporate seal on 10/01/17.

Attest:

MERCHANTS BONDING COMPANY (MUTUAL)

CERTIFICATION

I hereby certify that the following is a true and correct copy of Section 1(b) and Section 1(d) of Article VI of the Bylaws of Merchants Bonding Company (Mutual) duly adopted and recorded to-wit: Section 1(b) "The President, Secretary, or Treasurer or any Assistant Treasurer or any Assistant Secretary shall have power and authority to execute on behalf of the Company and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof," and Section 1(d) "The signature of any authorized officer and the seal of the Company may be affixed by facsimile or electronic transmission to any Power of Attorney or Certification thereof authorizing the execution and delivery of any bond, undertaking, recognition, or other suretyship obligations of the Company, and such signature and seal when so used shall have the same force and effect as though manually fixed."

I further certify that the following are duly elected officers of the Company: Larry Taylor, President; and William Warner, Jr., Secretary.

IN TESTIMONY WHEREOF, I have hereunto set my hand as President and affix the Corporate Seal of the MERCHANTS BONDING COMPANY (MUTUAL)

this 1ST day of OCTOBER, 2017

Attest:

SECRETARY

MERCHANTS BONDING COMPANY (MUTUAL)

On this 1ST day of OCTOBER, 2017 before me appeared Larry Taylor, to me personally known, who being by me duly sworn did say that he is President of the MERCHANTS BONDING COMPANY (MUTUAL), the corporation described in the foregoing instrument, and that the Seal affixed to the said instrument is the Corporate Seal of the said Corporation and that the said instrument was signed and sealed in behalf of said Corporation by authority of its Board of Directors.

Witnessed to and subscribed by me on 10/01/17

ALICIA K. GRAM
Notary Public

SUP 0012 (2/17)
10/20/2017

Village of Hampshire
P O Box 457
Hampshire, IL 60140

RE: Casey’s Retail Company

Dear Sir or Madam:

Enclosed is the continuation certificate for Casey’s Retail Company for the period 12/1/2017 to 12/1/2018.

We trust that you will find all to be in order. If you should have any questions please contact me at 515-237-0109.

Sincerely,
LMC Insurance & Risk Management

Nancy Baltutat, CRIS, AINS
Senior Bond Account Manager
CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/29/2017

PRODUCER
LMC Insurance & Risk Management, Inc.
4200 University Ave., Suite 200
West Des Moines IA 50266-5945

INSURED
Casey's General Stores, Inc.
P O Box 3001
One Convenience Blvd
Ankeny IA 50021

COVERAGES

A COMMERCIAL GENERAL LIABILITY
- CLAIMS-MADE
- OCCUR
- X

B AUTOHQ LIBALIY
- X

CASENUMBER: 1226251775 REVISION NUMBER:

PRODUCER CONTACT
Lori Godbey
PHONE: 515-237-0114
FAX (866) 1-237-0114
EMAIL: lori.godbey@lmcs.com

INSURED AFFORDING COVERAGE
INSURER A:
Employers Mutual Casualty Company
21415

INSURER B:
Lexington Insurance Company
19437

CERTIFICATE HOLDER
Casey's General Stores, Inc.
One Convenience Blvd
PO Box 3001
Ankeny IA 50021

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES

Named Insured Includes: Casey's Retail Company, Casey's Services Company and Casey's Marketing Company

Named Insured also includes: CBS and CGS Sales Corporation, Tobacco City Inc.

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2014 ACORD CORPORATION. All rights reserved.
APPLICATION FOR ALCOHOLIC LIQUOR

DATE: __________________________

NAME OF BUSINESS: Hampshire Gasoline Inc
SALES TAX ID: 4020-3778

NAME OF APPLICANT: Himesh Patel

ADDRESS OF BUSINESS: 1000 S State St, Hampshire IL 60140

BUSINESS PHONE NO.: (847) 683-7180

MAILING ADDRESS: 1000 S State St, Hampshire IL 60140

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter III, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

<table>
<thead>
<tr>
<th>Class</th>
<th>Fee</th>
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<tbody>
<tr>
<td>A-1</td>
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<tr>
<td>G</td>
<td>$75.00</td>
</tr>
<tr>
<td>H</td>
<td>$500.00</td>
</tr>
</tbody>
</table>

2. License Period:

   Commencing on January 1, 2018 and ending December 31, 2018 or
   Commencing on ___________ and ending December 31, ___________

3. Type of Business Entity (check one):

   □ Individual
   □ Corporation
   □ Partnership
   □ Other (specify)
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Hitesh Patel
BIRTHDAY: 05/29/1965
HOME ADDRESS: 5415 Ruhtaud Ct, Schaumburg, IL 60173
DRIVERS LICENSE#: P340-3376-5153  HOME PHONE#: 847-845-71
BUSINESS STATUS: Currenl
PERCENTAGE OF STOCK HELD: 100%

(If additional space is required, please attach a separate sheet of paper)

5. Is the applicant a citizen of the United States? yes
   If naturalized, state date and place of naturalization:

   If an Illinois corporation, state date of corporation: Jan 05, 2011
   If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act:

6. State the character of the applicant’s business, and in case of a corporation, the objects for which it was formed. Retail Gas Station with Convenience Store

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location.

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. Village of Hampshive
   If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued. Hampshive
9. Has the applicant ever had any previous liquor license revoked? __________
   If answer is in the affirmative, state the date and reason for such revocation. __________

10. Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business? __________

11. State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so, the date thereof. Yes __________
   Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.

12. State the name of the person who will generally be managing the ongoing affairs of this business at these premises. Rakesh Patel __________
   State whether said manager has been fingerprinted by the Illinois State Police and, if so, the date thereof. __________
   Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.

13. Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village? Yes __________

14. If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? Yes __________
   If the answer is in the affirmative, attach a copy of said lease to the application.

15. State whether the applicant has ever been convicted of a felony offense under any Federal or State law? No __________

16. State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor? No __________

17. State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock? No __________
   If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant? __________

18. Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station? No __________

19. Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors? No __________
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license? 

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith? 

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated? 

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission? 

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.

SIGNATURE OF APPLICANT(S)

CORPORATION SIGNATURES

Pres. 

Sec. 

INDIVIDUAL OR PARTNERSHIP SIGNATURES

Hitesh Patel

STATE OF 

County of 

SS

The undersigned swears that all statements are true and correct.

CORPORATE SEAL

Subscribed and sworn to before me this 24 day of November, 2017.

Notary Public
### CERTIFICATE OF LIABILITY INSURANCE

**Producer:**
Cooper & Allison Insurance Agency, LLC
100 Tower Dr. Ste 123
Burr Ridge, IL 60527

**Insured:**
Hampshire Gasoline, Inc.
1000 S State Street
Hampshire, IL 60140

**Certification Number:**
Acuity: 14184

**Date:**
11/17/2017

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### PRODUCER
Georgie Chico
ACORD 25 (2016/03)

---

### COVERAGES

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### CERTIFICATE HOLDER
Village of Hampshire
234 S. State St
Hampshire, IL 60140

---

### CANCELLATION

**Should ANY of the above described POLICIES be CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.**

**AUTHORIZED REPRESENTATIVE:**

---

The ACORD name and logo are registered marks of ACORD

ACORD 25 (2016/03) © 1988-2015 ACORD CORPORATION. All rights reserved.
KNOW ALL MEN BY THESE PRESENTS:

That we, Hampshire Gasoline Inc
1000 S. State Street
Hampshire, IL 60140

as Principal, and the RLI Insurance Company, a corporation duly licensed to do business in the state of Illinois, as Surety, are held and firmly bound unto the

Village of Hampshire, State of Illinois, Obligee,
in the penal sum of Ten Thousand and 00/100 ($10,000.00) DOLLARS, lawful money of the United States, to be paid to the said Obligee, for which payment well and truly to be made, we bind ourselves and our legal representatives, jointly and severally by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH, That whereas, the said Principal has been licensed as a(n) ____________ Liquor Liability for Retail Sales _________ by the Obligee.

NOW, THEREFORE, if the said Principal shall faithfully perform the duties and in all things comply with the laws and ordinances, including all Amendments thereto, pertaining to the license or permit applied for, then this obligation to be void, otherwise to remain in full force and effect for a period commencing on the __19th_ day of __June__ , 2017 __, and ending on the __19th_ day of __June__, 2018.

This bond may be terminated at any time by the Surety upon sending written notice to the clerk of the Political Subdivision with whom this bond is filed and to the Principal, addressed to them at their first known address, and at the expiration of thirty (30) days from the mailing of said notice, or as soon thereafter as permitted by applicable law, whichever is later, this bond shall terminate and the Surety shall thereupon be relieved from any liability for any acts or omissions of the Principal subsequent to said date.

Dated this __19th_ day of __June__, 2017.

__________________________
Principal
(Individual, Partner or Corporate Officer)

RLI Insurance Company

By ________________________
Barton W. Davis
Vice President

R002307-20,30
POWER OF ATTORNEY

RLI Insurance Company

Know All Men by These Presents:

That the RLI Insurance Company, a corporation organized and existing under the laws of the State of Illinois, and authorized and licensed to do business in all states and the District of Columbia does hereby make, constitute and appoint: Barton W. Davis in the City of Peoria, State of Illinois, as Vice President, with full power and authority hereby conferred upon him/her to sign, execute, acknowledge and deliver for and on its behalf as Surety, in general, any and all bonds, undertakings, and recognizances in an amount not to exceed One Million and 00/100 Dollars ($1,000,000.00) for any single obligation, and specifically for the following described bond:

Principal: Hampshire Gasoline Inc
Obligee: Village of Hampshire
Type Bond: Liquor Liability for Retail Sales
Bond Amount: $10,000.00
Effective Date: June 19, 2017

The RLI Insurance Company further certifies that the following is a true and exact copy of a Resolution adopted by the Board of Directors of RLI Insurance Company, and now in force to-wit:

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

IN WITNESS WHEREOF, the RLI Insurance Company has caused these presents to be executed by its Vice President with its corporate seal affixed this 19th day of June, 2017.

ATTEST:

Cherie L. Montgomery
Assistant Secretary

Barton W. Davis
Vice President

On this 19th day of June, 2017 before me, a Notary Public, personally appeared Barton W. Davis and Cherie L. Montgomery, who being by me duly sworn, acknowledged that they signed the above Power of Attorney as Vice President and Assistant Secretary, respectively, of the said RLI Insurance Company, and acknowledged said instrument to be the voluntary act and deed of said corporation.

Jacqueline M. Bockler
Notary Public

A0006194
APPLICATION FOR ALCOHOLIC LIQUOR

DATE: __________________________________________

NAME OF BUSINESS: TA Operating LLC d/b/a TravelCenters of America  SALES TAX ID: 2494-0712

NAME OF APPLICANT: Patricia A. Burton

ADDRESS OF BUSINESS: 19 N 430 US Highway 20, Hampshire, IL 60140

BUSINESS PHONE NO.: 847-683-4558

MAILING ADDRESS: 847-683-4558

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter III-V, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

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<td>$1,500.00</td>
</tr>
<tr>
<td>A-2</td>
<td>$1,250.00</td>
</tr>
<tr>
<td>B-1</td>
<td>$1,500.00</td>
</tr>
<tr>
<td>B-2</td>
<td>$1,500.00</td>
</tr>
<tr>
<td>C-1</td>
<td>$1,500.00</td>
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<tr>
<td>C-2</td>
<td>$1,500.00</td>
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<td>C-3</td>
<td>$1,750.00</td>
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<tr>
<td>C-4</td>
<td>$1,500.00</td>
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<td>D</td>
<td>$1,750.00</td>
</tr>
<tr>
<td>E</td>
<td>$1,750.00</td>
</tr>
<tr>
<td>F</td>
<td>$1,500.00</td>
</tr>
<tr>
<td>G</td>
<td>$75.00</td>
</tr>
<tr>
<td>H</td>
<td>$500.00</td>
</tr>
<tr>
<td>I</td>
<td>$500.00</td>
</tr>
</tbody>
</table>

2. License Period:

Commencing on January 1, 2018 and ending December 31, 2018 or
Commencing on ___________ and ending December 31, ___________

3. Type of Business Entity (check one):

- [ ] Individual
- [ ] Corporation
- [ ] Partnership
- [x] Other (specify) Limited Liability Company
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: PLEASE SEE ATTACHED RIDER

BIRTHDAY: _____________________________

HOME ADDRESS: _____________________________

DRIVERS LICENSE#: _____________________________ HOME PHONE#: _____________________________

BUSINESS STATUS: _____________________________

PERCENTAGE OF STOCK HELD: _____________________________

Name: _____________________________

BIRTHDAY: _____________________________

HOME ADDRESS: _____________________________

DRIVERS LICENSE#: _____________________________ HOME PHONE#: _____________________________

BUSINESS STATUS: _____________________________

PERCENTAGE OF STOCK HELD: _____________________________

(If additional space is required, please attach a separate sheet of paper)

5. Is the applicant a citizen of the United States? __ N/A
   If naturalized, state date and place of naturalization: _____________________________

   If an Illinois corporation, state date of corporation: __ N/A

   If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act. October 30, 2007

6. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. TA Operating LLC is multi-state retail licensee engaged in travel hospitality, food and beverage, sundries and fuel operations

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location.

   19 N 430 US Highway 20, Hampshire, IL 60140 - Travel center

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. Yes

   If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued. PLEASE SEE ATTACHED RIDER.
# TA Operating LLC Members, Executive Officers and Directors

**Rider to Village of Hampshire, IL Application for Class B-2 License**

<table>
<thead>
<tr>
<th>NAME</th>
<th>TITLE</th>
<th>OWNERSHIP INTEREST</th>
<th>HOME ADDRESS</th>
<th>PHONE NUMBER</th>
<th>DATE OF BIRTH</th>
<th>DRIVER'S LICENSE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barry M. Portnoy</td>
<td>Director</td>
<td>0</td>
<td>P.O. Box 150, Crystal Lake Rd, Eaton, NH 03832</td>
<td>603-447-1940</td>
<td>9/10/1945</td>
<td>NH 09PYB45101</td>
</tr>
<tr>
<td>Thomas M. O'Brien</td>
<td>Director, President, CEO</td>
<td>0</td>
<td>306n2 Lake Road, Bay Village, OH 44118</td>
<td>440-250-2260</td>
<td>5/20/1966</td>
<td>OH TQ037416</td>
</tr>
<tr>
<td>Andrew J. Rehlitz</td>
<td>Exec. Vice Pres., CFO, Treasurer, Asst. Sec'ty</td>
<td>0</td>
<td>180S Spyglass Hill Dr. Strongsville, OH 44136</td>
<td>440-878-1556</td>
<td>7/5/1965</td>
<td>OH RT63135+</td>
</tr>
<tr>
<td>Mark R. Young</td>
<td>Exec. Vice Pres., General Counsel</td>
<td>0</td>
<td>134 Cushing Avenue, Unit 3 Dorchester, MA 02125</td>
<td>617-533-7011</td>
<td>8/28/1962</td>
<td>MA 521305138</td>
</tr>
<tr>
<td>Barry A. Richards</td>
<td>EVP, Commercial Operations</td>
<td>0</td>
<td>7774 Rice Rd. Amherst, OH 44001</td>
<td>440-471-7845</td>
<td>9/7/1942</td>
<td>OH TP105182</td>
</tr>
<tr>
<td>Rodney P. Brennan</td>
<td>EVP, Retail Operations</td>
<td>0</td>
<td>75 Beach Cliff Dr., Amherst, OH 44001</td>
<td>440-250-2880</td>
<td>7/27/1968</td>
<td>OH RN501287</td>
</tr>
<tr>
<td>Jennifer B. Clark</td>
<td>Secretary</td>
<td>0</td>
<td>88 Hudson Road Sudbury, MA 01776</td>
<td>978-440-7876</td>
<td>6/1/1961</td>
<td>MA 526151553</td>
</tr>
<tr>
<td>Patricia A. Burton</td>
<td>Resident Manager</td>
<td>0</td>
<td>1355 N. Arthur Bath Dr. Lot M-2, Bourbonnais, IL 60914</td>
<td>847-683-4550</td>
<td>1/29/1978</td>
<td>IL B635-6817-8691</td>
</tr>
<tr>
<td>Travel Centers of America Holding Company LLC</td>
<td>Member</td>
<td>100%</td>
<td>24601 Center Ridge Road, Westlake, OH 44145</td>
<td>440-808-9100</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>
9. Has the applicant ever had any previous liquor license revoked? _No_ 
   If answer is in the affirmative, state the date and reason for such revocation. 

10. Has the applicant and the designated managers read and do they understand and agree not to 
    violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of 
    the Village of Hampshire in conducting business? _Yes_ 

11. State whether all individual owners, partners, officers, directors, persons holding more than 5% 
    of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date 
    thereof. Local applicant was fingerprinted 
    _Note: This application will remain incomplete and will not be 
    considered until question #11 can be answered in the affirmative._ 

12. State the name of the person who will generally be managing the ongoing affairs of this business 
    at these premises. _Patricia A. Burton_ 
    State whether said manager has been fingerprinted by the Illinois State Police and, if so the date 
    thereof. Yes - she is scheduled to be printed at 3pm today (November 21, 2017). 
    _Note: This application will remain incomplete and will not be 
    considered until question #12 can be answered in the affirmative._ 

13. Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application 
    or already furnished it to the Village? _Yes_ 

14. If the applicant does not own the premises for which the license is sought, does the applicant 
    have a lease for the full period for which the license is to be issued? _Yes_ 
    If the answer is in the affirmative, attach a copy of said lease to the application. 

15. State whether the applicant has ever been convicted of a felony offense under any Federal or 
    State law? _No_ 

16. State whether the applicant has ever been convicted of a violation of any Federal or State law 
    concerning the manufacture, possession or sale of alcoholic liquor? _Yes - PLEASE SEE ATTACHED RIDER._ 

17. State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to 
    the applicant, the premises, or to any corporation in which the applicant holds 5% or more 
    Stock? _No_ 
    If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be 
    covered by this applicant? 

18. Is the premises within 100 feet of any real property of any church, school, hospital, home for the 
    aged or indigent persons or for veterans, their wives or children, or any military or naval station? _No_ 

19. Are the premises for which license is herein applied for a store or other place of business where 
    the majority of customers are minors of school age or where the principal business transacted 
    consists of school books, school supplies, food, lunches or drinks for such minors? _No_
TA Operating LLC is multi-state retail licensee engaged in travel hospitality, food and beverage, sundries and fuel operations. It is wholly owned by TravelCenters of America Holding Company LLC, which is in turn wholly owned by publicly traded TravelCenters of America LLC (Nasdaq: "UTA"). TA Operating LLC owns and/or operates in excess of 220 travel centers and 200 convenience stores across the United States, some of which serve and/or sell alcoholic beverages pursuant to retail licenses held by TA.

A few of the licensed locations have been the subject of alcoholic beverage regulatory inquiry leading to offers in compromise or, in limited cases, a brief suspension.
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license?  Yes

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith?  Yes

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated?  Yes

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission?  N/A

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.

SIGNATURE OF APPLICANT (S)

CORPORATION SIGNATURES

TA Operating LLC, By:

Pres.  

Thomas M. O'Brien, President

Sec.  

Andrew Rebholz, Assistant Secretary

STATE OF OHIO  )

County of CUYAHOGA  ) SS

The undersigned swears that all statements are true and correct.

CORPORATE SEAL

Subscribed and sworn to before me this 26th day of November, 2017.

CARY M. TOOTH

NOTARY PUBLIC • STATE OF OHIO

Recorded in Cuyahoga County
My commission expires Nov. 13, 2021

Notary Public
CONINUATION CERTIFICATE

The RLI Insurance Company (hereinafter called the Surety) hereby continues in force its Bond No. CMS0277196 in the sum of One Thousand Five Hundred Dollars and 00/100 ($1,500.00) Dollars, on behalf of TA Operating LLC dba TravelCenters of America in favor of Village of Hampshire, Illinois subject to all the conditions and terms thereof through December 31, 2018 at location of risk.

This Continuation is executed upon the express condition that the Surety’s liability shall not be cumulative and shall be limited at all times by the amount of the penalty stated in the bond.

IN WITNESS WHEREOF, the Surety has caused this instrument to be signed by its duly authorized Attorney-in-Fact and its corporate seal to be hereto affixed this 17th day of November, 2017.

RLI Insurance Company
Surety

By:

Frank Kinnett, Attorney-in-Fact (IL License #1727357)
POWER OF ATTORNEY
RLI Insurance Company

Know All Men by These Presents:

That this Power of Attorney is not valid or in effect unless attached to the bond which it authorizes executed, but may be detached by the approving officer if desired.

That RLI Insurance Company, an Illinois corporation, does hereby make, constitute and appoint:

John E. Genet, Jarrod Hitt, Frank Kinnett jointly or severally

in the City of Atlanta, State of Georgia its true and lawful Agent and Attorney in Fact, with full power and authority hereby conferred, to sign, execute, acknowledge and deliver for and on its behalf as Surety, the following described bond.

Any and all bonds provided the bond penalty does not exceed Twenty Five Million Dollars ($25,000,000.00).

The acknowledgment and execution of such bond by the said Attorney in Fact shall be as binding upon this Company as if such bond had been executed and acknowledged by the regularly elected officers of this Company.

The RLI Insurance Company further certifies that the following is a true and exact copy of the Resolution adopted by the Board of Directors of RLI Insurance Company, and now in force to-wit:

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

IN WITNESS WHEREOF, the RLI Insurance Company has caused these presents to be executed by its Vice President with its corporate seal affixed this 13th day of March, 2017.

By: Barton W. Davis
Vice President

State of Illinois
County of Peoria
SS

On this 13th day of March, 2017, before me, a Notary Public, personally appeared Barton W. Davis, who being by me duly sworn, acknowledged that he signed the above Power of Attorney as the aforesaid officer of the RLI Insurance Company and acknowledged said instrument to be the voluntary act and deed of said corporation.

By: Jacqueline M. Bockler
Notary Public

CERTIFICATE

I, the undersigned officer of RLI Insurance Company, a stock corporation of the State of Illinois, do hereby certify that the attached Power of Attorney is in full force and effect and is irrevocable; and furthermore, that the Resolution of the Company as set forth in the Power of Attorney, is now in force. In testimony whereof, I have hereunto set my hand and the seal of the RLI Insurance Company this 13th day of March, 2017.

By: Barton W. Davis
Vice President

STATE OF ILLINOIS COUNTY OF PEORIA

Notary Public

Seal 03/14/18

Jacqueline M. Bockler
Commission Expires 03/14/18

RLI Insurance Company

By: Barton W. Davis
Vice President

STATE OF ILLINOIS COUNTY OF PEORIA

Notary Public

Seal 03/14/18

Jacqueline M. Bockler
Commission Expires 03/14/18

RLI Insurance Company

By: Barton W. Davis
Vice President
I, Andrew J. Rebholz, do hereby certify that I am the duly elected, qualified and acting Assistant Secretary of TA Operating LLC, a Delaware limited liability company (the "Company"), and that:

The following named individuals are the directors and executive officers of the Company, holding the respective offices set forth opposite their name:

<table>
<thead>
<tr>
<th>Name</th>
<th>Office</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barry M. Portnoy</td>
<td>Director</td>
</tr>
<tr>
<td>Thomas M. O'Brien</td>
<td>Director, President and Chief Executive Officer</td>
</tr>
<tr>
<td>Andrew J. Rebholz</td>
<td>Executive Vice President, Chief Financial Officer</td>
</tr>
<tr>
<td></td>
<td>Treasurer, and Assistant Secretary</td>
</tr>
<tr>
<td>Mark R. Young</td>
<td>Executive Vice President and General Counsel</td>
</tr>
<tr>
<td>Barry Richards</td>
<td>Executive Vice President, Commercial Operations</td>
</tr>
<tr>
<td>Rodney Bresnahan</td>
<td>Executive Vice President, Retail Operations</td>
</tr>
<tr>
<td>Jennifer B. Clark</td>
<td>Secretary</td>
</tr>
</tbody>
</table>

IN WITNESS WHEREOF, I have hereunto set my hand as of this 13th day of July, 2017.

Andrew J. Rebholz
Assistant Secretary
# Certificate of Liability Insurance

**Date:** 11/17/2016

**Issuer:** Arch Specialty Insurance Company

## Important
If the certificate holder is an Additional Insured, the policy(ies) must have Additional Insured provisions or be endorsed. If subrogation is waived, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

### Producer
Willis of New York, Inc.
c/o 26 Century Blvd
P.O. Box 30581
Nashville, TN 37230-5191

### Insured
TA Operating LLC
24601 Center Ridge Road
Suite 300
Westlake, OH 44145-5634

## Coverages

### Certificate Number:

<table>
<thead>
<tr>
<th>Description of Operations</th>
<th>Locations/Vehicles (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Re: 19 N 430 US Highway 20, Hampshire, IL 60140</td>
<td>General Liability includes Liquor Liability - $1,000,000 Aggregate Limit Village of Hampshire is hereby added as an additional insured as required by written contract and/or agreement.</td>
</tr>
</tbody>
</table>

## Certificates

**Certificate Holder:**
Illinois Liquor Control Commission
101 W. Jefferson Street
Suite 3-525
Springfield, IL 62702

**Cancellation:**

Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.

**Authorized Representative:**
[Signature]

---

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APPLICATION FOR ALCOHOLIC LIQUOR

DATE: 11/27/17

NAME OF BUSINESS: CSMS, Inc. dba Tuscany Sun Winestands
NAME OF APPLICANT: Mukesh C Patel
ADDRESS OF BUSINESS: 107 W. Oak Knoll Dr., Hampshire, IL 60140
BUSINESS PHONE NO.: 847-683-7691
MAILING ADDRESS: Same As Above

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter III-V, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

   Class A-1 - $1,500.00
   Class A-2 - $1,250.00
   Class B-1 - $1,500.00
   Class B-2 - $1,500.00
   Class C-1 - $1,500.00
   Class C-2 - $1,500.00
   Class C-3 - $1,750.00
   Class D - $1,750.00
   Class E - $1,750.00
   Class F - $1,500.00
   Class G - $75.00
   Class H - $500.00
   Class I - $500.00

2. License Period:

   Commencing on January 1, 2018 and ending December 31, 2018 or
   Commencing on __________________ and ending December 31, ____________

3. Type of Business Entity (check one):

   ☐ Individual
   ☐ Partnership
   ☒ Corporation
   ☐ Other (specify)
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: 
BIRTHDAY: 1/18/1968
HOME ADDRESS: 2406 King James Ave, St. Charles, IL 60174
DRIVERS LICENSE #: P340-5426-8018 HOME PHONE#: 630-587-0773
BUSINESS STATUS: CURRENT
PERCENTAGE OF STOCK HELD: 100%

Name: 
BIRTHDAY: 
HOME ADDRESS: 
DRIVERS LICENSE #: 
BUSINESS STATUS: 
PERCENTAGE OF STOCK HELD: (If additional space is required, please attach a separate sheet of paper)

5. Is the applicant a citizen of the United States? Yes
If naturalized, state date and place of naturalization: CHICAGO, 10/1966

If an Illinois corporation, state date of corporation: DECEMBER 3, 2008

If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act: N/A

6. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. Retail Sale of Wine & Spirits

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. 107 W. Oak Knoll Dr, HAMPSHIRE, IL 60140

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. Yes
If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued. STATE OF ILLINOIS, June 2017, Aug 2017, July 2017
9. Has the applicant ever had any previous liquor license revoked? No
   If answer is in the affirmative, state the date and reason for such revocation.

10. Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business? Yes

11. State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof. Dec 2008, Nov 2009, Sept 2011
   Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.

12. State the name of the person who will generally be managing the ongoing affairs of this business at these premises. Mukesh Patel
   State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof. Yes May 2009, Sept 2011
   Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.

13. Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village? Yes

14. If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? Yes (same form on file)
   If the answer is in the affirmative, attach a copy of said lease to the application.

15. State whether the applicant has ever been convicted of a felony offense under any Federal or State law? No

16. State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor? No

17. State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock? No
   If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?

18. Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station? No

19. Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors? No
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license?  

Yes  

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith?  

Yes  

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated?  

Yes  

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission?  

Yes  

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk. 

SIGNATURE OF APPLICANT (S)  
CORPORATION SIGNATURES  

Pres.  
Mukesh C. Patel  

Sec.  
Mukesh C. Patel  

INDIVIDUAL OR PARTNERSHIP SIGNATURES  

STATE OF Illinois  
County of Kane  

The undersigned swears that all statements are true and correct.  

BONNIE CEREZO  
Notary Public - State of Illinois  
My Commission Expires Aug 1, 2021  

Subscribed and sworn to before me this  
25th day of November, 2017.  

BONNIE CEREZO  
Notary Public
CERTIFICATE OF LIABILITY INSURANCE

TUSCA-2

11/22/2017

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not affirmatively or negatively amend, extend or alter the coverage afforded by the policies below. This certificate of insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder.

IMPORTANT: If the certificate holder is an additional insured, the policy(ies) must have additional insured provisions or be endorsed. If subrogation is waived, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER

ISU Insurance Services
The Machon Agency
838 Busse Highway
Park Ridge, IL 60068-2302
Machon & Machon, Inc.

INSURED

Tuscan Sun Wine & Spirits
ClMS Inc.
107 W Oak Knoll Drive
Hampshire, IL 60170

COVERAGE

CERIFICATE NUMBER:

REVISION NUMBER:

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies. Limits shown may have been reduced by paid claims.

A X COMMERCIAL GENERAL LIABILITY

CLAIMS-MADE

X OCCUR

BZ557452300

11/17/2017

11/17/2018

EXCESS LIABILITY

CLAIMS-MADE

Workers Compensation and Employers' Liability

Any Proprietor/Partner/Executive

Office/Member Excluded

Mandatory in NH?

Yes

ageregate

CER TIFICATE HOLDER

VILHAMP

CANCELLATION

Village of Hampshire
234 S State Street
PO Box 457
Hampshire, IL 60140-0457

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFER NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
ISU Insurance Services
The Machon Agency
838 Busse Highway
Park Ridge, IL 60063-3002
Machon & Machon, Inc.

INSURED
Tuscan Sun Wine & Spirits
CJMS Inc
107 W Oak Knoll Drive
Hampshire, IL 60170

INSURER A: Ohio Security Ins Company
INSURER B:
INSURER C:
INSURER D:
INSURER E:
INSURER F:

COVERAGES

COVERAGE NUMBER: TUSCA-2

TYPE OF INSURANCE

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<th>ADDED LIMIT/OPTION</th>
<th>INSURER</th>
<th>POLICY NUMBER</th>
<th>POLICY EFFECT</th>
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

VILHAMP

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE


ACORD 25 (2016/03) © 1988-2015 ACORD CORPORATION. All rights reserved.

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CONTINUATION CERTIFICATE

To be attached to and form a part of surety bond number 32S187320 (the "Bond"), cross reference bond number 6644760000 for LIQUOR STORE
dated the 11th day of May, 2009, in the penal sum of $1,500.00 issued by
AMERICAN STATES INSURANCE COMPANY as surety (the "Surety"), on behalf of
CJMS INCORPORATED DBA TUSCAN SUN WINE & SPIRITS as principal (the "Principal"), in favor of VILLAGE OF HAMPshire, as obligee (the "Obligee").

The Surety hereby certifies that this Bond is continued in full force and effect until the 31st day of December, 2017, subject to all covenants and conditions of said Bond.

Said Bond has been continued in force upon the express condition that the full extent of the Surety's liability under said Bond, and this and all continuations thereof, for any loss or series of losses occurring during the entire time the Surety remains on said Bond, shall in no event, either individually or in the aggregate, exceed the penal sum of the Bond.

IN WITNESS WHEREOF, the Surety has set its hand and seal this 4th day of October, 2016

AMERICAN STATES INSURANCE COMPANY
(Surety)

By:

Timothy A. Mikolajewski
Assistant Secretary - Liberty Mutual Surety

DASCO INSURANCE AGENCY INC
628 ACADEMY DR
NORTHBROOK, IL 60062-2421
APPLICATION FOR ALCOHOLIC LIQUOR

DATE: Nov. 28, 2017

NAME OF BUSINESS: Speedway 5036

NAME OF APPLICANT: Speedway LLC

ADDRESS OF BUSINESS: 110 Arrowhead Drive, Hampshire, IL

BUSINESS PHONE NO.: (847) 683-9372

MAILING ADDRESS: P.O. Box 1580 - License Dept., Springfield, OH 45501

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

   - Class A-1 - $1,500.00
   - Class A-2 - $1,250.00
   - Class B-1 - $1,500.00
   - Class B-2 - $1,500.00
   - Class C-1 - $1,500.00
   - Class C-2 - $1,500.00
   - Class C-3 - $1,750.00
   - Class C-4 - $1,500.00
   - Class D - $1,750.00
   - Class E - $1,750.00
   - Class F - $1,500.00
   - Class G - $75.00
   - Class H - $500.00
   - Class I - $500.00

2. License Period:

   Commencing on January 1, 2018 and ending December 31, 2018 or
   Commencing on ________________ and ending December 31, ____________

3. Type of Business Entity (check one):

   - [ ] Individual
   - [ ] Corporation
   - [ ] Partnership
   - [✓] Other (specify) LLC
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Corporate Officers: Please see attached "List of Officers" file.

BIRTHDAY: ________________________________

HOME ADDRESS: ________________________________

DRIVERS LICENSE# __________________ HOME PHONE# __________________

BUSINESS STATUS: ________________________________

PERCENTAGE OF STOCK HELD: ________________________________

Name: General Manager: (2001) Jacques LaFond

BIRTHDAY: 1/18/1973

HOME ADDRESS: 1940 Unbodenstock Rd, Elgin, IL 60123

DRIVERS LICENSE# 11534387397 HOME PHONE# __________________

BUSINESS STATUS: ________________________________

PERCENTAGE OF STOCK HELD: 100% (If additional space is required, please attach a separate sheet of paper)

5. Is the applicant a citizen of the United States? Yes

If naturalized, state date and place of naturalization: ________________________________

If an Illinois corporation, state date of corporation: ________________________________

If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act: 10/29/1997

6. State the character of the applicant’s business, and in case of a corporation, the objects for which it was formed. To own and operate a convenience store with gas station.

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. 110 Arrowhead Drive

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. Speedy Lee built numerous licenses in 1974 State: OH, KY, IN, IL, MI, WI, WI, IN, AL, GA, MA, NH, NY, ME, VA, S...
9. Has the applicant ever had any previous liquor license revoked? 

Yes.

If answer is in the affirmative, state the date and reason for such revocation.

Attachment 1

Attachment 2

10. Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business? 

Yes.

11. State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.

Officers reside/Work out of State with C/O permit

Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.

12. State the name of the person who will generally be managing the ongoing affairs of this business at these premises.

Varies/Legend

State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof.

No - he will make arrangements 1974 - 1975

Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.

13. Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?

Yes.

14. If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? 

Yes.

If the answer is in the affirmative, attach a copy of said lease to the application.

15. State whether the applicant has ever been convicted of a felony offense under any Federal or State law?

Yes.

16. State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?

No.

17. State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?

No.

If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?

18. Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?

No.

19. Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?

No.
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license?  

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith?  

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated?  

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission?  

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.

SIGNATURE OF APPLICANT (S)  
CORPORATION SIGNATURES  
INDIVIDUAL OR PARTNERSHIP SIGNATURES  

President  
Anthony R. Kenney, President for Speedway LLC  
Sec.  
David E. Ball, Secretary for Speedway LLC  

STATE OF  
Ohio  
County of Clark  

The undersigned swears that all statements are true and correct.

David E. Ball, Secretary for Speedway LLC  

KATHERINE S. BORGWALD  
NOTARY PUBLIC • STATE OF OHIO  
My commission expires 3/16/19  

Notary Public  

STATE OF OHIO  
NOTARY PUBLIC  
My commission expires 3/16/19
CERTIFICATE OF LIABILITY INSURANCE

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not affirmatively or negatively amend, extend or alter the coverage afforded by the policies below. This certificate of insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder.

IMPORTANT: If the certificate holder is an additional insured, the policy(ies) must have additional insured provisions or be endorsed. If subrogation is waived, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Willis of Texas, Inc.
c/o 26 Century Blvd.
P.O. Box 305191
Nashville, TN 37230-5191

INSURED
Speedway LLC
500 Speedway Dr.
Ecorn, OH 45323-1056

CONTACT NAME: PHONE (AIC. NO. EXT.) FAX (AIC. NO.) E-MAIL ADDRESS

INSURER(S) AFFORDING COVERAGE NAIC #

COVERAGE NUMBER: 25270986 REVISED NUMBER:

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DESCRIPTION OF OPERATIONS/Locations/VEHICLES (ACORD 18). Additional Remarks Schedule, may be attached if more space is required.

Certificate covers dram shop Speedway LLC dba Speedway #5036, located at 110 Arrowhead Drive, Hampshire, IL 60140.

CERTIFICATE HOLDER

Village of Hampshire
234 S. State Street
Hampshire, IL 60140

CANCELATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
CONTINUATION CERTIFICATE
FIDELITY OR SURETY BONDS/POLICIES

License No. ________________

In consideration of ___________ dollars renewal premium, the term of Bond/Policy No. 104087486-291 in the
amount of ___________, issued on behalf of  Speedway LLC (Unit #5036) ____________________________,
whose address is 500 Speedway Drive, Enon, OH 45323 ________________________________________________,
in favor of Village of Hampshire, IL ________________________________________________________________,
whose address is 234 S. State Street, Hampshire, IL 60140 ____________________________________________,
in connection with Travelers Casualty and Surety Company of America ____________________ is hereby extended to December 31, 2018 ____________________,
subject to all covenants and conditions of said bond/policy.

This certificate is designed to extend only the term of the bond/policy. It does not increase the amount which may be
payable thereunder. The aggregate liability of the Company under the said bond/policy together with this certificate shall
be exactly the same as, and no greater than it would have been, if the said bond/policy had originally been written to
expire on the date to which it is now being extended.

Signed, sealed and dated __________ November 13, 2017 __________

By: ________________________

Michael D. Ray, Jr. __________ Attorney-in-Fact

F-58-M (2/95)
WARNING: THIS POWER OF ATTORNEY IS INVALID WITHOUT THE RED BORDER

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company, which resolutions are now in full force and effect, as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her, and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary, and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact pursuant to the power prescribed in his or her certificate of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature or facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary, of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 3rd day of November, 2017.

[Signature]
Kevin E. Hughes, Assistant Secretary

To verify the authenticity of this Power of Attorney, call 1-800-421-3880 or contact us at www.travelersbond.com. Please refer to the Attorney-In-Fact number, the above-named individuals and the details of the bond to which the power is attached.

WARNING: THIS POWER OF ATTORNEY IS INVALID WITHOUT THE RED BORDER
APPLICATION FOR ALCOHOLIC LIQUOR

DATE: 11/13/17

NAME OF BUSINESS: Hampshire Park District

NAME OF APPLICANT: Stephanie Baron

ADDRESS OF BUSINESS: 390 South Ave, Hampshire

BUSINESS PHONE NO.: 847-683-2690

MAILING ADDRESS: P.O. Box 955, Hampshire, IL 60140

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

   Class A-1 - $1,500.00
   Class A-2 - $1,250.00
   Class B-1 - $1,500.00
   Class B-2 - $1,500.00
   Class C-1 - $1,500.00
   Class C-2 - $1,500.00
   Class C-3 - $1,750.00
   Class C-4 - $1,500.00
   Class D - $1,750.00
   Class E - $1,750.00
   Class F - $1,500.00
   Class G - $75.00
   Class H - $500.00
   Class I - $500.00
   Class J - $500.00

2. License Period:

   Commencing on January 1, 2018 and ending December 31, 2018 or Commencing on ___________ and ending December 31, ___________

3. Type of Business Entity (check one):

   [ ] Individual
   [ ] Corporation
   [ ] Partnership
   [X] Other (specify) government
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

   NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

   Name: ___________________________
   BIRTHDAY: _____________________
   HOME ADDRESS: 2143 Orchard Ln, Carpentersville, IL 60110
   DRIVERS LICENSE#: B650 - 7816 - 4694
   BUSINESS STATUS: N/A
   PERCENTAGE OF STOCK HELD: N/A

   Name: ___________________________
   BIRTHDAY: _____________________
   HOME ADDRESS: ___________________________
   DRIVERS LICENSE#: _____________________
   BUSINESS STATUS: _____________________
   PERCENTAGE OF STOCK HELD: _____________________
   (If additional space is required, please attach a separate sheet of paper)

5. Is the applicant a citizen of the United States? ______ Yes
   If naturalized, state date and place of naturalization: ___________________________
   If an Illinois corporation, state date of corporation: N/A
   If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act: ___________________________

6. State the character of the applicant’s business, and in case of a corporation, the objects for which it was formed. Parks & recreation

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. 400 E. Jefferson Avenue, Hampshire, IL 60140 (park events at Jefferson Park & Recreation Building)

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. ______ Yes State
   If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued. Illinois Liquor Control Commission
9. Has the applicant ever had any previous liquor license revoked? _NO_
   If answer is in the affirmative, state the date and reason for such revocation. 

10. Has the applicant and the designated managers read and do they understand and agree not to 
    violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of 
    the Village of Hampshire in conducting business? _YES_

11. State whether all individual owners, partners, officers, directors, persons holding more than 5% 
    of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date 
    thereof. _N/A_

   Note: This application will remain incomplete and will not be 
   considered until question #11 can be answered in the 
   affirmative.

12. State the name of the person who will generally be managing the ongoing affairs of this business 
    at these premises. _Stephanie A. Barnes_

   State whether said manager has been fingerprinted by the Illinois State Police and, if so the date 
   thereof. _N/A_

   Note: This application will remain incomplete and will not be 
   considered until question #12 can be answered in the 
   affirmative.

13. Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application 
    or already furnished it to the Village? 

   _Surety Bond attached, col insurance to follow once released._

14. If the applicant does not own the premises for which the license is sought, does the applicant 
    have a lease for the full period for which the license is to be issued? _N/A_

   If the answer is in the affirmative, attach a copy of said lease to the application.

15. State whether the applicant has ever been convicted of a felony offense under any Federal or 
    State law? _NO_

16. State whether the applicant has ever been convicted of a violation of any Federal or State law 
    concerning the manufacture, possession or sale of alcoholic liquor? _NO_

17. State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to 
    the applicant, the premises, or to any corporation in which the applicant holds 5% or more 
    Stock? _NO_

   If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be 
   covered by this applicant? 

18. Is the premises within 100 feet of any real property of any church, school, hospital, home for the 
    aged or indigent persons or for veterans, their wives or children, or any military or naval station? 
    _NO_

19. Are the premises for which license is herein applied for a store or other place of business where 
    the majority of customers are minors of school age or where the principal business transacted 
    consists of school books, school supplies, food, lunches or drinks for such minors? _NO_
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license? YES

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith? YES

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated? YES

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission? YES

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.

SIGNATURE OF APPLICANT (S)
CORPORATION SIGNATURES
Pres. 
Sec. 

INDIVIDUAL OR PARTNERSHIP SIGNATURES

STATE OF Illinois )
County of Kane ) SS

The undersigned swears that all statements are true and correct.

CORPORATE SEAL

Subscribed and sworn to before me this 13 day of January, 2017.

Notary Public
LICENSE AND PERMIT BOND

Know All Men By These Presents:

That we, Hampshire Park District, of the Village of Hampshire, State of Illinois, as Principal, and the PARK DISTRICT RISK MANAGEMENT AGENCY, an entity duly organized under the statutes of the State of Illinois, as an intergovernmental risk management pool, are held and firmly bound unto the Village of Hampshire, State of Illinois, Obligee, in the penal sum of Fifteen Hundred and No/100ths -------------- DOLLARS ($1,500.00) lawful money of the United States, to be paid to the said Obligee, for which payment well and truly to be made, we bind ourselves and our legal representatives, jointly and severally by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH, that whereas, the said Principal has been licensed for Liquor License by the said Obligee.

NOW THEREFORE, if the said Principal shall faithfully perform the duties and in all things comply with the laws and ordinances, including all Amendments thereto, appertaining to the license or permit applied for, then this obligation to be void, otherwise to remain in full force and effect until January 30, 2019 unless renewed by Continuation Certificate.

This bond may be terminated at any time by the Surety upon sending notice in writing; by certified mail, to the clerk of the Political Subdivision with whom this bond is filed and to the Principal, addressed to them at the Political Subdivision named herein, and at the expiration of thirty-five (35) days from the mailing of said notice, this bond shall ipso facto terminate and the surety shall thereupon be relieved from any liability for any acts or omissions of the Principal subsequent to said date.

Dated this 14th day of November, 2017.

Hampshire Park District

Principal

PARK DISTRICT RISK MANAGEMENT AGENCY

BY Brett Davis, Chief Executive Officer
BASSET Card

May 22, 2017

Letter ID: L1058973672

License No.: 5A-0110606
Expiration Date: 5/9/2020
License Type: Basset Card

STEFFANIE BARONE
390 SOUTH AVE.
HAMPShIRE IL 60140

Your "Student ID number" is: 11000380
Your "Trainer's ID number" is: 5A-0110606

Your BASSET Card is located BELOW

DO NOT throw away this letter as you will need your "Student ID number" directly above to re-print your card.

IMPORTANT:

To re-print your card, visit the Illinois Liquor Control Commission website at ILCC.Illinois.gov (click on the RESOURCES tab to access the "BASSET Card Lookup" page).

**Card is not transferrable**
CERTIFICATE OF COVERAGE

Name and Address of Agency
Park District Risk Management Agency
2033 Burlington Avenue
Lisle, Illinois 60532-1646
630-769-0332

Name and Address of Member
Hampshire Township Park District
P.O. Box 953
Hampshire, IL 60140

SCOPE OF COVERAGE

The Park District Risk Management Agency (PDRMA) is an intergovernmental self-insurance and risk management pool established under the constitution and the statutes of the State of Illinois to provide coverage for its members against certain claims and losses. Each member of PDRMA is entitled to the scope and amounts of coverage set forth below. In addition, PDRMA may extend the same scope of coverage to non-members. However, any coverage extended to a non-member is subject to all of the terms, conditions, exclusions, and amendments that are applicable to the members.

The above named entity is a member in good standing of the Park District Risk Management Agency. The scope of coverage provided by the agency may, however, be revised at any time by the actions of PDRMA’s governing body. As of the date this certificate is issued, the information set out below accurately reflects the scope of coverage established for the current coverage year.

<table>
<thead>
<tr>
<th>Scope of Coverage</th>
<th>Coverage Document</th>
<th>Coverage Dates</th>
<th>Limits Each Occurrence</th>
<th>In millions (000,000)</th>
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<tbody>
<tr>
<td>General Liability</td>
<td>L010118</td>
<td>01/01/2016 - 12/31/2018</td>
<td>Bodily Injury and Property Damage combined</td>
<td>$1,000,000</td>
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<td>* Commercial general liability</td>
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<td>Personal Injury</td>
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<tr>
<td>* Occurrence</td>
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<td></td>
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<tr>
<td>* Liquor liability</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Automobile Liability</td>
<td>LC010118</td>
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<tr>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Workers' Compensation</td>
<td>WC010118</td>
<td>01/01/2016 - 12/31/2018</td>
<td>Statutory</td>
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<tr>
<td>Employer's Liability</td>
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<td>$3,000,000</td>
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<tr>
<td>Property</td>
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<td>01/01/2016 - 12/31/2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Liquor liability coverage included in General Liability policy</td>
<td></td>
<td>01/01/2016 - 12/31/2018</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

The Village of Hampshire is/are additionally insured for Hampshire Park District’s liquor service at 400 E. Jefferson Avenue in Hampshire, Illinois.

Coverage is for general liability with respect to the operations of the Hampshire Township Park District. Additional insured coverage shall not apply to any liability resulting from the certificate holder’s own negligence or the negligence of its servants agents or employees.

Cancellation: Should any of the above described coverages be cancelled before the expiration date thereof, PDRMA will endeavor to mail 30 days written notice to the certificate holder, but failure to do so shall impose no obligation or liability of any kind upon PDRMA, its members, agents or representatives.

Certificate Holder
Village of Hampshire
234 South State Street
Hampshire, IL 60140

Date Issued: 12/1/2017

[Signature]
Authorized Representative
**CERTIFICATE OF COVERAGE**

**Name and Address of Agency**
Park District Risk Management Agency  
2033 Burlington Avenue  
Lisle, Illinois 60532-1646  
630-769-0332

**Name and Address of Member**
Hampshire Township Park District  
P.O. Box 953  
Hampshire, IL 60140

### SCOPE OF COVERAGE

The Park District Risk Management Agency (PDRMA) is an intergovernmental self-insurance and risk management pool established under the constitution and the statutes of the State of Illinois to provide coverage for its members against certain claims and losses. Each member of PDRMA is entitled to the scope and amounts of coverage set forth below. In addition, PDRMA may extend the same scope of coverage to non-members. However, any coverage extended to a non-member is subject to all of the terms, conditions, exclusions, and amendments that are applicable to the members.

The above named entity is a member in good standing of the Park District Risk Management Agency. The scope of coverage provided by the agency may, however, be revised at any time by the actions of PDRMA’s governing body. As of the date this certificate is issued, the information set out below accurately reflects the scope of coverage established for the current coverage year.

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</tbody>
</table>

### DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

The Village of Hampshire is additionally insured for Hampshire Park District's use of roads for the Coon Creek Classic Race.

Coverage is for general liability with respect to the operations of the Hampshire Township Park District. Additional insured coverage shall not apply to any liability resulting from the certificate holder’s own negligence or the negligence of its servants, agents or employees.

**Certificate Holder**  
Village of Hampshire  
234 S. State Street  
Hampshire, IL 60140  
Date Issued: 12/1/2017

Authorized Representative
TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter IIIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

   - Class A-1 - $1,500.00
   - Class A-2 - $1,250.00
   - Class B-1 - $1,500.00
   - Class B-2 - $1,500.00
   - Class C-1 - $1,500.00
   - Class C-2 - $1,500.00
   - Class C-3 - $1,750.00
   - Class C-4 - $1,500.00
   - Class D - $1,750.00
   - Class E - $1,750.00
   - Class F - $1,500.00
   - Class G - $75.00
   - Class H - $500.00
   - Class I - $500.00

2. License Period:

   Commencing on January 1, 2018 and ending December 31, 2018 or
   Commencing on ___________________ and ending December 31, ____________

3. Type of Business Entity (check one):

   - Individual
   - Corporation
   - Partnership
   - Other (specify)
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Tony Aizzi
BIRTHDAY: 8-31-1977
HOME ADDRESS: 716 Vine St Hampshire IL 60140
DRIVERS LICENSE# A220- HOME PHONE# 847 951-3783
BUSINESS STATUS: Open
PERCENTAGE OF STOCK HELD: 50%

Name: Sam Aizzi
BIRTHDAY: 5-14-1954
HOME ADDRESS: 716 Vine St Hampshire IL 60140
DRIVERS LICENSE# A220-7805-148 HOME PHONE# 847 951-3783
BUSINESS STATUS: Open
PERCENTAGE OF STOCK HELD: 50%

(If additional space is required, please attach a separate sheet of paper)

5. Is the applicant a citizen of the United States? Yes
If naturalized, state date and place of naturalization:

If an Illinois corporation, state date of corporation: 05-2003
If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act:

6. State the character of the applicant’s business, and in case of a corporation, the objects for which it was formed. Sit down restaurant

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. Hampshire IL 60140

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. Yes
If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued. State of Illinois at Hampshire
9. Has the applicant ever had any previous liquor license revoked? 
   _N O_
   If answer is in the affirmative, state the date and reason for such revocation.

10. Has the applicant and the designated managers read and do they understand and agree not to 
    violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of 
    the Village of Hampshire in conducting business? 
    _Y e s_

11. State whether all individual owners, partners, officers, directors, persons holding more than 5% 
    of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date 
    thereof. 
    _Y e s__ Aug 2014
    Note: This application will remain incomplete and will not be 
    considered until question #11 can be answered in the 
    affirmative.

12. State the name of the person who will generally be managing the ongoing affairs of this business 
    at these premises. 
    _T ody__ Aug 2014
    State whether said manager has been fingerprinted by the Illinois State Police and, if so the date 
    thereof. 
    _Y e s__ Aug 2014
    Note: This application will remain incomplete and will not be 
    considered until question #12 can be answered in the 
    affirmative.

13. Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application 
    or already furnished it to the Village? 
    _A l r e a d y F u i n i s h e d_

14. If the applicant does not own the premises for which the license is sought, does the applicant 
    have a lease for the full period for which the license is to be issued? 
    _Y e s_
    If the answer is in the affirmative, attach a copy of said lease to the application.

15. State whether the applicant has ever been convicted of a felony offense under any Federal or 
    State law? 
    _N O_

16. State whether the applicant has ever been convicted of a violation of any Federal or State law 
    concerning the manufacture, possession or sale of alcoholic liquor? 
    _N O_

17. State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to 
    the applicant, the premises, or to any corporation in which the applicant holds 5% or more 
    Stock? 
    _N O_
    If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be 
    covered by this applicant?

18. Is the premises within 100 feet of any real property of any church, school, hospital, home for 
    the aged or indigent persons or for veterans, their wives or children, or any military or naval station? 
    _N O_

19. Are the premises for which license is herein applied for a store or other place of business where 
    the majority of customers are minors of school age or where the principal business transacted 
    consists of school books, school supplies, food, lunches or drinks for such minors? 
    _N O_
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license? 

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith? 

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated? 

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission? 

On the attached addendum for Entertainment, please list and briefly describe any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.

SIGNATURE OF APPLICANT (S)
CORPORATION SIGNATURES
Pres. ____________________
Sec. ____________________
INDIVIDUAL OR PARTNERSHIP SIGNATURES

STATE OF ____________________ )
County of ____________________ ) SS

The undersigned swears that all statements are true and correct.

______________________________________________

CORPORATE SEAL

Subscribed and sworn to before me this ______ day of __________________, ____________.

______________________________________________

Notary Public
Western Surety Company

CONTINUATION CERTIFICATE

Western Surety Company hereby continues in force Bond No. 61892709 briefly described as LIQUOR VILLAGE OF HAMPSHIRE

for SA-TA INCORPORATED DBA: THE ROSE GARDEN FAMILY RESTAURANT

in the sum of $ ONE THOUSAND FIVE HUNDRED AND NO/100 Dollars, for the term beginning December 19, 2017, and ending December 19, 2018, subject to all the covenants and conditions of the original bond referred to above.

This continuation is issued upon the express condition that the liability of Western Surety Company under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed the total sum above written.

Dated this 16 day of November, 2017.

WESTERN SURETY COMPANY

By ____________________________
Paul T. Brunat, Vice President

THIS “Continuation Certificate” MUST BE FILED WITH THE ABOVE BOND.
CERTIFICATE OF LIABILITY INSURANCE

This Certificate is issued as a matter of information only and confers no rights upon the certificate holder. The certificate does not affect, modify, extend, or alter the coverage afforded by the policies below. This certificate of insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder.

Important: The certificate holder has an additional insured on the policy. The policyholder must notify the certificate holder of any changes to the policy or the certificate holder.

Certificate Numbers: 3877005

Revision Number: 11/18/2017

Producer: Wayne Insurance Agency Inc.
3118650 Army Trail Road
Wayne, IL 60164

Insured: S. L. Ta Incorporated
The Rose Garden Family Restaurant
199 S. State St
PO Box 608
Hampshire IL 60140

Certificate Holder: Village of Hampshire
254 S State St
Hampshire IL 60140

Reinsurance
Insurer(s):
- Liberty Mutual Insurance Company
- 20845

Contribution Costs
- For Claims
- For Other Costs

Commencement Date: 11/18/2017
Expiration Date: 11/18/2018

Limit of Liability
- Each Occurrence
- Policy Limit
- Claims Made

Proof of Insurance

Cancellation

Authorized Representative:

John W. Jones

ACORD 25 (2016-03)

The ACORD name and logo are registered marks of ACORD.

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Lease and Sale of Personal Property

This agreement (Agreement or lease) made and entered into 1st day of April, 2003 by between Dan Ramadani whose address is 199 South State St, P.O. Box 271 Hampshire, Illinois, hereinafter referred to as "Landlord" and Jeton Azizi of 1216 Ridgway, Elgin, Illinois, 60123, as the tenant.

1. Description of Premises. Landlord leases to tenant and tenant leases from landlord the premises located at 199 South State St, Hampshire, Illinois, 60140. (First floor only). Landlord sells to tenant and tenant purchases from landlord all the equipment, furniture, fixtures, and appliances therein (collectively, personal property). The terms of the sale of the personal property shall be listed on page 6. The list of personal properties is on the attached exhibit A.

2. Term. The term of the lease is 5 years, with possession and rent to commence April 1st 2003 and to end March 31st 2008. Rent is due on the 1st of each month. At the mutual agreement of both the landlord and tenant, this lease shall have the option of renewal of three (3) additional five (5) year terms with rental increases as shown on the attached lease payment schedule (exhibit B). Written notice by the tenant must be presented to the Landlord not less than ninety (90) days prior to the expiration of each lease term.

3. Quiet Enjoyment. Landlord covenants, warrants and represents that upon the commencement of the lease term, Landlord has full right and power to execute and perform this lease, and to grant estate demises herein, and that tenant, upon payment of the rent herein reserved performance of the covenants and easements, covenants, and privileges belonging or in any way appertaining thereof, during the term of this lease.

4. Rent. The base initial monthly rent (base rent) for said premises shall be Two Thousand Five Hundred dollars (2500) and shall be subject to automatic adjustments as provided herein and in exhibit B. Rent is due on the 1st of each month.

5. Use of Premises. The premises shall be used for the restaurant business and in no event for any purpose will endanger the property, or surrounding properties, including environmentally sensitive uses, i.e. contaminants, storage, sale use etc.
with a written consent of landlord which consent shall not be unreasonably withheld, provided that
the remaining balance due to landlord for personal property is paid in full. The new tenant will be
responsible for half of property taxes and half of building insurance before such assignment or
sublease.

16. Entire Agreement. This lease contains all the agreements between the parties hereto and may
not be modified in any manner other than by agreement in writing signed by all the parties hereto
or their successors in interest. The lease may not be changed or terminated orally. The terms and
conditions contained herein shall inure to the benefit and be binding upon landlord and tenant and
their respective successors and assigns, except as may be otherwise expressly provided in the
lease. In WITNESS, the parties have executed and delivered this lease as of the date first written
above.

Landlord:

Dan Ramadani  April 1, 2003

Dan Ramadani  Date

Tenant:

Jetson Azizi  April 1, 2003

Jetson Azizi  Date
APPLICATION FOR ALCOHOLIC LIQUOR

DATE: Oct 12, 2012

NAME OF BUSINESS: Minihan's

SALES TAX ID: 4265-3126

NAME OF APPLICANT: Thomas J. Minihan & Michael R. Minihan

ADDRESS OF BUSINESS: 1000 State St, Hampshire, IL 60140

BUSINESS PHONE NO.: 1-815-494-5446

MAILING ADDRESS: 6342 Columbia Blv, Rockford, IL 61108

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter III, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

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<td>$1,500.00</td>
</tr>
<tr>
<td>Class G</td>
<td>$ 75.00</td>
</tr>
<tr>
<td>Class H</td>
<td>$ 500.00</td>
</tr>
<tr>
<td>Class I</td>
<td>$ 500.00</td>
</tr>
</tbody>
</table>

2. License Period:

Commencing on January 1, 2015 and ending December 31, 2015 or
Commencing on ______________ and ending December 31, ____________

3. Type of Business Entity (check one):

☐ Individual
☐ Corporation
☐ Partnership
☐ Other (specify)
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Thomas J. Minnihan
BIRTHDAY: 10-9-1958
HOME ADDRESS: 6342 Columbine Blvd. Unit 1106
DRIVERS LICENSE# M550 93655288 HOME PHONE# 7815 494 5448
BUSINESS STATUS: Owner
PERCENTAGE OF STOCK HELD: 50%

Name: Michael K. Minnihan
BIRTHDAY: 10-28-1991
HOME ADDRESS: 6342 Columbine Blvd. Unit 1106
DRIVERS LICENSE# M550 55691183 HOME PHONE# 1815 558 4827
BUSINESS STATUS: Owner Manager
PERCENTAGE OF STOCK HELD: 50%

If additional space is required, please attach a separate sheet of paper

5. Is the applicant a citizen of the United States? [ ] Yes [ ] No

If naturalized, state date and place of naturalization:

If an Illinois corporation, state date of corporation:

If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act:

6. State the character of the applicant’s business, and in case of a corporation, the objects for which it was formed.

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location.

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. [ ] Yes [ ] No

If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued.
9. Has the applicant ever had any previous liquor license revoked?  
   NO (Reason: 
   If answer is in the affirmative, state the date and reason for such revocation.

10. Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?  
   YES (Date: 
   Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.

11. State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.  
   Thomas Minnabarrie Yes - To explain Gaming Permit 2015  
   Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.

12. State the name of the person who will generally be managing the ongoing affairs of this business at these premises.  
   Thomas J. Minnabarrie  
   State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof.  
   Yes 2015 For Gaming Permit  
   Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.

13. Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?  
   (NOT as of yet) Badger Mutual Ins.

14. If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued?  
   YES (Reason: 
   If the answer is in the affirmative, attach a copy of said lease to the application.

15. State whether the applicant has ever been convicted of a felony offense under any Federal or State law?  
   NO

16. State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?  
   NO

17. State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?  
   YES RQ 49 W-MAIN Street Cover 11-2013  
   If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?  
   YES

18. Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?  
   NO

19. Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?  
   NO
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license? Yes

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith? Yes

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated? Yes

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission? Yes

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk. TV's - Gamming - Solo Gospel Music.

SIGNATURE OF APPLICANT (S)  

CORPORATION SIGNATURES

Pres.  

Sec.  

INDIVIDUAL OR PARTNERSHIP SIGNATURES

STATE OF ) Illinois ) SS

County of )  

The undersigned swears that all statements are true and correct.

CORPORATE SEAL

Subscribed and sworn to before me this  

12th day of OCT, 2017.

"OFFICIAL SEAL"

M. BRANDES
Notary Public, State of Illinois
My Commission Expires 06/10/19
LICENSE AND PERMIT BOND

KNOW ALL PERSONS BY THESE PRESENTS:

That we, Minnihan’s Inc DBA Minnihan’s Sports Bar of Hampshire, State of Illinois, as Principal, and WESTERN SURETY COMPANY, a corporation duly licensed to do surety business in the State of Illinois, as Surety, are held and firmly bound unto the Village of Hampshire, State of Illinois, as Obligee, in the penal sum of One Thousand Five Hundred and 00/100 DOLLARS ($1,500.00), lawful money of the United States, to be paid to the Obligee, for which payment well and truly to be made, we bind ourselves and our legal representatives, firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH, That whereas, the Principal has been licensed Sports Bar Village of Hampshire

NOW THEREFORE, if the Principal shall faithfully perform the duties and in all things comply with the laws and ordinances, including all amendments thereto, pertaining to the license or permit applied for, then this obligation to be void, otherwise to remain in full force and effect until December 1st, 2018, unless renewed by Continuation Certificate.

This bond may be terminated at any time by the Surety upon sending notice in writing, by First Class U.S. Mail, to the Obligee and to the Principal at the address last known to the Surety, and at the expiration of thirty-five (35) days from the mailing of said notice, this bond shall ipso facto terminate and the Surety shall thereupon be relieved from any liability for any acts or omissions of the Principal subsequent to said date. Regardless of the number of years this bond shall continue in force, the number of claims made against this bond, and the number of premiums which shall be payable or paid, the Surety’s total limit of liability shall not be cumulative from year to year or period to period, and in no event shall the Surety’s total liability for all claims exceed the amount set forth above. Any revision of the bond amount shall not be cumulative.

Dated this 4th day of December, 2017.

Principal

By

Paul T. Breffle, Vice President
POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:


Paul T. Bruflat of Sioux Falls, State of South Dakota, its regularly elected Vice President, as Attorney-in-Fact, with full power and authority hereby conferred upon him to sign, execute, acknowledge and deliver for and on its behalf as Surety and as its act and deed, the following bond:

One Sports Bar Village of Hampshire

bond with bond number 6340715

for Minnihan's Inc DBA Minnihan's Sports Bar as Principal in the penalty amount not to exceed: $1,500.00.

Western Surety Company further certifies that the following is a true and exact copy of Section 7 of the by-laws of Western Surety Company duly adopted and now in force, to wit:

Section 7. All bonds, policies, undertakings, Powers of Attorney, or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys-in-Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile.

In Witness Whereof, the said WESTERN SURETY COMPANY has caused these presents to be executed by its Vice President with the corporate seal affixed this 4th day of December, 2017.

ATTEST

L. Nelson, Assistant Secretary

WESTERN SURETY COMPANY

By Paul T. Bruflat, Vice President

STATE OF SOUTH DAKOTA
COUNTY OF MINNEHAHA

On this 4th day of December, 2017, before me, a Notary Public, personally appeared
Paul T. Bruflat and L. Nelson
who, being by me duly sworn, acknowledged that they signed the above Power of Attorney as Vice President and Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged said instrument to be the voluntary act and deed of said Corporation.

J. Mohr
Notary Public

My Commission Expires June 23, 2021

To validate bond authenticity, go to www.cnasurety.com > Owner/Obligee Services > Validate Bond Coverage.
CERTIFICATE OF LIABILITY INSURANCE

PRODUCER
Broadmoor Agency
321 W. State St.
Suite 1000
Rockford, IL 61101

INSURED
TMM/Minihans Inc d/b/a Minihans' Sports Pub
1000 S State Street
Hamphire, IL 61140

Coverages

<table>
<thead>
<tr>
<th>Type of Insurance</th>
<th>Policy Number</th>
<th>Limits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial General Liability</td>
<td>00763541</td>
<td>1,000,000</td>
</tr>
<tr>
<td>Commercial General Liability</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Auto Mobile Liability</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Umbrella Liability</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Workers' Compensation and Employer's Liability</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Liquor Liability</td>
<td>00763541</td>
<td>1,000,000</td>
</tr>
</tbody>
</table>

Important:

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights upon the certificate holder in lieu of such endorsements.

Certificate Holder

Village of Hampshire
234 S State St
Hamphire, IL 61140

Cancellation

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

Authorized Representative

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APPLICATION FOR ALCOHOLIC LIQUOR

DATE: 12/26/2017

NAME OF BUSINESS: T-Ricks LTD dba/Posatis

NAME OF APPLICANT: Anthony Patti

ADDRESS OF BUSINESS: 826 Centennial Dr, Hampshire

BUSINESS PHONE NO.: 847 683 1111

MAILING ADDRESS: 826 Centennial Dr, Hampshire, IL 60140

TO: Local Liquor Control Commission
Village of Hampshire, Illinois

Pursuant to the provisions of Chapter IIIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:

1. License Class and Annual Fee (check one):

   - Class A-1 - $1,500.00
   - Class A-2 - $1,250.00
   - Class B-1 - $1,500.00
   - Class B-2 - $1,500.00
   - Class C-1 - $1,500.00
   - Class C-2 - $1,500.00
   - Class C-3 - $1,750.00
   - Class C-4 - $1,500.00
   - Class D - $1,750.00
   - Class E - $1,750.00
   - Class F - $1,500.00
   - Class G - $75.00
   - Class H - $500.00
   - Class I - $500.00

2. License Period:

   Commencing on January 1, 2018 and ending December 31, 2018
   Commencing on __________ and ending December 31, __________

3. Type of Business Entity (check one):

   - [ ] Individual
   - [X] Corporation
   - [ ] Partnership
   - [ ] Other (specify)
4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

   NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Anthony Patte / Barbara Patte

BIRTHDAY: 08/10/1949 / 01/26/1952

HOME ADDRESS: 28052 W Niagara St

DRIVERS LICENSE#: Q300 0184 9277

HOME PHONE#: 815-728-4575

BUSINESS STATUS: Owner / Manager

PERCENTAGE OF STOCK HELD: 25% / 25%

Name: Richard Giclee / Marianna Giclee

BIRTHDAY: 04/11/1959 / 07/22/1959

HOME ADDRESS: 1511 West Chicago Parkway

DRIVERS LICENSE#: G240-7129-9104

HOME PHONE#: 847-958-0496

BUSINESS STATUS: Owner / Manager

PERCENTAGE OF STOCK HELD: 25% / 25%

5. Is the applicant a citizen of the United States? YES

   If naturalized, state date and place of naturalization:

   If an Illinois corporation, state date of corporation:

   If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act:

6. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. PIZZA RESTAURANT, TAKE OUT / DELIVERY

7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. EIGHT COUNTER SERVICE KITCHEN, ITALIAN FOOD AND PIZZA, TAKE OUT / DELIVERY

8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. YES

   If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued. VILLAGE OF LAKEWOOD, STATE OF ILLINOIS, 285 S. W. 160th Street, Lakewood, IL 60512

   (If additional space is required, please attach a separate sheet of paper)
9. Has the applicant ever had any previous liquor license revoked? **NO**
   If answer is in the affirmative, state the date and reason for such revocation.

10. Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business? **YES**

11. State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.
   **ALL OWNERS FINGERPRINTED 11/26/2016**
   Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.

12. State the name of the person who will generally be managing the ongoing affairs of this business at these premises.
   State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof. **YES, ACCURATE BIOMETRICS 11/26/2016**
   Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.

13. Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village? **YES**

14. If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? **YES**
   if the answer is in the affirmative, attach a copy of said lease to the application.

15. State whether the applicant has ever been convicted of a felony offense under any Federal or State law? **NO**

16. State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor? **NO**

17. State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock? **NO**
   If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?

18. Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station? **NO**

19. Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors? **NO**
20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license?  

21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith?  

22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated?  

23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission?  

On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.

SIGNATURE OF APPLICANT(S)  
CORPORATION SIGNATURES  
Principal: [Signature]  
Secretary: [Signature]  

INDIVIDUAL OR PARTNERSHIP SIGNATURES  

STATE OF Illinois  
COUNTY OF Lake  

The undersigned swears that all statements are true and correct.

CORPORATE SEAL  
Subscribed and sworn to before me this 24th day of November, 2017.

Notary Public
**COMMON DECLARATIONS**

**POLICY NUMBER**: 12 XH6108-05

**COMPANY CODE**: 0000-BL6K-IL

**CUSTOMER BILLING ACCOUNT**: 021-141-46711

**INSURED**: TRICKS LTD

**DBA**: ROSATIS PIZZA OF HAMPShIRE

**Mailing Address**: 826 CENTENNIAL DR

**City, State**: HAMPShIRE IL 60140-8352

**POLICY PERIOD**: FROM 08/02/2016 TO 08/02/2017

12:01 A.M. Standard Time at your mailing address shown above.

**FORM OF BUSINESS**: CORPORATION

**Business Description**: PIZZA RESTAURANT

Payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy, consists of the following coverage parts for which a premium is indicated, this premium may be subject to adjustment.

<table>
<thead>
<tr>
<th>LIQUOR LIABILITY COVERAGE PART</th>
<th>PREMIUM</th>
<th>TOTAL PREMIUM</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$573.00</td>
<td>$573.00</td>
</tr>
</tbody>
</table>

Endorsements applying to all coverage parts and made part of this policy at time of issue:

00 00 00 05 93

**Atlas Code**: 00593

**Agent**: MARTY WALSH

**Mailing Address**: 790 W BARTLETT RD

**City, State**: BARTLETT IL 60103-4482

**Entry Date**: 08/23/2016

**Branch**: 3YF

**Page**: 01

**Entry Date**: 08/23/2016

**Stock No.**: 05975
KNOW ALL MEN BY THESE PRESENTS:


Paul T. Bruflat of State of South Dakota, its regularly elected Vice President, as Attorney-in-Fact, with full power and authority hereby conferred upon him to sign, execute, acknowledge and deliver for and on its behalf as Surety and as its act and deed, the following bond:

One LIQUOR LICENSE VILLAGE OF HAMPSHIRE

bond with bond number 62893474

for T RICKS LTD DBA ROSATI'S PIZZA OF HAMPSHIRE

as Principal in the penalty amount not to exceed: $1,500.00

Western Surety Company further certifies that the following is a true and exact copy of Section 7 of the by-laws of Western Surety Company duly adopted and now in force, to wit:

Section 7. All bonds, policies, undertakings, Powers of Attorney, or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys-in-Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the Corporation. The signature of any such officer and the corporate seal may be printed by facsimile.

In Witness Whereof, the said WESTERN SURETY COMPANY has caused these presents to be executed by its Vice President with the corporate seal affixed this 10 day of July 2017.

ATTEST

L. Nelson, Assistant Secretary

WESTERN SURETY COMPANY

By

Paul T. Bruflat, Vice President

STATE OF SOUTH DAKOTA

COUNTY OF MINNEHAHA

On this 10 day of July 2017, before me, a Notary Public, personally appeared

Paul T. Bruflat

and

L. Nelson

who, being by me duly sworn, acknowledged that they signed the above Power of Attorney as Vice President and Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged said instrument to be the voluntary act and deed of said Corporation.

J. MOHR

NOTARY PUBLIC

My Commission Expires June 23, 2021

To validate bond authenticity, go to www.cnasurety.com > Owner/Obligee Services > Validate Bond Coverage.

Form F1975-1-2016
Western Surety Company

CONTINUATION CERTIFICATE

Western Surety Company hereby continues in force Bond No. 62893474 briefly described as LIQUOR LICENSE VILLAGE OF HAMP shIRE

for TRICKS LTD DBA ROSATI’S PIZZA OF HAMP shIRE

in the sum of $ ONE THOUSAND FIVE HUNDRED AND NO/100 Dollars, for the term beginning August 26, 2017, and ending August 26, 2018, subject to all the covenants and conditions of the original bond referred to above.

This continuation is issued upon the express condition that the liability of Western Surety Company under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed the total sum above written.

Dated this 10 day of July, 2017.

WESTERN SURETY COMPANY

By Paul T. Bruniat, Vice President

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.