## $\frac{\text{CEREAL MALT BEVERAGE LICENSE}}{\text{CHECKLIST}}$

Name of Busin	ess: Lake Aftor	Store			
Address:	25313 W. 39 <sup>th</sup> St. S.				
<del>2</del>	Godda	rd, KS 67052			
					RECEIVED
SHERIFF:	Background C	heck:	Yes X No _		OCT 3 0 2017
	Fingerprint & Photograph:		Yes X No _	_	
					Sedgwick Co. Clerk
FEE PAID:	Yes_X_	No			
WAS RENEWAL OR APPLICATION FILED PRIOR TO NOV. 1ST:					
	Yes X	No			
IS PERSON 21 YEARS OLD OR OLDER:					
	Yes_X_	No			
COPY SENT TO TOWNSHIP CLERK BY REG. MAIL:					
	Yes_X_	No			
ZONING APP	ROVAL:				
	Yes_X_	No			
FINANCE APPROVAL: NA					
	Yes	No			
LEGAL APPR	OVAL:				
	Yes _	No			음
	VLP			DATE COMP	LETED: 16/30/17
	Ves_ VLP (0-26-	11			