



BOARD OF COUNTY COMMISSIONERS

MICHAEL ARZY • CHRISTI HASWELL • HOLLY JENNINGS • NICK SIDDLE • LONNIE WRIGHT

Regular Board Meeting Agenda
Sheridan County Courthouse Addition
224 S. Main St, Second Floor Board Room, #220
Tuesday, April 1, 2025, 9:00 a.m.

1. Call to Order and Pledge.
2. Consent Agenda:
 - a. 03-17-2025 Staff Meeting Draft Minutes;
 - b. 03-18-2025 Regular Meeting Draft Minutes;
 - c. 03-20-2025 Special Meeting Draft Minutes;
 - d. 03-24-2025 Staff Meeting Draft Minutes;
 - e. County Warrants, March;
 - f. Airport Warrants, March;
 - g. Presented to Board for acknowledgement – Treasurer Monthly Statement of Fees for February 2025;
 - h. Presented to Board for acknowledgement – Election Monthly Statement of Fees for February 2025;
 - i. Presented to Board for acknowledgement – Election Corrected Monthly Statement of Fees for January 2025;
 - j. Presented to Board for acknowledgement – County Clerk Monthly Statement of Fees for February 2025;
 - k. Ratify Sheridan County License Agreement #2502LA with RANGE, for bored crossing installation of fiber optic at County Road #42 a.k.a. Ulm Road, fee exempt;
 - l. Ratify Sheridan County License Agreement #2503LA with RANGE, for plowed and bored installation of fiber optic at County Road #161 a.k.a. Dutch Creek Road, fee exempt;
 - m. Ratify Sheridan County License Agreement #2504LA with RANGE, for bored crossing installation of fiber optic at County Road #161 a.k.a. Dutch Creek Road, fee exempt;
 - n. Ratify Sheridan County License Agreement #2505LA with RANGE, for bored crossing installation of fiber optic at County Road #161 a.k.a. Dutch Creek Road, fee exempt.
3. Consider Agenda
4. Announcements.
5. Public Comments on Matters not on the Agenda.
6. Consider 2025/26 Retail Liquor License Renewals for the following Guest Ranches:
Eaton Brothers Inc. dba Eatons Ranch & Blair Hotels Inc. dba The Ranch at Ucross.
7. Consider 2025/26 Restaurant Liquor License Renewal for Big Horn Merc Pizza LLC
dba Big Horn Mercantile.
8. Consider 4/1/2025 through 5/31/2025 New Restaurant Liquor License for Nola
Sheridan LLC dba Nola Catering and Private Dining.
9. Consider 2025/26 Retail Liquor License Renewals for the following:

- Albatraoz LLC dba Last Chance Bar
 - Arrowhead Lodge LLC dba Arrowhead Lodge
 - Arvada Bar LLC dba Arvada Bar
 - Big Horn Equestrian Center Inc. dba Big Horn Equestrian Center
 - Big Horn Y LLC dba Big Horn Y
 - Cody Mefford LLC dba Wyarno Bar & Grill
 - Craig Properties LLC dba Everett's Tunnel Inn
 - Elk View Inn Wyoming LLC dba Elk View Inn
 - Livery Stable LLC dba Just Ledoux it Saloon & Steak Out
 - LodgeOps LLC dba Bear Lodge Resort
 - Melanie Thomas Klier dba Leiter
 - Patrick L. Green dba My Buddy's Place
 - Paul McNeil dba Wagon Box Lodge
 - Powder Horn Ranch LLC dba The Powder Horn Golf Club
 - Story's Old Firehall Store LLC dba Story Store
 - The Barn in Big Horn LLC dba The Barn in Big Horn
 - The New Museum at the Bradford Brinton Ranch dba The Brinton Museum
 - Twisted Woods LLC dba Parkman Bar & Grill
10. Consider resolution 25-04-007 creating the Sheridan County Semiquincentennial Committee.
 11. Consider Amendment #1 to Lease Agreement between the Sheridan County Sportsmen's Association and Sheridan County.
 12. Consider Specialized Aviation Service Operator Use Agreement between Sheridan County and Gardner-Lowe Aviation Services, LLC.
 13. Consider Lessor's Consent to Sublease between Sheridan Pilots 307, LLC and Gardner-Lowe Aviation Services, LLC.
 14. Consider Rules & Regulations Governing Self-Fueling of Aircraft at the County Airport.
 15. Consider Vacation of a public right-of-way for Elm Avenue, adjacent to Lot 1 of Block 66 and Lots 10 Thru 13 of Block 67, 16th St. Adjacent to Lot 13 of Block 67 and Lot 10 of Block 68 and Lot 1 of Block 66 and Lot 9 of Block 65, Intersection of Elm Avenue and 16th St., Alley adjacent to Lots 8 & 9, and Portion of Lot 10 of Block 65, McKenzie Avenue, adjacent to Lots 1 thru 4 of Block 62 and adjacent to Lots 10 thru 15 of Block 65, McKenzie Avenue, adjacent to Lot 1 of Block 63 and Lots 4 thru 6 of Block 64 of Downers Addition to the City of Sheridan, Wyoming,
 16. Consider Amendment One to the Public Health Preparedness contract between the Wyoming Department of Health, Public Health Division and Sheridan County.

ADJOURN

Sheridan County Board of County Commissioners, Staff Meeting Minutes
County Courthouse, 224 S. Main Street, 2nd Floor Board Room, #220
Monday, March 17, 2025, 9:00 a.m.

Commissioners Present: Mike Arzy, Holly Jennings, Nick Siddle, Lonnie Wright (Chair).

Commissioners Not Present: Christi Haswell.

County Clerk Present: Eda Schunk Thompson.

Elected Present:

Katie Araas, County Treasurer;
Dianna Bennett, County Attorney;
Dr. Robert Byrd, County Coroner;
Levi Dominguez, County Sheriff.

Staff Present:

Rowdy Branson, Road and Bridge Superintendent;
Kenny Custis, Human Resources Manager;
Cameron Duff, Administrative Director;
Misti Dunkelberger, County Clerk Administrative Coordinator;
Robert Gill, Airport Manager;
Kimberly Hein, Chief Deputy County Clerk;
Kelly Iott, Administrative Coordinator;
Ken Muller, County Engineer;
Sarah Myers, Deputy County Clerk;
Deb Ottema, County Clerk Financial Coordinator;
Mark Reid, County Planner;
Kimber Solberg, Fairgrounds Director;

Call to Order: Chairman Wright called the meeting to order at 9:00 a.m.

Mid-Month Warrant Review for March 1 through March 14, 2025:

The Board reviewed the Mid-Month Interims prepared by Misti Dunkelberger, County Clerk Administrative Coordinator. Commissioner Siddle, Commissioner Jennings and Commissioner Arzy had questions.

Chairman Wright invited Andre Wei to speak about the Boy Scouts Citizenship in the Community badge he is working towards.

Elected and Staff Reports and Topics Discussed:

Mark Reid, County Planner.

Mr. Reid noted that the county's construction numbers are currently around 70% of the levels during 2021-2022. He also highlighted the importance of the city's draft transportation plan, which affects the county's subdivision regulations conformity with municipal street plans, noting he and Ken Muller, County Engineer are on the steering committee reviewing the proposed future street network around Sheridan.

Mr. Arzy proposed to build a new storage building on the county fairgrounds to consolidate various county records and equipment currently stored in rented facilities. The Board discussed the potential benefits, costs, security considerations, and the next steps in evaluating the proposal.

Board Updates:

Commissioner Siddle wished everyone a Happy St. Patrick's Day and asked Levi Dominguez, County Sheriff, on the status of opening up Red Grade Road. Mr. Dominguez is monitoring the conditions and wants to ensure it's safe and won't need to be closed again shortly after opening.

Adjourn: Chairman Wright adjourned the meeting at 10:06 a.m.

BOARD OF COUNTY COMMISSIONERS
Sheridan County, Wyoming

Attest:

Lonnie Wright, Chairman

Eda Schunk Thompson, County Clerk

**Sheridan County Board of County Commissioners, Regular Meeting Minutes
County Courthouse, 224 S. Main Street, 2nd Floor Board Room, #220
Tuesday, March 18, 2025, 9:00 a.m.**

Commissioners Present: Mike Arzy, Holly Jennings, Nick Siddle, Lonnie Wright (Chair).

Commissioners Not Present: Christi Haswell.

Chief Deputy Clerk Present: Kimberly Hein.

Elected Present:

Katie Araas, County Treasurer;

Dianna Bennett, County Attorney.

Staff Present:

Scott Chandler, , Sheridan County Public Works/Planning Code Enforcement Officer;

Cameron Duff, Administrative Director;

Misti Dunkelberger, County Clerk Administrative Coordinator;

Andrea Hauber, Planning Assistant;

Kelly Iott, Administrative Coordinator;

Kimberly Lodovici, Assessor Property Appraiser;

Deb Ottema, County Clerk Financial Coordinator;

Mark Reid, County Planner;

Nicki Rosier, Planning Administrative Assistant;

Kimber Solberg, Fairgrounds Director.

Call to Order: Chairman Wright called the meeting to order at 9:00 a.m.
Pledge of Allegiance.

Consider Consent Agenda.

Following are the consent items:

- a. 02-27-2025 Special Meeting Draft Minutes;
- b. 03-03-2025 Staff Meeting Draft Minutes;
- c. 03-04-2025 Regular Meeting Draft Minutes;
- d. 03-10-2025 Staff Meeting Draft Minutes;
- e. 03-11-2025 Airport Meeting Draft Minutes;
- f. Presented to the Board for acknowledgement - Sheriff Monthly Statement of Fees for February 2025;
- g. Presented to the Board for acknowledgement – Clerk of District Court Monthly Statement of Fees for February 2025;
- h. Presented to the Board for acknowledgement – Airport Monthly Statement of Fees for February 2025;
- i. Presented to the Board for acknowledgement – County Planner Monthly Statement of Fees for February 2025;
- j. Ratify 24-hour Catering Permit for Albatraoz LLC, March 17, 2025, for St. Patrick Brunch, 6 N. Piney Rd., Story WY;

- k. Ratify Escrow Agreement for Deed and Memorandum and Notice of Escrow Agreement for Deed between the City of Sheridan, County of Sheridan and Habitat for Humanity of the Eastern Bighorns, LLC.

Consider Consent Agenda.

Motion by Commissioner Siddle to approve the consent agenda and authorize the Chairman to signed documents as required.

Vote Motion Passed.

Consider Agenda.

Motion by Commissioner Jennings to approve the agenda as published.

Vote Motion Passed.

Announcements:

Commissioner Jennings reported there will be an opening on the Park & Recreation Board due to a resignation. The Board recognized James S. Chandler, Sheridan County Public Works/Planning Code Enforcement Officer for 10 years of service.

Public Comments on Matters not on the Agenda:

Peter Clark, Ranchester Mayor thanked Jesse Ludikhuize, Emergency Management Coordinator and Road & Bridge crew for delivering sandbags to the town of Ranchester.

Consider Resolution 25-03-005: Depositories for Public Funds.

Katie Araas, County Treasurer.

Ms. Araas presented the annual financial resolution for five institutions as pursuant to Wyoming State Statute and requested the adoption of Resolution 25-03-005.

Motion by Commissioner Siddle to adopt and authorize the Chairman to sign Resolution 25-03-005, designating the following financial institutions as approved for the deposit of County funds: First Federal Bank & Trust; First Interstate Bank; First Northern Bank of Wyoming; Security State Bank; and Wells Fargo Bank, National Association.

Vote Motion Passed.

Consider Option 2 payment options in exchange for a perpetual easement of American Tower Site #4710808 Lease Extension.

Kimber Solberg, Fairgrounds Director.

Ms. Solberg and the Fair Board wanted to present the options to the BOCC for consideration since the contract ultimately falls under their jurisdiction, indicating a preference for upfront funding while acknowledging the obligations that come with it. Cameron Duff, Administrative Coordinator highlighted the potential long-term implications of choosing a one-time pay versus a renewable lease. Commissioner Jennings and Siddle expressed concerns about locking the county into a long-term lease, favoring

the option that allows for future lease negotiations and the possibility of expanding revenue.

Motion by Commissioner Jennings to approve and authorize the Chairman to sign documents for option one of payment options in exchange for a perpetual easement of American Tower Site #4710808.

Vote Motion Passed.

Consider approval of proposed sign-up sheet for taking public comment on specific agenda items during Board meetings.

Commissioner Jennings requested the word “please” to the 3rd bullet point.

Motion by Commissioner Siddle to approve the proposed sign-up sheet for taking public comment on specific agenda items during Board meetings.

Amendment to Motion by Commissioner Jennings to add the word “please” to the 3rd bullet point.

Amendment to Motion Vote Motion Passed.

Motion as Amended Vote Motion Passed.

Consider Amendment #1 to Lease Agreement between the Sheridan County Sportsmen’s Association and Sheridan County.

Troy Siddle, Sheridan County Resident.

Mr. Siddle expressed concern over the potential leasing of public property to a private organization, arguing that such a move could restrict public access and rights, undermining the broader use of the land for activities like hunting, horseback riding, and general recreation.

Mark Kaiser, Sheridan County Resident.

Mr. Kaiser passionately advocates for preserving public land access for hunting and recreation in Wyoming, emphasizing the growing issue of restricted access due to private land leasing and the impact this has on hunters and conservation funding. From his extensive experience in the hunting industry and active community involvement he highlighted the importance of this property as a vital corridor for wildlife and a crucial resource for new and young hunters.

Commissioner Jennings acknowledged the importance of the concerns raised by Mr. Siddle and Mr. Kaiser regarding public land access and expressed appreciation for their input.

Motion by Commissioner Siddle to table until next regularly scheduled meeting when the Sportsman Association can present their proposal.

Vote Motion Passed.

Adjourn: Chairman Wright adjourned the meeting at 9:28 a.m.

BOARD OF COUNTY COMMISSIONERS
Sheridan County, Wyoming

Attest:

Lonnie Wright, Chairman

Eda Schunk Thompson, County Clerk

Sheridan County Board of County Commissioners, Special Meeting Minutes
County Courthouse, 224 S. Main Street, 2nd Floor Board Room, #220
Thursday, March 20, 2025, 10:00 a.m.

Commissioners Present: Mike Arzy, Holly Jennings, Nick Siddle, Lonnie Wright (Chair).

Commissioners Not Present: Christi Haswell.

County Clerk Present: Eda Schunk Thompson.

Elected Present:

Katie Araas, County Treasurer;

Staff Present:

Clint Beaver, Deputy County Attorney;

Kenny Custis, Human Resources Manager;

Cameron Duff, Administrative Director;

Misti Dunkelberger, County Clerk Administrative Coordinator;

Bonnie Formisano, Airport Office Manager;

Robert Gill, Airport Manager;

Kimberly Hein, Chief Deputy County Clerk;

Ken Muller, County Engineer;

Deb Ottema, County Clerk Financial Coordinator.

Call to Order: Chairman Wright called the meeting to order at 9:00 a.m.

PMCH Audit Report/Department Work Session.

Erin Graham, CPA and Alexandra Wilkinson CPA, CFF, CFE.

Alexandra Wilkinson and Erin Graham presented the results of the audit of Sheridan County's financial statements and compliance audit for the fiscal year ending June 30, 2024. The auditors issued an unmodified opinion on the financial statements and the single audit report, indicating the financial statements are fairly presented in accordance with U.S. GAAP and identified the following findings.

Material audit adjustments were required across various areas, including accounts payable, accounts receivable, and fixed assets, due to issues with the preparation of the financial statements. A lack of review and segregation of duties over certain transactions, such as payroll. Issues with the preparation and reporting of the schedule of federal expenditures, particularly related to the Coronavirus State and Local Fiscal Recover Funds (SLFRF) program.

Public Comment per Sign-in Sheet: Vickie Taylor asked questions about who files the Sheridan County Department of Audit (DOA) report and whether the 22-23 FY Report of Internal Control issue caused a fine, a return of money, or nothing. The auditors stated that Sheridan County files their own report with the DOA. Mr. Duff reported that the 22-23 FY Report of Internal issue was resolved without any fines or return of monies.

Adjourn: Chairman Wright adjourned the meeting at 11:01 a.m.

BOARD OF COUNTY COMMISSIONERS
Sheridan County, Wyoming

Attest:

Lonnie Wright, Chairman

Eda Schunk Thompson, County Clerk

Sheridan County Board of County Commissioners, Staff Meeting Minutes
County Courthouse, 224 S. Main Street, 2nd Floor Board Room, #220
Monday, March 24, 2025, 9:00 a.m.

Commissioners Present: Mike Arzy, Christi Haswell, Holly Jennings, Nick Siddle, Lonnie Wright (Chair).

County Clerk Present: Eda Schunk Thompson.

Elected Present:

Katie Araas, County Treasurer;
 Levi Dominguez, Sheriff.

Staff Present:

Clint Beaver, Deputy County Attorney;
 Kenny Custis, Human Resources Manager;
 Cameron Duff, Administrative Director;
 Erik Gillett, Building/Grounds Superintendent;
 Robert Gill, Airport Manager;
 Kelly Iott, Administrative Coordinator;
 Kimberly Hein, Chief Deputy County Clerk;
 Ken Muller, County Engineer;
 Deb Ottema, County Clerk Financial Coordinator.
 Mark Reid, County Planner;
 Kimber Solberg, Fairgrounds Director;

Call to Order: Chairman Wright called the meeting to order at 9:00 a.m.

Staff/Elected Reports.

Mark Reid, County Planner.

Mr. Reid discussed a permit issue in Downer's Edition that is being corrected and that next week's Planning and Zoning Agenda is large.

Robert Gill, Airport Manager.

Mr. Gill is working out an extended lease plan with FedEx for a few more months after their current lease expires in April. Mr. Gill received two proposals in response to the RFP for a self-serve operator for the self-fueling station at the airport, one from Big Horn Airways and one from Sheridan Pilot 307, both which are currently being reviewed.

Cameron Duff, Administrative Director.

Mr. Duff would like to open the GPET 25-26 FY (1% Optional Sales & Use Tax) applications on April 1st and close on April 30th. While the revenue stream is not quite known yet, the process of requests could start. Ms. Jennings offered the idea that these GPET monies could be used for essential services like to make the Fire Districts "whole" knowing their revenue stream will be reduced by 20-25%. Mr. Arzy offered that he felt the same way about Road & Bridge if there are any extra monies. Ms. Haswell agreed with the comments of Jennings and Arzy and added that it is good to see all the requests. Mr. Duff updated the Board on the Reimbursement monies for the Elk and Remington fires of approximately \$411,000 for Elk Fire and \$125,000 for Remington Fire.

Board Updates:

Ms. Jennings will be out next Tuesday after the Board meeting. Ms. Jennings asked for an update on the opening of Red Grade Road. Sheriff Dominguez updated the Board that the new amended resolution allows a bit of leeway between himself and Road & Bridge crew and the County Engineer, but that most likely Red Grade Road will not be passable by April 1st this year due to the snow. The Sheriff will make sure to get that messaging out to the public and to keep in touch with Road & Bridge.

Mr. Siddle will be out Wednesday through Friday this week. Mr. Siddle asked the Board to consider having County Engineer, Mr. Muller, provide a list of appraisers that the Board could pick from for the upcoming Penrose Lane agenda item in May. The Board and Mr. Muller agreed.

Public Comment per Sign-in Sheet: None

Adjourn: Chairman Wright adjourned the meeting at 9:10 a.m.

BOARD OF COUNTY COMMISSIONERS
Sheridan County, Wyoming

Attest:

Lonnie Wright, Chairman

Eda Schunk Thompson, County Clerk

2.9

Step #2 – County Clerk



Sheridan County

W.S. 18-3-814
MONTHLY STATEMENT

Statement of the collections by Kabe Araas as
Name of Elected or Appointed County Official
County Treasurer for the County of Sheridan,
Title
State of Wyoming for the month ending Feb 28, 20 25, filed with the
County Clerk for presentation to the Board of County Commissioners.

See attached documents.

I hereby certify that the above is true and correct statement of the monies collected by me and that the same has been paid to the County Treasurer.

This 13 day of Mar, 20 25

Kabe Araas
Sheridan County Elected or Appointed County Official

REPORT OF Collection of Monies

Name of Elected or Appointed County Official John Crass

AS

Title (barrh) - Treasurer

For the month of Feb, 2025

[illegible]

File **Recorder**
Sheridan Co.

44725

EDASCH, JAMES P. SON, CLERK
Thomas DeLune DEPUTY
 County Clerk Financial Administrator

and a knowledge by the Director (currently

17th

March 25

Chairman

Sheridan County

Trial Balance - On Demand Report

GENERAL - 1000

REVENUE

1000.000.40100.0100.000 / GENERAL CO CHECKING ACCOUNT INTEREST EARNED	(\$316,546.97)	\$183.78	(\$43,632.67)	(\$359,995.86)
1000.000.41005.0100.000 / REAL PROPERTY TAX VETRANS EXEMPTION	(\$47,539.84)	\$0.00	\$0.00	(\$47,539.84)
1000.000.41006.0100.000 / MOTOR VEHICLE VETRANS EXEMPTION	(\$30,541.28)	\$0.00	\$0.00	(\$30,541.28)
1000.000.41007.0100.000 / MOTOR VEHICLE FEES(COUNTY AUTO/CO F	(\$980,352.76)	\$0.00	(\$113,233.99)	(\$1,093,586.75)
1000.000.41009.0100.000 / PRO-RATE COUNTY AUTO CARRIERS (STAT	(\$25,815.78)	\$0.00	\$0.00	(\$25,815.78)
1000.000.41010.0000.000 / GENERAL REAL PROPERTY TAXES	(\$5,925,024.76)	\$0.00	(\$46,457.36)	(\$5,971,482.12)
1000.000.41020.0000.000 / GENERAL PERSONAL PROPERTY TAXES	(\$175,788.26)	\$0.00	(\$738.02)	(\$176,526.28)
1000.000.41021.0000.000 / GENERAL MOBILE HOME PROPERTY TAXES	(\$16,750.83)	\$0.00	(\$425.50)	(\$17,176.33)
1000.000.41500.0100.000 / RENTAL CAR SURCHARGE FROM STATE	(\$18,313.90)	\$0.00	\$0.00	(\$18,313.90)
1000.000.41501.0100.000 / SALES TAX (STATE MUNICIPALITIES TAX	(\$2,408,824.09)	\$0.00	(\$373,134.37)	(\$2,781,958.46)
1000.000.41502.0100.000 / 5% SALES TAX (USE TAX REIMBURSED FR	(\$89,218.22)	\$0.00	(\$13,707.68)	(\$102,925.90)
1000.000.41503.0300.000 / GASOLINE TAX (COUNTY ROAD)	(\$239,089.90)	\$0.00	(\$26,877.77)	(\$265,967.67)
1000.000.41504.0300.000 / GAS TAX SPECIAL (FUEL TAX-DIESEL)	(\$388,696.28)	\$0.00	(\$42,948.17)	(\$431,644.45)
1000.000.41506.0100.000 / CIGARETTE TAX	(\$1,369.67)	\$0.00	(\$170.05)	(\$1,539.72)
1000.000.41507.0100.000 / SEVERENCE TAX	(\$263,523.67)	\$0.00	\$0.00	(\$263,523.67)
1000.000.41508.0100.000 / DIRECT DISTRIBUTION-STATE	(\$1,638,080.68)	\$0.00	\$0.00	(\$1,638,080.68)
1000.000.41511.0100.000 / PARI-MUTUEL EVENT REVENUE	(\$339,173.07)	\$0.00	(\$358,954.15)	(\$698,127.22)
1000.000.41512.0100.000 / WYOMING LOTTERY REVENUE	(\$39,664.67)	\$0.00	\$0.00	(\$39,664.67)
1000.000.41514.0100.000 / SKILLED BASED GAMING REVENUE	(\$30,763.79)	\$0.00	(\$34,366.26)	(\$65,130.05)
1000.000.42000.0100.000 / LIQUOR LICENSE & MALT BEVERAGE PERM	(\$1,050.00)	\$0.00	\$0.00	(\$1,050.00)
1000.000.42001.0100.000 / MARRIAGE LICENSE	(\$5,100.00)	\$0.00	(\$300.00)	(\$5,400.00)
1000.000.42003.0100.000 / COPIES & ELECTIONS	(\$2,902.06)	\$0.00	(\$1,836.20)	(\$4,738.26)
1000.000.42005.0100.000 / SHERIDAN COUNTY-MOBILE MACH	(\$1,267.60)	\$0.00	\$0.00	(\$1,267.60)
1000.000.42100.0100.000 / ENGINEERING UTILITY LICENSES (R.O.W	(\$31,439.25)	\$0.00	\$0.00	(\$31,439.25)
1000.000.42101.0100.000 / PLANNING - REZONE	(\$600.00)	\$0.00	\$0.00	(\$600.00)
1000.000.42103.0100.000 / PLANNING ZONING PERMITS	(\$10,350.00)	\$0.00	(\$750.00)	(\$11,100.00)
1000.000.42104.0100.000 / PLANNING BUILDING PERMITS	(\$171,931.37)	\$0.00	(\$300.00)	(\$172,231.37)
1000.000.42105.0100.000 / PLANNING SEPTIC PERMITS	(\$16,000.00)	\$0.00	(\$1,500.00)	(\$17,500.00)
1000.000.42107.0100.000 / PLANNING ZONING AMENDMENTS	(\$300.00)	\$0.00	\$0.00	(\$300.00)
1000.000.42109.0100.000 / PLANNING VARIANCE	(\$1,900.00)	\$0.00	\$0.00	(\$1,900.00)
1000.000.42112.0100.000 / PLANNING FINAL PLAT SUBDIVISION PER	(\$700.00)	\$0.00	\$0.00	(\$700.00)
1000.000.43002.0100.000 / VEHICLE SALES TAX PENALTY	(\$35,623.88)	\$0.00	(\$10,181.81)	(\$45,805.69)
1000.000.43003.0100.000 / VIOLATION SAFETY & HEALTH (OSHA FIN	(\$12,664.00)	\$0.00	(\$1,902.00)	(\$14,566.00)
1000.000.43100.0100.000 / RENT - COUNTY FACILITIES	(\$35,374.10)	\$0.00	(\$4,926.01)	(\$40,300.11)
1000.000.43200.0100.000 / WY STAR INTEREST GENERAL COUNTY	(\$8,947.90)	\$0.00	(\$889.11)	(\$9,837.01)
1000.000.43202.0000.000 / GENERAL DELINQ TAX INTEREST & PENALTY	(\$152,867.76)	\$0.00	(\$16,823.11)	(\$169,690.87)
1000.000.43204.0100.000 / WY CLASS GENERAL COUNTY INTEREST	(\$12,641.00)	\$250.00	(\$1,620.00)	(\$14,011.00)
1000.000.44000.0100.000 / COUNTY CLERK VIN INSPECTIONS FEES	(\$113,800.00)	\$0.00	(\$13,575.00)	(\$127,375.00)
1000.000.44001.0100.000 / COUNTY CLERK CERTIFICATES OF TITLE	(\$42,739.00)	\$0.00	(\$5,264.00)	(\$48,003.00)
1000.000.44002.0100.000 / COUNTY CLERK FILING FEES	(\$108,090.78)	\$0.00	(\$12,510.38)	(\$120,601.16)
1000.000.44003.0100.000 / COUNTY CLERK RECORDING FEES	\$0.00	\$0.00	(\$7,053.61)	(\$7,053.61)
1000.000.44004.0100.000 / ELECTION EXPENSE REIM SD#1	\$0.00	\$0.00		

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

GENERAL - 1000

REVENUE

	1000	000	44005	0100	000 / ELECTION EXPENSE REIM SD#2	\$0.00	(9,404.82)	\$0.00	\$9,404.82
	1000	000	44006	0100	000 / ELECTION EXPENSE REIM SD#3	\$0.00	(\$4,702.41)	\$0.00	(\$4,702.41)
	1000	000	44007	0100	000 / ELECTION EXPENSE REIM NORTHERN WY C	(\$4,702.41)	\$0.00	\$0.00	(\$4,702.41)
	1000	000	44008	0100	000 / ELECTION EXPENSE REIM - RANCHESTER	(\$18,803.07)	\$0.00	\$0.00	(\$18,803.07)
	1000	000	44009	0100	000 / ELECTION EXPENSE REIM - DAYTON	\$0.00	\$0.00	\$0.00	\$0.00
	1000	000	44010	0100	000 / ELECTION EXPENSE REIM - CITY OF SHE	\$0.00	(\$12,988.76)	\$0.00	(\$12,988.76)
	1000	000	44011	.0000	000 / ELECTION EXPENSE REIM- OTHER	\$0.00	(\$55,663.31)	\$0.00	(\$55,663.31)
	1000	000	44203	0100	000 / COMMISSION ON TAX COLLECTED FOR ST	(\$3,184.87)	\$0.00	(\$3,526.81)	\$6,711.68
	1000	000	44204	0100	000 / CERT OF REDEMPTION (CR)/CERT OF PUR	(\$11,919.85)	\$0.00	(\$293.55)	(\$12,213.40)
	1000	000	44300	0200	000 / CDC CIVIL FEES	(\$1,040.00)	\$0.00	(\$20.00)	(\$1,060.00)
	1000	000	44301	0200	000 / CDC PROBATE FEES	(\$26,780.00)	\$0.00	(\$4,270.00)	(\$31,050.00)
	1000	000	44302	0200	000 / CDC JURY FEES	(\$10,485.00)	\$0.00	(\$2,130.00)	(\$12,615.00)
	1000	000	44303	.0200	000 / CDC CERTIFICATES & SEALS	(\$400.00)	\$0.00	(\$50.00)	(\$450.00)
	1000	000	44305	0200	000 / CDC MISCELLANEOUS FEES	(\$39.50)	\$0.00	(\$1.00)	(\$40.50)
	1000	000	44308	0200	000 / CDC JUV CT REIMBURSED FEES	(\$7,266.19)	\$0.00	(\$825.82)	(\$8,092.01)
	1000	000	44400	0200	000 / SPLIT SENTENCING/WORK RELEASE	(\$104.00)	\$0.00	(\$20.00)	(\$124.00)
	1000	000	44402	0200	000 / SHERIFF/JAIL CONTRACT SERVICE REIMBURSEMENT	(\$128,917.81)	\$0.00	(\$2,629.00)	(\$131,546.81)
	1000	000	44403	0200	000 / SHERIFFS SERVICE CIVIL PROCESS FEE	(\$4,036.00)	\$0.00	\$0.00	(\$4,036.00)
	1000	000	44405	0200	000 / SHERIFF ID/FINGERPRINTS/CNPS	(\$15,500.00)	\$0.00	(\$2,550.00)	(\$18,050.00)
	1000	000	44406	0200	000 / SHERIFF MISCELLANEOUS FEES	(\$1,826.25)	\$0.00	(\$365.00)	(\$2,191.25)
	1000	000	44408	0200	000 / SHERIFF INMATE PHONE REIMBURSEMENT	(\$106,890.12)	\$0.00	(\$61,954.97)	(\$168,845.09)
	1000	000	44411	0100	000 / LGIP & WARM INS REIMBURSEMENT	(\$34,312.14)	\$0.00	(\$4,062.08)	(\$38,374.22)
	1000	000	44413	0200	000 / WEEKEND INMATE PAY TO STAY	(\$1,780.50)	\$0.00	\$0.00	(\$1,780.50)
	1000	000	44417	0200	000 / PLANNING MISCELLANEOUS	(\$2,307.25)	\$0.00	(\$538.50)	(\$2,845.75)
	1000	000	44600	.0400	000 / CH AIDS PROGRAM & FEES	(\$8,072.19)	\$0.00	(\$3,009.60)	(\$11,081.79)
	1000	000	44603	0400	000 / CH STATE REIMBURSEMENT(ILT101)	(\$17,880.00)	\$0.00	(\$1,920.00)	(\$19,800.00)
	1000	000	44606	0400	000 / PUBLIC HEALTH IMMUNIZATIONS	(\$124,701.68)	\$0.00	(\$9,736.57)	(\$134,438.25)
	1000	000	44609	0400	000 / CH MISC DONATIONS FOR SERV	(\$20.00)	\$0.00	\$0.00	(\$20.00)
	1000	000	47001	0300	000 / ROAD & BRIDGE SALE OF EQUIPMENT	(\$300.00)	\$0.00	\$0.00	(\$300.00)
	1000	000	47006	0200	000 / INMATE COMMISSARY INCOME	\$0.00	(\$300.11)	\$0.00	(\$300.11)
	1000	000	48001	0100	000 / SAWS REIMBURSEMENT STAFF CO EMPLOYEE	(\$120,848.68)	\$0.00	\$0.00	(\$120,848.68)
	1000	000	48010	0100	000 / POSTAGE	(\$10,131.42)	\$0.00	(\$3,865.00)	(\$13,996.42)
	1000	000	48026	0100	000 / LOCAL GOVERNMENT REIMBURSEMENT REV	(\$215,083.88)	\$0.00	(\$1,369.11)	(\$216,452.99)
	1000	000	48806	0100	000 / NATIONAL OPIOIDS SETTLEMENT REVENUE	(\$264,700.46)	\$0.00	\$0.00	(\$264,700.46)
	1000	300	48800	0400	000 / WIC PROGRAM (STATE)	(\$32,363.14)	\$0.00	\$0.00	(\$32,363.14)
	1000	301	40100	0100	000 / 1 CENT OPTIONAL SALES TAX INTEREST EARNED	(\$24,257.30)	\$0.00	(\$3,171.86)	(\$27,429.16)
	1000	301	41901	0100	000 / 1 CENT OPTIONAL SALES TAX	(\$1,775,544.66)	\$0.00	(\$274,371.99)	(\$2,049,91

Sheridan County

Trial Balance - On Demand Report

GENERAL - 1000

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

	Opening Balance	Debits	Credits	Ending Balance
REVENUE				
1000 637 48803.0200.402 / HS 22-DOT-SHC-HMP5 GRANT REVENUE	\$0.00	\$0.00	(\$5,500.00)	(\$5,500.00)
1000 637 48803.0200.424 / HS 23-EMPG-SHE-GCF23 GRANT REVENUE	(\$4,425.78)	\$0.00	\$0.00	(\$4,425.78)
1000 637 48803.0200.436 / EMERGENCY MGT COMMUNITY GRANT	(\$15,897.28)	\$0.00	\$0.00	(\$15,897.28)
1000 637 48803.0200.961 / HS 20-EMPG-SHE-GCF20 GRANT REVENUE	(\$43,965.22)	\$0.00	\$0.00	(\$43,965.22)
1000 637 48803.0200.963 / HS 20-SHSP-SHE-HCP20 ELECTION SECURITY GRANT REV	(\$5,500.00)	\$0.00	\$0.00	(\$5,500.00)
1000 637 48803.0300.430 / WYDOT-CMAQ FY 23-24	(\$188,705.00)	\$0.00	\$0.00	(\$188,705.00)
1000 637 48803.0400.401 / DFS-TANF/CPI OCT 22 TO SEPT 23 GRANT REV	(\$35,169.47)	\$0.00	(\$1,835.94)	(\$37,005.41)
1000 637 48803.0400.432 / AAA CAR SEAT GRANT	(\$184.00)	\$0.00	\$0.00	(\$184.00)
1000 637 48803.0400.729 / CSBG TRIPARTITE CFDA #93.569 GRANT REV	(\$194,260.92)	\$0.00	(\$27,704.85)	(\$221,965.77)
1000 637 48803.0400.914 / PH-RYAN WHITE PROGRAM-HIV GRANT REV	(\$11,160.00)	\$0.00	(\$2,430.00)	(\$13,590.00)
1000 637 48803.0400.915 / PH-COUNTY HEALTH OFFICER GRANT REV	(\$5,000.00)	\$0.00	(\$2,500.00)	(\$7,500.00)
1000 637 48803.0400.978 / WDH COVID TESTING & SURVEILLANCE GRANT REV	(\$13,576.63)	\$0.00	\$0.00	(\$13,576.63)
1000 637 48803.0400.991 / PH EMER PREP (PHEP) GRANT REV-BASE	(\$45,429.90)	\$0.00	(\$7,349.75)	(\$52,779.65)
1000 637 48803.0400.993 / WDH-FY 23-24 COUNTY PREVENTION PROGRAM REV	(\$94,168.80)	\$0.00	(\$11,743.26)	(\$105,912.06)
1000 637 48803.0600.941 / ST FORESTRY 19-11020000-055 STORY FUELS REDUCTION	(\$3,279.67)	\$0.00	\$0.00	(\$3,279.67)
1000 637 48803.0600.970 / STATE PARKS-HISTORIC PRESERVATION GRANT REV	(\$3,504.00)	\$0.00	\$0.00	(\$3,504.00)
1000 638 40100.0200.000 / ENHANCED EMERGENCY 911 INTEREST EARNED	(\$544.30)	\$0.00	(\$85.49)	(\$629.79)
1000 638 41900.0200.000 / ENHANCED EMERGENCY 911 TAX	(\$258,766.27)	\$0.00	(\$8,994.82)	(\$267,761.09)
REVENUE TOTAL	(\$17,726,514.65)	\$433.78	(\$1,673,198.04)	(\$19,399,278.91)
GENERAL	(\$17,726,514.65)	\$433.78	(\$1,673,198.04)	(\$19,399,278.91)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$17,726,514.65)	\$433.78	(\$1,673,198.04)	(\$19,399,278.91)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund is Out of Balance				
General Ledger Total:	(\$17,726,514.65)	\$433.78	(\$1,673,198.04)	(\$19,399,278.91)

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025 From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

STATE FOUNDATION - 2202

REVENUE

2202 000.40200.0000 000 / STATE FOUNDATION MOTOR VEHICLE					
2202 000.41005.0100 000 / STATE FOUNDATION-REAL PROP TAX VET EXEMPT					
2202 000.41006.0100 000 / STATE FOUNDATION-MV VT EXEMPT					
2202 000.41009.0100 000 / STATE FOUNDATION- PRO RATE CO AUTO					
2202 000.41010.0000 000 / STATE FOUNDATION GEN REAL PROPERTY TAX					
2202 000.41021.0000 000 / MOBILE HOME PROPERTY TAX					
2202 000.42005.0100 000 / STATE FOUNDATION-MOBILE MACH					
2202 000.43202.0000 000 / STATE FOUNDATION DELIQUENT TAX PENALTY & INTEREST					
REVENUE TOTAL					

STATE FOUNDATION

Fund Totals:

Asset Totals:					
Liability Totals:					
Fund Balance Totals:					
Revenue Totals:					
Expenditure Totals:					
Transfers In Totals:					
Transfers Out Totals:					
General Ledger Total:					

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025
CITY OF SHERIDAN - 2301

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

REVENUE

2301.000.40200.0000.000 / CITY OF SHERIDAN MOTOR VEHICLE
2301.000.41005.0100.000 / CITY OF SHERIDAN-REAL PROP TAX VET EXEMPT
2301.000.41006.0100.000 / CITY OF SHERIDAN-MV VT EXEMPT
2301.000.41009.0100.000 / CITY OF SHERIDAN- PRO RATE CO AUTO
2301.000.41010.0000.000 / CITY OF SHERIDAN GEN REAL PROPERTY TAX
2301.000.41021.0000.000 / MOBILE HOME PROPERTY TAX
2301.000.42005.0100.000 / CITY OF SHERIDAN-MOBILE MACH
2301.000.43202.0000.000 / CITY OF SHERIDAN DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

CITY OF SHERIDAN

Fund Totals:

	Opening Balance	Debits	Credits	Ending Balance
Asset Totals:				
Liability Totals:				
Fund Balance Totals:				
Revenue Totals:				
Expenditure Totals:				
Transfers In Totals:				
Transfers Out Totals:				
General Ledger Total:				
	(\$347,552.40)	\$0.00	(\$38,590.68)	(\$386,143.08)
	(\$17,199.80)	\$0.00	\$0.00	(\$17,199.80)
	(\$11,601.87)	\$0.00	\$0.00	(\$11,601.87)
	(\$1,248.29)	\$0.00	\$0.00	(\$1,248.29)
	(\$1,793,734.39)	\$0.00	(\$14,181.17)	(\$1,807,915.56)
	(\$5,389.98)	\$0.00	(\$184.24)	(\$5,574.22)
	(\$61.29)	\$0.00	\$0.00	(\$61.29)
	(\$2,579.50)	\$0.00	(\$207.46)	(\$2,786.96)
	(\$2,179,367.52)	\$0.00	(\$53,163.55)	(\$2,232,531.07)
	(\$2,179,367.52)	\$0.00	(\$53,163.55)	(\$2,232,531.07)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$2,179,367.52)	\$0.00	(\$53,163.55)	(\$2,232,531.07)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund is Out of Balance				
General Ledger Total:	(\$2,179,367.52)	\$0.00	(\$53,163.55)	(\$2,232,531.07)

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

TOWN OF CLEARMONT - 2302

REVENUE

2302 000 40200 0000 000 / TOWN OF CLEARMONT MOTOR VEHICLE	(\$480.73)	\$0.00	(\$153.69)	(\$634.42)
2302 000 41005 0100 000 / TOWN OF CLEARMONT-REAL PROP TAX VET EXEMPT	(\$96.00)	\$0.00	\$0.00	(\$96.00)
2302 000 41006 0100 000 / TOWN OF CLEARMONT-MV VT EXEMPT	(\$17.64)	\$0.00	\$0.00	(\$17.64)
2302 000 41009 0100 000 / TOWN OF CLEARMONT-PRO RATE CO AUTO	(\$624.14)	\$0.00	\$0.00	(\$624.14)
2302 000 41010 0000 000 / TOWN OF CLEARMONT GEN REAL PROPERTY TAX	(\$6,427.91)	\$0.00	(\$86.54)	(\$6,514.45)
2302 000 41021 0000 000 / TOWN OF CLEARMONT MOBILE HOME PROPERTY TAX	(\$33.66)	\$0.00	\$0.00	(\$33.66)
2302 000 42005 0100 000 / TOWN OF CLEARMONT-MOBILE MACH	(\$30.65)	\$0.00	\$0.00	(\$30.65)
2302 000 43202 0000 000 / TOWN OF CLEARMONT DELINQUENT TAX PENALTY & INTEREST	(\$22.67)	\$0.00	(\$1.84)	(\$24.51)

REVENUE TOTAL

TOWN OF CLEARMONT

Fund Totals:

(\$7,733.40)	\$0.00	(\$242.07)	(\$7,975.47)
(\$7,733.40)	\$0.00	(\$242.07)	(\$7,975.47)

Fund is Out of Balance

Asset Totals:	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$7,733.40)	\$0.00	(\$7,975.47)
Expenditure Totals:	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$7,733.40)	\$0.00	(\$7,975.47)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

TOWN OF DAYTON - 2303

REVENUE

2303 000.40200.0000.000 / TOWN OF DAYTON MOTOR VEHICLE
2303 000.41005.0100.000 / TOWN OF DAYTON-REAL PROP TAX VET EXEMPT
2303 000.41006.0100.000 / TOWN OF DAYTON-MV VT EXEMPT
2303 000.41009.0100.000 / TOWN OF DAYTON-PRO RATE CO AUTO
2303 000.41010.0000.000 / TOWN OF DAYTON GEN REAL PROPERTY TAX
2303 000.41021.0000.000 / MOBILE HOME PROPERTY TAX
2303 000.42005.0100.000 / TOWN OF DAYTON-MOBILE MACHINE
2303 000.43202.0000.000 / TOWN OF DAYTON DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

TOWN OF DAYTON

Fund Totals:

Opening Balance	Debits	Credits	Ending Balance
(\$20,542.84)	\$0.00	(\$2,089.63)	(\$22,632.47)
(\$1,104.00)	\$0.00	\$0.00	(\$1,104.00)
(\$675.87)	\$0.00	\$0.00	(\$675.87)
(\$615.53)	\$0.00	\$0.00	(\$615.53)
(\$72,245.27)	\$0.00	(\$72.16)	(\$72,317.43)
(\$165.18)	\$0.00	\$0.00	(\$165.18)
(\$30.22)	\$0.00	\$0.00	(\$30.22)
(\$180.69)	\$0.00	(\$1.69)	(\$182.38)
(\$95,559.60)	\$0.00	(\$2,163.48)	(\$97,723.08)
(\$95,559.60)	\$0.00	(\$2,163.48)	(\$97,723.08)

Fund is Out of Balance

Asset Totals:	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$95,559.60)	\$0.00	(\$2,163.48)
Expenditure Totals:	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$95,559.60)	\$0.00	(\$2,163.48)
			(\$97,723.08)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

TOWN OF RANCHESTER - 2304

REVENUE

2304.000.40200.0000.000 / TOWN OF RANCHESTER MOTOR VEHICLE
 2304.000.41005.0100.000 / TOWN OF RANCHESTER-REAL PROP TAX VET EXEMPT
 2304.000.41006.0100.000 / TOWN OF RANCHESTER-MV VT EXEMPT
 2304.000.41009.0100.000 / TOWN OF RANCHESTER- PRO RATE COUNTY AUTO
 2304.000.41010.0000.000 / TOWN OF RANCHESTER GEN REAL PROPERTY TAX
 2304.000.41021.0000.000 / MOBILE HOME PROPERTY TAX
 2304.000.42005.0100.000 / TOWN OF RANCHESTER MOBILE MACHINE
 2304.000.43202.0000.000 / TOWN OF RANCHESTERDELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

TOWN OF RANCHESTER

Fund Totals:

Opening Balance	Debits	Credits	Ending Balance
(\$22,660.15)	\$0.00	(\$2,582.23)	(\$25,242.38)
(\$1,224.00)	\$0.00	\$0.00	(\$1,224.00)
(\$1,262.55)	\$0.00	\$0.00	(\$1,262.55)
(\$615.53)	\$0.00	\$0.00	(\$615.53)
(\$75,083.04)	\$0.00	(\$503.86)	(\$75,586.90)
(\$267.91)	\$0.00	(\$41.66)	(\$309.57)
(\$30.22)	\$0.00	\$0.00	(\$30.22)
(\$97.56)	\$0.00	(\$12.55)	(\$110.11)
(\$101,240.96)	\$0.00	(\$3,140.30)	(\$104,381.26)
(\$101,240.96)	\$0.00	(\$3,140.30)	(\$104,381.26)

Fund is Out of Balance

Asset Totals:	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$101,240.96)	\$0.00	(\$104,381.26)
Expenditure Totals:	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$101,240.96)	\$0.00	(\$104,381.26)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

BIG HORN FIRE DISTRICT - 2400

REVENUE

2400 000.40200.0000.000 / BIG HORN FIRE DISTRICT MOTOR VEHICLE
2400 000.41005.0100.000 / BIG HORN FIRE-REAL PROP TAX VET EXEMPT
2400 000.41006.0100.000 / BIG HORN FIRE-MV VT EXEMPT
2400 000.41009.0100.000 / BIG HORN FIRE DISTRICT- PRO RATE CO AUTO
2400 000.41010.0000.000 / BIG HORN FIRE GEN REAL PROPERTY TAX
2400 000.41021.0000.000 / MOBILE HOME PROPERTY TAX
2400 000.42005.0100.000 / BIG HORN FIRE DISTRICT-MOBILE MACH
2400 000.43202.0000.000 / BIG HORN FIRE DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

BIG HORN FIRE DISTRICT

Fund Totals:

Opening Balance	Debits	Credits	Ending Balance
(\$28,745.51)	\$0.00	(\$3,533.85)	(\$32,279.36)
(\$1,251.00)	\$0.00	\$0.00	(\$1,251.00)
(\$718.31)	\$0.00	\$0.00	(\$718.31)
(\$995.41)	\$0.00	\$0.00	(\$995.41)
(\$239,499.51)	\$0.00	(\$2,611.90)	(\$242,111.41)
(\$237.28)	\$0.00	(\$4.58)	(\$241.86)
(\$48.87)	\$0.00	\$0.00	(\$48.87)
(\$305.97)	\$0.00	(\$54.84)	(\$360.81)
(\$271,801.86)	\$0.00	(\$6,205.17)	(\$278,007.03)
(\$271,801.86)	\$0.00	(\$6,205.17)	(\$278,007.03)
Asset Totals:	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00
Revenue Totals:		(\$6,205.17)	(\$278,007.03)
Expenditure Totals:	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$271,801.86)	\$0.00	(\$278,007.03)

Fund Is Out of Balance

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

CLEARMONT FIRE DISTRICT - 2401

REVENUE

2401 000.40200.0000.000 / CLEARMONT FIRE DISTRICT MOTOR VEHIC
 2401 000.41005.0100.000 / CLEARMONT FIRE-REAL PROP TAX VET EXEMPT
 2401.000.41006.0100.000 / CLEARMONT FIRE-MV VT EXEMPT
 2401 000.41009.0100.000 / CLEARMONT FIRE DISTRICT- PRO RATE CO AUTO
 2401 000.41010.0000.000 / CLEARMONT FIRE GEN REAL PROPERTY TAX
 2401 000.41021.0000.000 / MOBILE HOME PROPERTY TAX
 2401 000.42005.0100.000 / CLEARMONT FIRE DISTRICT-MOBILE MACH
 2401 000.43202.0000.000 / CLEARMONT FIRE DELIQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

CLEARMONT FIRE DISTRICT

Fund Totals:

	(\$6,471.51)	\$0.00	(\$1,170.25)	(\$7,641.76)
	(\$263.03)	\$0.00	\$0.00	(\$263.03)
	(\$180.99)	\$0.00	\$0.00	(\$180.99)
	(\$503.30)	\$0.00	\$0.00	(\$503.30)
	(\$106,674.11)	\$0.00	(\$154.16)	(\$106,828.27)
	(\$311.24)	\$0.00	(\$3.51)	(\$314.75)
	(\$24.72)	\$0.00	\$0.00	(\$24.72)
	(\$30.28)	\$0.00	(\$0.12)	(\$30.40)
	(\$114,459.18)	\$0.00	(\$1,328.04)	(\$115,787.22)
	(\$114,459.18)	\$0.00	(\$1,328.04)	(\$115,787.22)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$114,459.18)	\$0.00	(\$1,328.04)	(\$115,787.22)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$114,459.18)	\$0.00	(\$1,328.04)	(\$115,787.22)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

DAYTON FIRE DISTRICT - 2402

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

REVENUE

2402.000.40200.0000.000 / DAYTON FIRE DISTRICT MOTOR VEHICLE
2402.000.41005.0100.000 / DAYTON FIRE-REAL PROP TAX VET EXEMPT
2402.000.41006.0100.000 / DAYTON FIRE-MV VT EXEMPT
2402.000.41009.0100.000 / DAYTON FIRE DISTRICT- PRO RATE CO AUTO
2402.000.41010.0000.000 / DAYTON FIRE GEN REAL PROPERTY TAX
2402.000.41021.0000.000 / MOBILE HOME PROPERTY TAX
2402.000.42005.0100.000 / DAYTON FIRE DISTRICT -MOBILE MACH
2402.000.43202.0000.000 / DAYTON FIRE DELIQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

DAYTON FIRE DISTRICT

Fund Totals:

Opening Balance	Debits	Credits	Ending Balance
(\$1,931.20)	\$0.00	(\$255.39)	(\$2,186.59)
(\$171.00)	\$0.00	\$0.00	(\$171.00)
(\$19.89)	\$0.00	\$0.00	(\$19.89)
(\$499.57)	\$0.00	\$0.00	(\$499.57)
(\$33,126.92)	\$0.00	(\$212.26)	(\$33,339.18)
(\$112.83)	\$0.00	(\$3.58)	(\$116.41)
(\$24.53)	\$0.00	\$0.00	(\$24.53)
(\$12.26)	\$0.00	(\$5.61)	(\$17.87)
(\$35,898.20)	\$0.00	(\$476.84)	(\$36,375.04)
(\$35,898.20)	\$0.00	(\$476.84)	(\$36,375.04)
Asset Totals:	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00
Revenue Totals:		(\$476.84)	(\$36,375.04)
Expenditure Totals:	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$35,898.20)	\$0.00	(\$36,375.04)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

STORY FIRE DISTRICT - 2403

REVENUE

2403.000.40200.0000.000 / STORY FIRE DISTRICT MOTOR VEHICLE
 2403.000.41005.0100.000 / STORY FIRE-REAL PROP TAX VET EXEMPT
 2403.000.41006.0100.000 / STORY FIRE-MV VT EXEMPT
 2403.000.41009.0100.000 / STORY FIRE DISTRICT- PRO RATE CO AUTO
 2403.000.41010.0000.000 / STORY FIRE GEN REAL PROPERTY TAX
 2403.000.41021.0000.000 / STORY FIRE DISTRICT MOBILE HOME PROPERTY TAX
 2403.000.42005.0100.000 / STORY FIRE DISTRICT-MOBILE MACH
 2403.000.43202.0000.000 / STORY FIRE DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

STORY FIRE DISTRICT

Fund Totals:

(\$98,575.14)

\$0.00

(\$2,057.83)

(\$100,632.97)

Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$98,575.14)	\$0.00	(\$2,057.83)	(\$100,632.97)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$98,575.14)	\$0.00	(\$2,057.83)	(\$100,632.97)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

TONGUE RIVER FIRE DISTRICT - 2404

REVENUE

2404 000.40200.0000.000 / TONGUE RIVER FIRE DISTRICT MOTOR VE
 2404 000.41005.0100.000 / TONGUE RIVER FIRE-REAL PROP TAX VET EXEMPT
 2404 000.41006.0100.000 / TONGUE RIVER FIRE-MV VT EXEMPT
 2404 000.41009.0100.000 / TONGUE RIVER FIRE DIST MOBILE MACHINE
 2404 000.41010.0000.000 / TONGUE RIVER FIRE GEN REAL PROPERTY TAX
 2404 000.41021.0000.000 / TONGUE RIVER FIRE DIST MOBILE HOME PROPERTY TAX
 2404 000.42005.0100.000 / TONGUE RIVER FIRE MOBILE MACHINE
 2404 000.43202.0000.000 / TONGUE RIVER FIRE DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

TONGUE RIVER FIRE DISTRICT

Fund Totals:

<u>Opening Balance</u>	<u>Debits</u>	<u>Credits</u>	<u>Ending Balance</u>
(\$4,184.20)	\$0.00	(\$649.91)	(\$4,834.11)
(\$234.00)	\$0.00	\$0.00	(\$234.00)
(\$87.27)	\$0.00	\$0.00	(\$87.27)
(\$499.57)	\$0.00	\$0.00	(\$499.57)
(\$49,909.54)	\$0.00	(\$365.00)	(\$50,274.54)
(\$159.76)	\$0.00	\$0.00	(\$159.76)
(\$24.53)	\$0.00	\$0.00	(\$24.53)
(\$137.42)	\$0.00	(\$13.46)	(\$150.88)
(\$55,236.29)	\$0.00	(\$1,028.37)	(\$56,264.66)
(\$55,236.29)	\$0.00	(\$1,028.37)	(\$56,264.66)
Asset Totals:	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$55,236.29)	\$0.00	(\$56,264.66)
Expenditure Totals:	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00
Fund is Out of Balance			
General Ledger Total:	(\$55,236.29)	\$0.00	(\$1,028.37)
			(\$56,264.66)

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

REDEMPTION FUND - 2405

REVENUE

2405.000.41600 0100.000 / REDEMPTION CP and/or CR FEE

REVENUE TOTAL

REDEMPTION FUND

Fund Totals:

	<u>Opening Balance</u>	<u>Debits</u>	<u>Credits</u>	<u>Ending Balance</u>
	(\$3,120.00)	\$0.00	(\$60.00)	(\$3,180.00)
	(\$3,120.00)	\$0.00	(\$60.00)	(\$3,180.00)
	(\$3,120.00)	\$0.00	(\$60.00)	(\$3,180.00)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$3,120.00)	\$0.00	(\$60.00)	(\$3,180.00)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$3,120.00)	\$0.00	(\$60.00)	(\$3,180.00)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

SHERIDAN AREA RURAL FIRE PROTECTION DISTRICT -
2406

REVENUE

2406 000 40200 0000.000 / SHERIDAN AREA RURAL FIRE PROTECT DIST MT VEH REV (\$42,863.72) \$0.00 (\$4,327.12) (\$47,190.84)
2406 000 41005 0100.000 / SHERIDAN AREA RURAL FIRE DIST RE PROP VET EX REV (\$1,962.00) \$0.00 \$0.00 (\$1,962.00)
2406 000 41006 0100.000 / SHERIDAN AREA RURAL FIRE DIST MV VET EX REV (\$911.82) \$0.00 \$0.00 (\$911.82)
2406 000 41009 0100.000 / SHERIDAN CO RURAL FIRE DIST MOBILE MACHINE (\$1,506.17) \$0.00 \$0.00 (\$1,506.17)
2406 000 41010 0000.000 / SHERIDAN AREA RURAL FIRE DIST GEN RE PROP TX REV (\$263,056.36) \$0.00 (\$1,875.61) (\$264,931.97)
2406 000 41021 0000.000 / SHERIDAN AREA RURAL FIRE DIST MOBILE HOME TX REV (\$904.36) \$0.00 (\$9.98) (\$914.34)
2406 000 42005 0100.000 / SHERIDAN CO RURAL FIRE DIST MOBIL MACHINE (\$73.97) \$0.00 \$0.00 (\$73.97)
2406 000 43202 0000.000 / SHERIDAN AREA RURAL FIRE DIST DEL TAX INT & PENALT (\$419.88) \$0.00 (\$45.41) (\$465.29)

REVENUE TOTAL

(\$311,698.28) \$0.00 (\$6,258.12) (\$317,956.40)

SHERIDAN AREA RURAL FIRE Fund Totals:
PROTECTION DISTRICT

(\$311,698.28) \$0.00 (\$6,258.12) (\$317,956.40)

Fund is Out of Balance

Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$311,698.28)	\$0.00	(\$6,258.12)	(\$317,956.40)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$311,698.28)	\$0.00	(\$6,258.12)	(\$317,956.40)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

SHERIDAN COLLEGE 4 MILLS - 2500

REVENUE

2500.000 40100 0000.000 / SHERIDAN COLLEGE INTEREST EARNED
 2500.000 40200 0000.000 / SHERIDAN COLLEGE MOTOR VEHICLE
 2500.000 41005 0100.000 / SHERIDAN COLLEGE-REAL PROP TAX VET EXEMPT
 2500.000 41006 0100.000 / SHERIDAN COLLEGE-MV VT EXEMPT
 2500.000 41009 0100.000 / SHERIDAN COLLEGE-PRO RATE CO AUTO
 2500.000 41010 0000.000 / SHERIDAN COLLEGE GEN REAL PROPERTY TAX
 2500.000 41021 0000.000 / MOBILE HOME PROPERTY TAX
 2500.000 42005 0100.000 / SHERIDAN COLLEGE 4 MILLS-MOBILE MACH
 2500.000 43202 0000.000 / SHERIDAN COLLEGE DELINQ TAX INTEREST & PEN

REVENUE TOTAL

SHERIDAN COLLEGE 4 MILLS

Fund Totals:

	Opening Balance	Debits	Credits	Ending Balance
Asset Totals:		\$0.00		
Liability Totals:		\$0.00		
Fund Balance Totals:		\$0.00		
Revenue Totals:	(\$2,402,525.46)	\$0.00		(\$2,402,525.46)
Expenditure Totals:	\$0.00	\$0.00		\$0.00
Transfers In Totals:	\$0.00	\$0.00		\$0.00
Transfers Out Totals:	\$0.00	\$0.00		\$0.00
General Ledger Total:	(\$2,402,525.46)	\$0.00	(\$53,920.34)	(\$2,456,445.80)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

SHERIDAN COLLEGE 1 MILL - 2501

REVENUE

2501 000 40100 0000 000 / SHERIDAN COLLEGE 1 MILL INTEREST EARNED
 2501 000 40200 0000 000 / SHERIDAN COLLEGE 1 MILL MOTOR VEHIC
 2501 000 41005 0100 000 / SHERIDAN COLLEGE 1 MILL-REAL PROP TAX VET EXEMPT
 2501 000 41006 0100 000 / SHERIDAN COLLEGE 1 MILL-MV VT EXEMPT
 2501 000 41009 0100 000 / SHERIDAN COLLEGE 1 MILL-PRO RATE CO AUTO
 2501 000 41010 0000 000 / SHERIDAN COLLEGE 1 MIL FIRE GEN REAL PROPERTY TAX
 2501 000 41021 0000 000 / MOBILE HOME PROPERTY TAX
 2501 000 42005 0100 000 / SHERIDAN COLLEGE 1 MILL-MOB MACHINE
 2501 000 43202 0000 000 / SHERIDAN COLLEGE 1 MIL DEL TAX PENALTY & INTEREST

REVENUE TOTAL

SHERIDAN COLLEGE 1 MILL

Fund Totals:

Asset Totals:	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$600,627.48)	(\$13,479.97)	(\$614,107.45)
Expenditure Totals:	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$600,627.48)	\$0.00	(\$614,107.45)

Opening Balance

Debits

Credits

Ending Balance

(\$61.70)	\$0.00	(\$1.38)	(\$63.08)
(\$81,695.99)	\$0.00	(\$9,436.17)	(\$91,132.16)
(\$3,961.66)	\$0.00	\$0.00	(\$3,961.66)
(\$2,545.12)	\$0.00	\$0.00	(\$2,545.12)
(\$2,151.29)	\$0.00	\$0.00	(\$2,151.29)
(\$507,964.65)	\$0.00	(\$3,932.88)	(\$511,897.53)
(\$1,395.63)	\$0.00	(\$35.44)	(\$1,431.07)
(\$105.66)	\$0.00	\$0.00	(\$105.66)
(\$745.78)	\$0.00	(\$74.10)	(\$819.88)
(\$600,627.48)	\$0.00	(\$13,479.97)	(\$614,107.45)

(\$600,627.48)	\$0.00	(\$13,479.97)	(\$614,107.45)
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Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

SHERIDAN COLLEGE BOCES .5 MILL - 2502

REVENUE

2502.000.40100.0000.000 / SHERIDAN COLLEGE BOCES .5 MILL INTEREST
 2502.000.40200.0000.000 / SHERIDAN COLLEGE BOCES .5 MILL MOTO
 2502.000.41005.0100.000 / SHERIDAN COLLEGE BOCES-REAL PROP TAX VET EXEMPT
 2502.000.41006.0100.000 / SHERIDAN COLLEGE BOCES-MV VT EXEMPT
 2502.000.41009.0100.000 / SHERIDAN COLLEGE BOCES-PRO RATE CO AUTO
 2502.000.41010.0000.000 / SHERIDAN COLLEGE BOCES-REAL PROPERTY TAX
 2502.000.41021.0000.000 / SHERIDAN COLLEGE BOCES MOBILE HOME TAX
 2502.000.42005.0100.000 / SHERIDAN COLLEGE BOCES .5 MILL-MOBILE MACH
 2502.000.43202.0000.000 / SHERIDAN COLLEGE BOCES DEL TAX PENALTY & INT

REVENUE TOTAL

SHERIDAN COLLEGE BOCES .5 MILL

Fund Totals:

	(\$30.86)	\$0.00	(\$0.69)	(\$31.55)
	(\$40,848.04)	\$0.00	(\$4,718.09)	(\$45,566.13)
	(\$1,980.83)	\$0.00	\$0.00	(\$1,980.83)
	(\$1,272.54)	\$0.00	\$0.00	(\$1,272.54)
	(\$1,075.63)	\$0.00	\$0.00	(\$1,075.63)
	(\$253,983.51)	\$0.00	(\$1,966.41)	(\$255,949.92)
	(\$698.18)	\$0.00	(\$17.76)	(\$715.94)
	(\$52.84)	\$0.00	\$0.00	(\$52.84)
	(\$373.05)	\$0.00	(\$37.06)	(\$410.11)
	(\$300,315.48)	\$0.00	(\$6,740.01)	(\$307,055.49)
	(\$300,315.48)	\$0.00	(\$6,740.01)	(\$307,055.49)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$300,315.48)	\$0.00	(\$6,740.01)	(\$307,055.49)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$300,315.48)	\$0.00	(\$6,740.01)	(\$307,055.49)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

SCHOOL DISTRICT #1 SPECIAL - 2503

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

REVENUE

2503 000.40100 0000.000 / SD#1 INTEREST EARNED
 2503 000.40200 0000.000 / SD#1 MOTOR VEHICLE
 2503 000.40300 0000.000 / SD#1 TAYLOR GRAZING
 2503 000.40600 0000.000 / SD#1 FINES & FORFEITURES
 2503 000.41005 0100.000 / SD #1 SPECIAL-REAL PROP TAX VET EXEMPT
 2503 000.41006 0100.000 / SC #1 SPECIAL-MV VT EXEMPT
 2503 000.41009 0100.000 / SD #1 SPECIAL-PRO RATE CO AUTO
 2503 000.41010 0000.000 / SD #1 SPECIAL GEN REAL PROPERTY TAX
 2503 000.41021 0000.000 / MOBILE HOME PROPERTY TAX
 2503 000.42005 0100.000 / SD #1 SPECIAL-MOBILE MACH
 2503 000.43202 0000.000 / SD #1 SPECIAL DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

SCHOOL DISTRICT #1 SPECIAL

Fund Totals:

	<u>Opening Balance</u>	<u>Debits</u>	<u>Credits</u>	<u>Ending Balance</u>
	(\$475.02)	\$0.00	(\$11.29)	(\$486.31)
	(\$420,914.31)	\$0.00	(\$51,380.71)	(\$472,295.02)
	(\$966.43)	\$0.00	\$0.00	(\$966.43)
	(\$107,620.18)	\$0.00	(\$7,258.83)	(\$114,879.01)
	(\$20,925.00)	\$0.00	\$0.00	(\$20,925.00)
	(\$13,482.08)	\$0.00	\$0.00	(\$13,482.08)
	(\$20,471.31)	\$0.00	\$0.00	(\$20,471.31)
	(\$3,147,572.67)	\$0.00	(\$30,559.21)	(\$3,178,131.88)
	(\$5,165.86)	\$0.00	(\$198.20)	(\$5,364.06)
	(\$1,005.14)	\$0.00	\$0.00	(\$1,005.14)
	(\$4,669.39)	\$0.00	(\$720.19)	(\$5,389.58)
	(\$3,743,267.39)	\$0.00	(\$90,128.43)	(\$3,833,395.82)
	(\$3,743,267.39)	\$0.00	(\$90,128.43)	(\$3,833,395.82)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$3,743,267.39)	\$0.00	(\$90,128.43)	(\$3,833,395.82)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$3,743,267.39)	\$0.00	(\$90,128.43)	(\$3,833,395.82)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

SCHOOL DISTRICT #1 6 MILL - 2505

REVENUE

2505 000 40200 0000 000 / SD#1 6 MILL MOTOR VEHICLE
2505 000 41005 0100 000 / SD #1 6 MILL-REAL PROP TAX VET EXEMPT
2505 000 41006 0100 000 / SD #1 6 MILL-MV VT EXEMPT
2505 000 41009 0100 000 / SD #1 6 MILL- PRO RATE CO AUTO
2505 000 41010 0000 000 / SD #1 6 MILL GEN REAL PROPERTY TAX
2505 000 41021 0000 000 / MOBILE HOME PROPERTY TAX
2505 000 42005 0100 000 / SD #1 6 MILL-MOBILE MACH
2505 000 43202 0000 000 / SD #1 6 MILL DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

SCHOOL DISTRICT #1 6 MILL

Fund Totals:

	Opening Balance	Debits	Credits	Ending Balance
Asset Totals:				
Liability Totals:				
Fund Balance Totals:				
Revenue Totals:				
Expenditure Totals:				
Transfers In Totals:				
Transfers Out Totals:				
General Ledger Total:				
	(\$119,640.79)	\$0.00	(\$13,842.85)	(\$133,483.64)
	(\$5,811.72)	\$0.00	\$0.00	(\$5,811.72)
	(\$3,733.66)	\$0.00	\$0.00	(\$3,733.66)
	(\$3,155.97)	\$0.00	\$0.00	(\$3,155.97)
	(\$745,087.17)	\$0.00	(\$5,768.81)	(\$750,855.98)
	(\$2,043.79)	\$0.00	(\$51.90)	(\$2,095.69)
	(\$154.92)	\$0.00	\$0.00	(\$154.92)
	(\$1,082.64)	\$0.00	(\$108.70)	(\$1,191.34)
	(\$880,710.66)	\$0.00	(\$19,772.26)	(\$900,482.92)
	(\$880,710.66)	\$0.00	(\$19,772.26)	(\$900,482.92)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$880,710.66)	\$0.00	(\$19,772.26)	(\$900,482.92)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$880,710.66)	\$0.00	(\$19,772.26)	(\$900,482.92)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

SCHOOL DISTRICT #1 RECREATION - 2506

REVENUE

2506.000.40200.0000.000 / SD#1 RECREATION MOTOR VEHICLE (\$16,836.53) \$0.00 (\$2,055.22) (\$18,891.75)
 2506.000.41005.0100.000 / SD #1 RECREATION-REAL PROP TAX VET EXEMPT (\$837.00) \$0.00 \$0.00 (\$837.00)
 2506.000.41006.0100.000 / SD #1 RECREATION-MV VT EXEMPT (\$539.27) \$0.00 \$0.00 (\$539.27)
 2506.000.41010.0000.000 / SD #1 RECREATION PRO RATE CO AUTO (\$818.84) \$0.00 \$0.00 (\$818.84)
 2506.000.41010.0000.000 / SD #1 RECREATION GEN REAL PROPERTY TAX (\$125,901.76) \$0.00 \$0.00 (\$1,222.35)
 2506.000.41021.0000.000 / MOBILE HOME PROPERTY TAX (\$206.56) \$0.00 \$0.00 (\$7.92)
 2506.000.42005.0100.000 / SD #1 RECREATION-MOBILE MACH (\$40.23) \$0.00 \$0.00 (\$40.23)
 2506.000.43202.0000.000 / SD #1 RECREATION DELINQUENT TAX PENALTY & INTEREST (\$186.77) \$0.00 (\$28.80) (\$215.57)
REVENUE TOTAL (\$145,366.96) \$0.00 (\$3,314.29) (\$148,681.25)

SCHOOL DISTRICT #1 RECREATION

Fund Totals:

(\$145,366.96) \$0.00 (\$3,314.29) (\$148,681.25)

Fund is Out of Balance

Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$145,366.96)	\$0.00	(\$3,314.29)	(\$148,681.25)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$145,366.96)	\$0.00	(\$3,314.29)	(\$148,681.25)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

SCHOOL DISTRICT #2 SPECIAL - 2507

REVENUE

2507 000 40100 0000 000 / SD #2 SPECIAL INTEREST EARNED
 2507 000 40200 0000 000 / SD #2 SPECIAL MOTOR VEHICLE
 2507 000 40300 0000 000 / SD #2 SPECIAL TAYLOR GRAZING
 2507 000 40600 0000 000 / SD #2 SPECIAL FINES & FORECLOSURES
 2507 000 41005 0100 000 / SD #2 SPECIAL-REAL PROP TAX VET EXEMPT
 2507 000 41006 0100 000 / SD #2 SPECIAL-MV VT EXEMPT
 2507 000 41009 0100 000 / SD #2 SPECIAL - PRO RATE CO AUTO
 2507 000 41010 0000 000 / SD #2 SPECIAL GEN REAL PROPERTY TAX
 2507 000 41021 0000 000 / MOBILE HOME PROPERTY TAX
 2507 000 42005 0100 000 / SD #2 SPECIAL-MOBILE MACH
 2507 000 43202 0000 000 / SD #2 SPECIAL DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

SCHOOL DISTRICT #2 SPECIAL

Fund Totals:

	Opening Balance	Debits	Credits	Ending Balance
Asset Totals:				
Liability Totals:				
Fund Balance Totals:				
Revenue Totals:				
Expenditure Totals:				
Transfers In Totals:				
Transfers Out Totals:				
General Ledger Total:				

Fund is Out of Balance

Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$11,215,171.86)	\$0.00	(\$269,324.34)	(\$11,484,496.22)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$11,215,171.86)	\$0.00	(\$269,324.34)	(\$11,484,496.22)

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

SCHOOL DISTRICT #2 RECREATION - 2508

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

REVENUE

2508 000 40200 0000 000 / SD#2 RECREATION MOTOR VEHICLE (\$64,079.53) (\$7,175.11) (\$71,254.64)
 2508 000 41005 0100 000 / SD #2 RECREATION-REAL PROP TAX VET EXEMPT (\$3,087.97) \$0.00 (\$3,087.97)
 2508 000 41006 0100 000 / SD #2 RECREATION-MV VT EXEMPT (\$1,957.09) \$0.00 (\$1,957.09)
 2508 000 41009 0100 000 / SD #2 RECREATION - PRO RATE CO AUTO (\$1,082.69) \$0.00 (\$1,082.69)
 2508 000 41010 0000 000 / SD #2 RECREATION GEN REAL PROPERTY TAX (\$363,437.98) \$0.00 (\$2,648.35) (\$366,086.33)
 2508 000 41021 0000 000 / MOBILE HOME PROPERTY TAX (\$1,111.88) \$0.00 (\$26.38) (\$1,138.26)
 2508 000 42005 0100 000 / SD #2 RECREATION-MOBILE MACH (\$53.17) \$0.00 (\$53.17)
 2508 000 43202 0000 000 / SD #2 RECREATION DELINQUENT TAX PENALTY & INTEREST (\$548.75) (\$4,499) (\$593.74)

REVENUE TOTAL

SCHOOL DISTRICT #2 RECREATION

Fund Totals:

(\$435,359.06) \$0.00 (\$9,894.83) (\$445,253.89)

Funds Out of Balance

Asset Totals: \$0.00 \$0.00 \$0.00 \$0.00
 Liability Totals: \$0.00 \$0.00 \$0.00 \$0.00
 Fund Balance Totals: \$0.00 \$0.00 \$0.00 \$0.00
 Revenue Totals: (\$435,359.06) \$0.00 (\$9,894.83) (\$445,253.89)
 Expenditure Totals: \$0.00 \$0.00 \$0.00 \$0.00
 Transfers In Totals: \$0.00 \$0.00 \$0.00 \$0.00
 Transfers Out Totals: \$0.00 \$0.00 \$0.00 \$0.00
 General Ledger Total: (\$435,359.06) \$0.00 (\$9,894.83) (\$445,253.89)

Trial Balance - On Demand Report Fiscal Year: 2024-2025

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

SCHOOL DISTRICT #26 MILL - 2509

REVENUE

2509 000 40200.0000 000 / SD#2 6 MILL MOTOR VEHICLE	(\$362,135.29)	\$0.00	(\$41,800.29)	(\$403,935.58)
2509 000 41005.0100 000 / SD #2 6 MILL-REAL PROP TAX VET EXEMPT	(\$17,549.35)	\$0.00	\$0.00	(\$17,549.35)
2509 000 41006.0100 000 / SD #2 6 MILL-MV VT EXEMPT	(\$11,274.33)	\$0.00	\$0.00	(\$11,274.33)
2509 000 41009.0100 000 / SD #2 6 MILL - PRO RATE CO AUTO	(\$9,529.91)	\$0.00	\$0.00	(\$9,529.91)
2509 000 41010.0000 000 / SD #2 6 MILL GEN REAL PROPERTY TAX	(\$2,250,330.93)	\$0.00	(\$17,423.12)	(\$2,267,754.12)
2509 000 41021.0000 000 / MOBILE HOME PROPERTY TAX	(\$6,187.27)	\$0.00	(\$157.12)	(\$6,344.39)
2509 000 42005.0100 000 / SD #2 6 MILL-MOBILE MACH	(\$467.91)	\$0.00	\$0.00	(\$467.91)
2509 000 43202.0000 000 / SD #2 6 MILL DELINQUENT TAX PENALTY & INTEREST	(\$3,315.71)	\$0.00	(\$328.22)	(\$3,643.93)

REVENUE TOTAL

SCHOOL DISTRICT #2 6 MILL	Fund Totals:				
		(\$2,660,790.70)	\$0.00	(\$59,708.82)	(\$2,720,499.52)
Asset Totals:		\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:		\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:		\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:		(\$2,660,790.70)	\$0.00	(\$59,708.82)	(\$2,720,499.52)
Expenditure Totals:		\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:		\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:		\$0.00	\$0.00	\$0.00	\$0.00
Fund is Out of Balance					
General Ledger Total:		(\$2,660,790.70)	\$0.00	(\$59,708.82)	(\$2,720,499.52)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

SCHOOL DISTRICT #3 SPECIAL - 2510

REVENUE

2510 000 40100 0000 000 / SD#3 INTEREST EARNED
 2510 000 40200 0000 000 / SD#3 MOTOR VEHICLE
 2510 000 40300 0000 000 / SD#3 TAYLOR GRAZING
 2510 000 40600 0000 000 / SD#3 FINES & FOREFTURES
 2510 000 41000 0100 000 / SD #3 6 MILL-REAL PROP TAX VET EXEMPT
 2510 000 41006 0100 000 / SD #3 SPECIAL-MV VT EXEMPT
 2510 000 41009 0100 000 / SD #3 SPECIAL - PRO RATE CO AUTO
 2510 000 41010 0000 000 / SD #3 SPECIAL GEN REAL PROPERTY TAX
 2510 000 41021 0000 000 / MOBILE HOME PROPERTY TAX
 2510 000 42005 0100 000 / SD #3 SPECIAL-MOBILE MACH
 2510 000 43202 0000 000 / SD #3 SPECIAL DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

SCHOOL DISTRICT #3 SPECIAL

Fund Totals:

Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$504,664.28)	\$0.00	(\$7,248.38)	(\$511,912.66)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$504,664.28)	\$0.00	(\$7,248.38)	(\$511,912.66)

Fund is Out of Balance

Opening Balance

Debits

Credits

Ending Balance

(\$58.21)	\$0.00	(\$0.89)	(\$59.10)
(\$19,498.77)	\$0.00	(\$5,145.69)	(\$24,644.46)
(\$67.15)	\$0.00	\$0.00	(\$67.15)
(\$8,471.61)	\$0.00	(\$510.65)	(\$8,982.26)
(\$916.95)	\$0.00	\$0.00	(\$916.95)
(\$1,218.63)	\$0.00	\$0.00	(\$1,218.63)
(\$6,243.67)	\$0.00	\$0.00	(\$6,243.67)
(\$465,696.74)	\$0.00	(\$1,555.09)	(\$467,251.83)
(\$1,935.69)	\$0.00	(\$29.30)	(\$1,964.99)
(\$306.57)	\$0.00	\$0.00	(\$306.57)
(\$250.29)	\$0.00	(\$6.76)	(\$257.05)
(\$504,664.28)	\$0.00	(\$7,248.38)	(\$511,912.66)
(\$504,664.28)	\$0.00	(\$7,248.38)	(\$511,912.66)

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

SCHOOL DISTRICT #3 RECREATION - 2511

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

REVENUE

2511.000 40200.0000.000 / SD#3 RECREATION MOTOR VEHICLE
 2511.000 41005.0100.000 / SD #3 RECREATION-REAL PROP TAX VET EXEMPT
 2511.000 41006.0100.000 / SD #3 RECREATION-MV VT EXEMPT
 2511.000 41009.0100.000 / SD #3 RECREATION - PRO RATE CO AUTO
 2511.000 41010.0000.000 / SD #3 RECREATION GEN REAL PROPERTY TAX
 2511.000 41021.0000.000 / MOBILE HOME PROPERTY TAX
 2511.000 42005.0100.000 / SD #3-RECREATION-MOBILE MACH
 2511.000 43202.0000.000 / SD #3 RECREATION DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

SCHOOL DISTRICT #3 RECREATION

Fund Totals:

<u>Opening Balance</u>	<u>Debits</u>	<u>Credits</u>	<u>Ending Balance</u>
(\$779.95)	\$0.00	(\$205.83)	(\$985.78)
(\$36.68)	\$0.00	\$0.00	(\$36.68)
(\$48.74)	\$0.00	\$0.00	(\$48.74)
(\$249.75)	\$0.00	\$0.00	(\$249.75)
(\$18,627.97)	\$0.00	(\$62.21)	(\$18,690.18)
(\$77.43)	\$0.00	(\$1.16)	(\$78.59)
(\$12.26)	\$0.00	\$0.00	(\$12.26)
(\$10.32)	\$0.00	(\$0.27)	(\$10.59)
(\$19,843.10)	\$0.00	(\$269.47)	(\$20,112.57)
(\$19,843.10)	\$0.00	(\$269.47)	(\$20,112.57)
Asset Totals:	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00
Revenue Totals:	\$0.00	(\$269.47)	(\$20,112.57)
Expenditure Totals:	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00
General Ledger Total:	\$0.00	(\$269.47)	(\$20,112.57)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

SCHOOL DISTRICT #3 6 MILL - 2512

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

REVENUE

2512.000.40200.0000.000 / SD#3 6 MILL MOTOR VEHICLE
 2512.000.41005.0100.000 / SD #3 6 MILL-REAL PROP TAX VET EXEMPT
 2512.000.41006.0100.000 / SD #3 6 MILL-MV VT EXEMPT
 2512.000.41009.0100.000 / SD #3 6 MILL - PRO RATE CO AUTO
 2512.000.41010.0000.000 / SD #3 6 MILL GEN REAL PROPERTY TAX
 2512.000.41021.0000.000 / MOBILE HOME PROPERTY TAX
 2512.000.42005.0100.000 / SD #3 6 MILL-MOBILE MACH
 2512.000.43202.0000.000 / SD #3 6 MILL DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

SCHOOL DISTRICT #3 6 MILL

Fund Totals:

	<u>Opening Balance</u>	<u>Debits</u>	<u>Credits</u>	<u>Ending Balance</u>
	(\$8,400.32)	\$0.00	(\$973.80)	(\$9,374.12)
	(\$408.85)	\$0.00	\$0.00	(\$408.85)
	(\$262.67)	\$0.00	\$0.00	(\$262.67)
	(\$222.07)	\$0.00	\$0.00	(\$222.07)
	(\$52,389.72)	\$0.00	(\$405.81)	(\$52,795.53)
	(\$143.82)	\$0.00	(\$3.69)	(\$147.51)
	(\$10.86)	\$0.00	\$0.00	(\$10.86)
	(\$75.71)	\$0.00	(\$7.65)	(\$83.36)
	(\$61,914.02)	\$0.00	(\$1,390.95)	(\$63,304.97)
	(\$61,914.02)	\$0.00	(\$1,390.95)	(\$63,304.97)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$61,914.02)	\$0.00	(\$1,390.95)	(\$63,304.97)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$61,914.02)	\$0.00	(\$1,390.95)	(\$63,304.97)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

SCHOOL DISTRICT #1 BOCHES .5 MILL - 2516

REVENUE

2516.000.40100.0000.000 / SCHOOL DIST #1 BOCHES .5 MILL INTEREST
 2516.000.40200.0000.000 / SCHOOL DIST #1 BOCHES .5 MILL MTR VEH
 2516.000.41005.0100.000 / SCH DIST #1 BOCHES .5MILL PROP TAX VET EX
 2516.000.41006.0000.000 / SCH DIST #1 .5MILL BOCHES VET EX MT VEH
 2516.000.41009.0100.000 / SCH DIST #1 BOCHES MOBILE MACHINE
 2516.000.41010.0000.000 / SCHOOL DIST #1 BOCHES .5 MILL RE TAX
 2516.000.41021.0000.000 / SCHOOL DIST #1 BOCHES .5 MILL MH TAX
 2516.000.42005.0000.000 / SCHOOL DIST #1 BOCHES .5 MILL MOBILE MACH
 2516.000.43202.0000.000 / SCHOOL DIST #1 BOCHES .5 MILL DEL TAX PEN & INT

REVENUE TOTAL

SCHOOL DISTRICT #1 BOCHES .5 MILL Fund Totals:

Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$72,691.59)	\$0.00	(\$1,657.34)	(\$74,348.93)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$72,691.59)	\$0.00	(\$1,657.34)	(\$74,348.93)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

SCHOOL DISTRICT #1 BOCES .5MILL-HOTSPRINGS CO - 2517

REVENUE

2517 000 40100 0000 000 / SCHOOL DIST #1 BOCES-HSC .5MILL INTEREST
2517 000 40200 0000 000 / SCHOOL DIST #1 BOCES-HSC .5MILL MTR VEH
2517 000 41005 0100 000 / SCH DIST #1 BOCES-HSC .5MILL PROP TAX VET EX
2517 000 41006 0000 000 / SCHOOL DIST #1 BOCES-HSC .5MILL VET EX MTR VEH
2517 000 41009 0100 000 / SCH DIST #1 BOCES HSC MOBILE MACHINE
2517 000 41010 0000 000 / SCHOOL DIST #1 BOCES-HSC .5MILL RE TAX
2517 000 41021 0000 000 / SCHOOL DIST #1 BOCES-HSC .5MILL MH TAX
2517 000 42005 0000 000 / SCHOOL DIST #1 BOCES-HSC .5MILL MOBILE MACH
2517 000 43202 0000 000 / SCHOOL DIST #1 BOCES-HSC .5MILL DEL TAX PEN & INT

REVENUE TOTAL

SCHOOL DISTRICT #1 BOCES .5MILL-HOTSPRINGS CO

Fund Totals:

Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$72,691.88)	\$0.00	(\$1,657.36)	(\$74,349.24)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$72,691.88)	\$0.00	(\$1,657.36)	(\$74,349.24)

Fund Is Out of Balance

Opening Balance

Debits

Credits

Ending Balance

(\$7.46)	\$0.00	(\$0.17)	(\$7.63)
(\$8,418.30)	\$0.00	(\$1,027.61)	(\$9,445.91)
(\$418.50)	\$0.00	\$0.00	(\$418.50)
(\$269.65)	\$0.00	\$0.00	(\$269.65)
(\$409.42)	\$0.00	\$0.00	(\$409.42)
(\$62,951.69)	\$0.00	(\$611.21)	(\$63,562.90)
(\$103.45)	\$0.00	(\$3.97)	(\$107.42)
(\$20.11)	\$0.00	\$0.00	(\$20.11)
(\$93.30)	\$0.00	(\$14.40)	(\$107.70)
(\$72,691.88)	\$0.00	(\$1,657.36)	(\$74,349.24)

(\$72,691.88)	\$0.00	(\$1,657.36)	(\$74,349.24)
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Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

WOODLAND HILLS DISTRICT - 2604

REVENUE

2604 000 41022 0000.000 / WOODLAND SPEC ASSESSMENT PROP TAX
2604 000 43202 0000.000 / WOODLAND DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

WOODLAND HILLS DISTRICT

Fund Totals:

	<u>Opening Balance</u>	<u>Debits</u>	<u>Credits</u>	<u>Ending Balance</u>
	(\$23,159.35)	\$0.00	\$0.00	(\$23,159.35)
	(\$9.35)	\$0.00	\$0.00	(\$9.35)
	(\$23,159.35)	\$0.00	\$0.00	(\$23,159.35)
WOODLAND HILLS DISTRICT	(\$23,159.35)	\$0.00	\$0.00	(\$23,159.35)
Fund Totals:				
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$23,159.35)	\$0.00	\$0.00	(\$23,159.35)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund is Out of Balance				
General Ledger Total:	(\$23,159.35)	\$0.00	\$0.00	(\$23,159.35)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

PARKER DRAW - 2605

REVENUE

2605 000 41022.0000.000 / PARKER DRAW SPEC ASSESSMENT PROP TAX
2605 000 43202.0000.000 / PARKER DRAW DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

PARKER DRAW

Fund Totals:

	Opening Balance	Debits	Credits	Ending Balance
	(\$12,555.00)	\$0.00	\$0.00	(\$12,555.00)
	(\$1.29)	\$0.00	\$0.00	(\$1.29)
	(\$12,556.29)	\$0.00	\$0.00	(\$12,556.29)
	(\$12,556.29)	\$0.00	\$0.00	(\$12,556.29)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$12,556.29)	\$0.00	\$0.00	(\$12,556.29)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund is Out of Balance				
General Ledger Total:	(\$12,556.29)	\$0.00	\$0.00	(\$12,556.29)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

LOWER CLEAR CREEK IRRIGATION - 2607

REVENUE

2607 000 41022 0000.000 / LOWER CLEAR CREEK SPEC ASSESSMENT PROP TAX
2607 000 43202 0000.000 / LOWER CLEAR CRK DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

LOWER CLEAR CREEK IRRIGATION

Fund Totals:

	<u>Opening Balance</u>	<u>Debits</u>	<u>Credits</u>	<u>Ending Balance</u>
	(\$24,370.04)	\$0.00	(\$630.00)	(\$25,000.04)
	\$0.00	\$0.00	(\$20.51)	(\$20.51)
	(\$24,370.04)	\$0.00	(\$650.51)	(\$25,020.55)
LOWER CLEAR CREEK IRRIGATION	(\$24,370.04)	\$0.00	(\$650.51)	(\$25,020.55)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$24,370.04)	\$0.00	(\$650.51)	(\$25,020.55)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund is Out of Balance				
General Ledger Total:	(\$24,370.04)	\$0.00	(\$650.51)	(\$25,020.55)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

DON ENA ESTATES - 2608

REVENUE

2608.000 41022 0000.000 / DON ENA ESTATES SPEC ASSESSMENT PROP TAX
2608.000 43202 0000.000 / DON ENA ESTATES DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

DON ENA ESTATES

Fund Totals:

	Opening Balance	Debits	Credits	Ending Balance
	(\$27,650.00)	\$0.00	\$0.00	(\$27,650.00)
	(\$7.59)	\$0.00	\$0.00	(\$7.59)
	(\$27,657.59)	\$0.00	\$0.00	(\$27,657.59)
	(\$27,657.59)	\$0.00	\$0.00	(\$27,657.59)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$27,657.59)	\$0.00	\$0.00	(\$27,657.59)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund is Out of Balance				
General Ledger Total:	(\$27,657.59)	\$0.00	\$0.00	(\$27,657.59)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

PINEY & CRUSE CREEK DITCH - 2611

REVENUE

2611 000 41022 0000 000 / PINEY & CRUSE CREEK DITCH SPEC ASSESSMENT PROP TAX
2611 000 43202 0000 000 / PINEY & CRUSE CREEK DITCH DEL TAX PENALTY & INT

REVENUE TOTAL

PINEY & CRUSE CREEK DITCH

Fund Totals:

	Opening Balance	Debits	Credits	Ending Balance
	(\$38,946.78)	\$0.00	\$0.00	(\$38,946.78)
	(\$130.05)	\$0.00	\$0.00	(\$130.05)
	(\$39,076.83)	\$0.00	\$0.00	(\$39,076.83)
	(\$39,076.83)	\$0.00	\$0.00	(\$39,076.83)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$39,076.83)	\$0.00	\$0.00	(\$39,076.83)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$39,076.83)	\$0.00	\$0.00	(\$39,076.83)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

WEED & PEST - 2704

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

REVENUE

2704 000.40200 0000 000 / WEED & PEST MOTOR VEHICLE
2704 000.41005 0100 000 / WEED-REAL PROP TAX VET EXEMPT
2704 000.41006 0100 000 / WEED-MV VT EXEMPT
2704 000.41009 0100 000 / WEED - PRO RATE CO AUTO
2704 000.41010 0000 000 / WEED GEN REAL PROPERTY TAX
2704 000.41021 0000 000 / WEED & PEST MOBILE HOME PROPERTY TAXES
2704 000.42005 0100 000 / WEED & PEST -MOBILE MACH
2704 000.43202 0000 000 / WEED DELINQUENT TAX PENALTY & INTEREST

REVENUE TOTAL

WEED & PEST

Fund Totals:

	Opening Balance	Debits	Credits	Ending Balance
	(\$163,392.10)	\$0.00	(\$18,872.35)	(\$182,264.45)
	(\$7,923.30)	\$0.00	\$0.00	(\$7,923.30)
	(\$5,090.23)	\$0.00	\$0.00	(\$5,090.23)
	(\$4,302.64)	\$0.00	\$0.00	(\$4,302.64)
	(\$1,015,934.20)	\$0.00	(\$7,865.88)	(\$1,023,800.08)
	(\$2,791.65)	\$0.00	(\$70.91)	(\$2,862.56)
	(\$211.33)	\$0.00	\$0.00	(\$211.33)
	(\$1,491.23)	\$0.00	(\$148.23)	(\$1,639.46)
	(\$1,201,136.68)	\$0.00	(\$26,957.37)	(\$1,228,094.05)
	(\$1,201,136.68)	\$0.00	(\$26,957.37)	(\$1,228,094.05)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$1,201,136.68)	\$0.00	(\$26,957.37)	(\$1,228,094.05)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$1,201,136.68)	\$0.00	(\$26,957.37)	(\$1,228,094.05)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

PREDATORY ANIMALS - 2802

REVENUE

2802.000.48011.0000.000 / PREDATORY ANIMAL MISC.REVENUE

REVENUE TOTAL

PREDATORY ANIMALS

Fund Totals:

	<u>Opening Balance</u>	<u>Debits</u>	<u>Credits</u>	<u>Ending Balance</u>
	(\$57,017.76)	\$0.00	\$0.00	(\$57,017.76)
	(\$57,017.76)	\$0.00	\$0.00	(\$57,017.76)
	(\$57,017.76)	\$0.00	\$0.00	(\$57,017.76)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$57,017.76)	\$0.00	\$0.00	(\$57,017.76)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$57,017.76)	\$0.00	\$0.00	(\$57,017.76)

Fund Is Out of Balance

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

1% CAPITAL FACILITIES - 3502

REVENUE

3502.000.40100.0300.000 / CFT 1998 INTEREST EARNED
 3502.000.41902.0300.000 / CAP TAX REVENUE-ROAD PROJECTS
 3502.000.41903.0300.000 / CFT REIMBURSED COSTS - ROAD PROJECTS

REVENUE TOTAL

1% CAPITAL FACILITIES

Fund Totals:

	<u>Opening Balance</u>	<u>Debits</u>	<u>Credits</u>	<u>Ending Balance</u>
	(\$136,560.33)	\$0.00	(\$19,660.26)	(\$156,220.59)
	(\$1,705,605.90)	\$0.00	(\$263,564.47)	(\$1,969,170.37)
	(\$6,239.00)	\$0.00	\$0.00	(\$6,239.00)
	(\$1,848,405.23)	\$0.00	(\$283,224.73)	(\$2,131,629.96)
1% CAPITAL FACILITIES	(\$1,848,405.23)	\$0.00	(\$283,224.73)	(\$2,131,629.96)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$1,848,405.23)	\$0.00	(\$283,224.73)	(\$2,131,629.96)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund is Out of Balance				
General Ledger Total:	(\$1,848,405.23)	\$0.00	(\$283,224.73)	(\$2,131,629.96)

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

SCRF (SHERIDAN CNTY ROAD FUND) - 3505

REVENUE

3505.000.40100.0300.000 / SCRF INTEREST EARNED
3505.000.48801.0300.000 / SCRF FUNDS

REVENUE TOTAL

SCRF (SHERIDAN CNTY ROAD FUND)

Fund Totals:

	Opening Balance	Debits	Credits	Ending Balance
	(\$103,912.61)	\$0.00	(\$14,106.36)	(\$118,018.97)
	(\$331,961.00)	\$0.00	(\$31,988.08)	(\$363,949.08)
	(\$435,873.61)	\$0.00	(\$46,094.44)	(\$481,968.05)
	(\$435,873.61)	\$0.00	(\$46,094.44)	(\$481,968.05)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$435,873.61)	\$0.00	(\$46,094.44)	(\$481,968.05)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$435,873.61)	\$0.00	(\$46,094.44)	(\$481,968.05)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report Fiscal Year: 2024-2025

From Date: 2/1/2025 To Date: 2/28/2025 ☐ Print accounts with zero balance

EMPLOYEE HEALTH BENEFIT PLAN - 4000

REVENUE

4000 000 45000 0000 000 / HEALTH BENEFIT PLAN REVENUE
4000 000 45001 0000 000 / HEALTH BENEFIT PLAN INTEREST

REVENUE TOTAL

EMPLOYEE HEALTH BENEFIT PLAN Fund Totals:

	Opening Balance	Debits	Credits	Ending Balance
	(\$1,714,542.92)	\$0.00	(\$263,280.00)	(\$1,977,822.92)
	(\$2,535.34)	\$0.00	(\$329.91)	(\$2,865.25)
	(\$1,717,078.26)	\$0.00	(\$263,609.91)	(\$1,980,688.17)
	(\$1,717,078.26)	\$0.00	(\$263,609.91)	(\$1,980,688.17)
Asset Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$1,717,078.26)	\$0.00	(\$263,609.91)	(\$1,980,688.17)
Expenditure Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$1,717,078.26)	\$0.00	(\$263,609.91)	(\$1,980,688.17)

Fund is Out of Balance

Sheridan County

Trial Balance - On Demand Report

Fiscal Year: 2024-2025

From Date: 2/1/2025

To Date: 2/28/2025

☐ Print accounts with zero balance

FIDUCIARY ACCOUNTS - 5000

REVENUE

5000.610.40101.0000.000 / FIRE DIST SUPPRESSION INTEREST
5000.612.40101.0000.000 / WYOSTAR FIRE INTEREST
5000.612.49000.0000.000 / WYOSTAR FIRE REVENUE
5000.641.40101.0000.000 / AFFORDABLE HOUSING INTEREST
5000.643.40101.0000.000 / JOINT ATTAINABLE HOUSING FUND INTEREST

REVENUE TOTAL

FIDUCIARY ACCOUNTS

Fund Totals:

Opening Balance	Debits	Credits	Ending Balance
(\$340.36)	\$0.00	(\$44.36)	(\$384.72)
(\$4,634.37)	\$0.00	(\$738.69)	(\$5,373.06)
(\$40,000.00)	\$0.00	\$0.00	(\$40,000.00)
(\$1,064.38)	\$0.00	(\$139.18)	(\$1,203.56)
(\$7,126.26)	\$0.00	(\$980.84)	(\$8,107.10)
(\$53,165.37)	\$0.00	(\$1,903.07)	(\$55,068.44)
(\$53,165.37)	\$0.00	(\$1,903.07)	(\$55,068.44)

Fund is Out of Balance

Grand Total:

Asset Totals:	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$53,165.37)	\$0.00	(\$1,903.07)
Expenditure Totals:	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$53,165.37)	\$0.00	(\$1,903.07)
	(\$56,763,468.94)	\$433.78	(\$3,072,012.58)
			(\$59,835,047.74)

There are Funds Out of Balance

End of Report

Asset Totals:	\$0.00	\$0.00	\$0.00
Liability Totals:	\$0.00	\$0.00	\$0.00
Fund Balance Totals:	\$0.00	\$0.00	\$0.00
Revenue Totals:	(\$56,763,468.94)	\$433.78	(\$3,072,012.58)
Expenditure Totals:	\$0.00	\$0.00	\$0.00
Transfers In Totals:	\$0.00	\$0.00	\$0.00
Transfers Out Totals:	\$0.00	\$0.00	\$0.00
General Ledger Total:	(\$56,763,468.94)	\$433.78	(\$3,072,012.58)
			(\$59,835,047.74)

2.h

Step #2 - County Clerk



Sheridan County

W.S. 518-3-814 MONTHLY STATEMENT

Statement of the collections by EOA Schunk Thompson as
County Clerk. Elections official Name of Elected or Appointed County Official
Title for the County of Sheridan,
State of Wyoming for the month ending February, 20 25, filed with the County
Clerk for presentation to the Board of County Commissioners.

See attached documents.

I hereby certify that the above is true and correct statement of the monies collected by me and that the same has been paid to the County Treasurer.

This 14th day of March, 20 25

Eoa Schunk Thompson
Sheridan County Elected or Appointed County Official

REPORT OF
Collection of Monies

Eon Schuck Thompson
Name of Elected or Appointed County Official

AS

County Clerk / County Elections
Title Officer

For the month of
February, 2025

TO BE COMPLETED BY THE COUNTY CLERK
FILED WITH COUNTY CLERK

FILED
Sheridan County Clerk & Recorder

MAR 11 2025

EDASCHUNK THOMPSON, CLERK
Eon Schuck Thompson DEPUTY
County Clerk & Recorder

Presented and acknowledged by the Board of County

Commissioners on this 18th day of
March, 2025

Jonis J. Hunt
Chairman

SHERIDAN COUNTY
224 S MAIN - SUITE B3
SHERIDAN, WY 82801
MISC RECEIPTS

*** REPRINTED RECEIPT ***

Trans Date: 02/13/2025

Receipt#: 29350

Clerk ID: kschaefr

Receipt Total: 55,663.31

Receipt Type: MISC

Received Of: CITY OF SHERIDAN

On Account Of: ELECTION EXPENSE REIM - CITY OF SHE

Line#	PT Account	Description	Amount
1 R	1000.000.44010.0100.000	ELECTION EXPENSE REIM - CITY OF SHE	55,663.31

Payment Type	Doc#	Description	Amount
CHECK	11093	ELECTION EXPENSE REIM - CITY OF SHERIDAN	55,663.31

Note: off 1¢
EST

SHERIDAN COUNTY
224 S MAIN - SUITE B3
SHERIDAN, WY 82801
MISC RECEIPTS
*** REPRINTED RECEIPT ***

Trans Date: 02/13/2025 Receipt#: 29351
Clerk ID: kschaefer
Receipt Type: MISC Receipt Total: 9,404.82
Received Of: SCHOOL DISTRICT NO. 2
On Account Of: ELECTION EXPENSE REIM SD#2

Line#	PT Account	Description	Amount
1 R	1000.000.44005.0100.000	ELECTION EXPENSE REIM SD#2	9,404.82

Payment Type	Doc#	Description	Amount
CHECK	137544	ELECTION EXPENSE REIM SD#2	9,404.82

SHERIDAN COUNTY
224 S MAIN - SUITE B3
SHERIDAN, WY 82801
MISC RECEIPTS
*** REPRINTED RECEIPT ***

Trans Date: 02/21/2025

Receipt#: 29378

Clerk ID: kschaefer

Receipt Total: 7,053.61

Receipt Type: MISC

Received Of: SHERIDAN CO SCHOOL DIST #1

On Account Of: ELECTION EXPENSE REIM SD#1

Line#	PT Account	Description	Amount
1 R	1000.000.44004.0100.000	ELECTION EXPENSE REIM SD#1	7,053.61

Payment Type	Doc#	Description	Amount
CHECK	146449	ELECTION EXPENSE REIM SD#1	7,053.61

SHERIDAN COUNTY
224 S MAIN - SUITE B3
SHERIDAN, WY 82801
MISC RECEIPTS

*** REPRINTED RECEIPT ***

Trans Date: 02/21/2025

Receipt#: 29377

Clerk ID: kschaefer

Receipt Total: 12,988.76

Receipt Type: MISC

Received Of: TOWN OF DAYTON

On Account Of: ELECTION EXPENSE REIM - DAYTON

Line#	PT Account	Description	Amount
1 R	1000.000.44009.0100.000	ELECTION EXPENSE REIM - DAYTON	12,988.76

Payment Type	Doc#	Description	Amount
CHECK	3892	ELECTION EXPENSE REIM - DAYTON	12,988.76

SHERIDAN COUNTY
224 S MAIN - SUITE B3
SHERIDAN, WY 82801
MISC RECEIPTS
*** REPRINTED RECEIPT ***

Trans Date: 02/21/2025

Receipt#: 29379

Clerk ID: kschaefr

Receipt Total: 4,702.41

Receipt Type: MISC

Received Of: SHERIDAN CO SCHOOL DIST #3

On Account Of: ELECTION EXPENSE REIM SD#3

Line#	PT Account	Description	Amount
1 R	1000.000.44006.0100.000	ELECTION EXPENSE REIM SD#3	4,702.41

Payment Type	Doc#	Description	Amount
CHECK	58606	ELECTION EXPENSE REIM SD#3	4,702.41

SHERIDAN COUNTY
224 S MAIN - SUITE B3
SHERIDAN, WY 82801
MISC RECEIPTS
*** REPRINTED RECEIPT ***

Trans Date: 02/13/2025

Receipt#: 29354

Clerk ID: kschaefer

Receipt Type: MISC

Receipt Total: 3,526.81

Received Of: SHERIDAN CO CONSERVATION DIST

On Account Of: ELECTION EXPENSE REIMB/OTHER

Line#	PT	Account	Description	Amount
1	R	1000.000.44011.0000.000	ELECTION EXPENSE REIMB/OTHER	3,526.81

Payment Type	Doc#	Description	Amount
CHECK	9754	ELECTION EXPENSE REIMB/OTHER	3,526.81

2016-2018-2020-2022-2024

Total Election Cost

For
February
2025 est

	TOTAL 2016	TOTAL 2018	TOTAL 2020	TOTAL 2022	TOTAL 2024
SHERIDAN COUNTY					
Primary	38,652.67	57,852.57	25,214.11	54,652.95	56,105.75
General	28,999.18	38,887.87	22,246.11	28,545.91	35,724.20
	67,651.85	96,740.44	47,460.22	83,198.86	91,829.96
CITY OF SHERIDAN ✕					
Primary	36,977.20	26,350.24	19,509.80	28,065.19	32,358.49
General	19,894.76	22,337.35	17,760.81	15,899.98	23,304.82
	56,871.96	48,687.59	37,270.61	43,965.17	55,663.32
					off 1¢ est
TOWN OF DAYTON ✕					
Primary	10,362.88	8,170.81	10,548.03	5,850.69	8,386.66
General	4,645.09	6,836.21	5,679.58	3,833.12	4,602.10
	15,007.97	15,007.02	16,227.61	9,683.81	12,988.76
					✓
TOWN OF RANCHESTER					
Primary	7,754.87	5,633.82	1,732.64	4,561.67	13,073.67
General	3,475.50	3,768.86	1,378.76	3,135.05	5,729.40
	11,230.37	9,402.68	3,111.40	7,696.72	18,803.07
SCHOOL DISTRICT #1 ✕					
General	3,738.66	1,967.95	4,128.53	4,284.51	7,053.61
	3,738.66	1,967.95	4,128.53	4,284.51	7,053.61
					✓
SCHOOL DISTRICT #2 ✕					
General	9,346.64	5,903.86	5,779.95	9,181.08	9,404.82
	9,346.64	5,903.86	5,779.95	9,181.08	9,404.82
					✓
SCHOOL DISTRICT #3 ✕					
General	4,673.32	3,935.91	1,651.41	1,836.22	4,702.41
	4,673.32	3,935.91	1,651.41	1,836.22	4,702.41
					✓
SHERIDAN CONSERVATION DISTRICT					
General	1,869.33	3,935.91	2,477.12	1,836.22	3,526.81
	1,869.33	3,935.91	2,477.12	1,836.22	3,526.81
					✓
NORTHERN WYOMING COMMUNITY COLLEGE					
General	7,477.32	2,951.93	4,954.24	3,672.43	4,702.41
	7,477.32	2,951.93	4,954.24	3,672.43	4,702.41
GRAND TOTAL Reimbursed without t	\$ 110,215.60	\$ 91,792.85	\$ 75,600.87	\$ 82,156.16	\$ 116,845.20
PRIMARY COST	93,747.61	98,007.44	57,004.57	93,130.49	109,924.58
GENERAL COST	84,119.80	90,525.85	66,056.51	72,224.51	98,750.58
Grand Total Election Cost	\$ 177,867.41	\$ 188,533.29	\$ 123,061.08	\$ 165,355.00	\$ 208,675.16

Percentage Reimbursed

62%

49%

61%

50%

56%



Sheridan County

W.S. 518-3-814
MONTHLY STATEMENT
CORRECTION UPDATE

Statement of the collections by EDA SCHUNK THOMPSON as
County Clerk, County Elections Official Name of Elected or Appointed County Official
Title for the County of Sheridan,

State of Wyoming for the month ending January 2025, filed with the County Clerk for presentation
to the Board of County Commissioners.

These monies should have been
reported by this Monthly Statement for January in
February. Therefore this is the correction of that. 987
See attached documents.

I hereby certify that the above is true and correct statement of the monies collected by me and that the
same has been paid to the County Treasurer.

This 14th day of March, 2025

Eda Schunk Thompson
Sheridan County Elected or Appointed County Official

REPORT OF
Collection of Monies

EAA SCHUNK THOMPSON
Name of Elected or Appointed County Official

AS

County Clerk / County elections
Title officer

For the month of
Jan, 2025

TO BE COMPLETED BY THE COUNTY CLERK
FILED WITH COUNTY CLERK

FILED

Sheridan County Clerk & Recorder

MAR 1 2025

EDASCHUNK THOMPSON, CLERK
County Clerk Thompson
County Clerk Thompson

Presented and acknowledged by the Board of County

Commissioners on this 18th day of

March 2025

James J. Hart
Chairman

SHERIDAN COUNTY
224 S MAIN - SUITE B3
SHERIDAN, WY 82801
MISC RECEIPTS

*** REPRINTED RECEIPT ***

Trans Date: 01/30/2025

Receipt#: 29294

Clerk ID: kschaefr

Receipt Total: 18,803.07

Receipt Type: MISC

Received Of: TOWN OF RANCHESTER

On Account Of: ELECTION EXPENSE REIM - RANCHESTER

Line#	PT Account	Description	Amount
1 R	1000.000.44008.0100.000	ELECTION EXPENSE REIM - RANCHESTER	18,803.07

Payment Type	Doc#	Description	Amount
CHECK	11865	ELECTION EXPENSE REIM - RANCHESTER	18,803.07

SHERIDAN COUNTY
224 S MAIN - SUITE B3
SHERIDAN, WY 82801
MISC RECEIPTS

*** REPRINTED RECEIPT ***

Trans Date: 01/29/2025

Receipt#: 29270

Clerk ID: kschaefr

Receipt Total: 4,702.41

Receipt Type: MISC

Received Of: SHERIDAN COLLEGE

On Account Of: ELECTION EXPENSE REIM NORTHERN WY C

Line#	PT Account	Description	Amount
1 R	1000.000.44007.0100.000	ELECTION EXPENSE REIM NORTHERN WY C	4,702.41

Payment Type	Doc#	Description	Amount
CHECK	304158	ELECTION EXPENSE REIM NORTHERN WY C	4,702.41

**2016-2018-2020-2022-2024
Total Election Cost**

*For
January
2025 EST*

	TOTAL	TOTAL	TOTAL	TOTAL	TOTAL
	2016	2018	2020	2022	2024
SHERIDAN COUNTY					
Primary	38,652.67	57,852.57	25,214.11	54,652.95	56,105.75
General	28,999.18	38,887.87	22,246.11	28,545.91	35,724.20
	67,651.85	96,740.44	47,460.22	83,198.86	91,829.96
CITY OF SHERIDAN					
Primary	36,977.20	26,350.24	19,509.80	28,065.19	32,358.49
General	19,894.76	22,337.35	17,760.81	15,899.98	23,304.82
	56,871.96	48,687.59	37,270.61	43,965.17	55,663.32
TOWN OF DAYTON					
Primary	10,362.88	8,170.81	10,548.03	5,850.69	8,386.66
General	4,645.09	6,836.21	5,679.58	3,833.12	4,602.10
	15,007.97	15,007.02	16,227.61	9,683.81	12,988.76
TOWN OF RANCHESTER					
Primary	7,754.87	5,633.82	1,732.64	4,561.67	13,073.67
General	3,475.50	3,768.86	1,378.76	3,135.05	5,729.40
	11,230.37	9,402.68	3,111.40	7,696.72	18,803.07
SCHOOL DISTRICT #1					
General	3,738.66	1,967.95	4,128.53	4,284.51	7,053.61
	3,738.66	1,967.95	4,128.53	4,284.51	7,053.61
SCHOOL DISTRICT #2					
General	9,346.64	5,903.86	5,779.95	9,181.08	9,404.82
	9,346.64	5,903.86	5,779.95	9,181.08	9,404.82
SCHOOL DISTRICT #3					
General	4,673.32	3,935.91	1,651.41	1,836.22	4,702.41
	4,673.32	3,935.91	1,651.41	1,836.22	4,702.41
SHERIDAN CONSERVATION DISTRICT					
General	1,869.33	3,935.91	2,477.12	1,836.22	3,526.81
	1,869.33	3,935.91	2,477.12	1,836.22	3,526.81
NORTHERN WYOMING COMMUNITY COLLEGE					
General	7,477.32	2,951.93	4,954.24	3,672.43	4,702.41
	7,477.32	2,951.93	4,954.24	3,672.43	4,702.41
GRAND TOTAL Reimbursed without t	\$ 110,215.60	\$ 91,792.85	\$ 75,600.87	\$ 82,156.16	\$ 116,845.20
PRIMARY COST	93,747.61	98,007.44	57,004.57	93,130.49	109,924.58
GENERAL COST	84,119.80	90,525.85	66,056.51	72,224.51	98,750.58
Grand Total Election Cost	\$ 177,867.41	\$ 188,533.29	\$ 123,061.08	\$ 165,355.00	\$ 208,675.16

Percentage Reimbursed

62%

49%

61%

50%

56%

2.j



Sheridan County

W.S. 518-3-814
MONTHLY STATEMENT

Statement of the collections by Eda Schunk Thompson as
Name of Elected or Appointed County Official
County Clerk & Recorder for the County of Sheridan.
Title
State of Wyoming for the month ending February, 2025, filed with the County
Clerk for presentation to the Board of County Commissioners.

See attached documents.

I hereby certify that the above is true and correct statement of the monies collected by me and that the same has been paid to the County Treasurer.

This 19th day of March, 2025

Eda Schunk Thompson
Sheridan County Elected or Appointed County Official

REPORT OF
Collection of Monies

Eda Schunk Thompson
Name of Elected or Appointed County Official

AS

Title County Clerk

For the month of

February, 20 25

TO BE COMPLETED BY THE COUNTY CLERK
FILED WITH COUNTY CLERK

FILED
Sheridan County Clerk & Recorder

MAR 21 2025

EDA SCHUNK THOMPSON, CLERK
Eda Schunk Thompson DEPUTY
County Clerk Sheridan County

Presented and acknowledged by the Board of County

Commissioners, on this 24 th day of

March 2025

Jane T. Jut
Chairman

SHERIDAN COUNTY
224 S MAIN - SUITE B3
SHERIDAN, WY 82801
MISC RECEIPTS

Trans Date: 03/21/2025

Receipt#: 29562

Clerk ID: kschaefr

Receipt Total: 62,074.41

Receipt Type: MISC

Received Of: SHERIDAN CO CLERK'S

Account Of: COUNTY CLERK'S FEES

Line#	PT	Account	Description	Amount
1	R	1000,000,44003,0100,000	COUNTY CLERK RECORDING F	9,922.73
2	R	1000,000,44003,0100,000	PLATS (RECORDING FEES)	150.00
3	R	1000,000,42001,0100,000	MARRIAGE LICENSE	270.00
4	R	1000,000,44002,0100,000	FINANCING (FILING FEES)	4,715.00
5	R	1000,000,44002,0100,000	STATEMENTS (FILING FEES)	5.00
6	R	1000,000,44001,0100,000	TITLES	12,145.00
7	R	1000,000,44000,0100,000	CITY VIN INSPECTION FEE	190.00
8	R	1000,000,42000,0100,000	LIQUOR LICENSE & MALT BE	30,530.00
9	R	1000,000,40100,0100,000	GENERAL CO CHECKING ACCO	161.96
10	R	1000,000,42003,0100,000	COPIES & MAIL	149.00
11	R	1000,000,44000,0100,000	ALL OTHER INSPECTIONS	120.00
12	R	1000,000,44000,0100,000	SO VIN INSPECTIONS	1,050.00
13	R	1000,000,44000,0100,000	OUT OF STATE INSPECTIONS	30.00
14	R	1000,000,44003,0100,000	IDOC FEES	894.00
15	R	1000,020,50231,0100,000	COUNTY CLERK ADVERTISING	315.00
16	R	1000,210,50770,0100,000	FIXED & MISC CHARGES	159.78
			BANK CHARGES	
17	R	1000,000,44000,0100,000	RANCHESTER PD	10.00
			INSPECTIONS	
18	R	1000,000,42003,0100,000	PUBLIC RECORDS FEES	24.00
19	R	1000,000,42003,0100,000	ARCSEARCH	111.60
20	R	1000,000,40100,0100,000	CREDIT FOR FRAUD CHECK	1,450.88
			#610	

Payment Type	Doc#	Description	Amount
CHECK	650	COUNTY CLERK'S FEES	62,074.41

Receipt Totals

By Date: 2/1/2025 12:00 AM - 2/28/2025 11:59 PM; Departments: All; Accrual-based detail.

Sheridan County
Wednesday, March 5, 2025 4:38 PM

Summary:

Receipt Item Totals

	Paid	Charged	Debited	Total
Document:	\$58,924.00	\$0.00	\$237.73	\$59,161.73
Non Document:	\$454.00	\$0.00	\$0.00	\$454.00
Subtotal:	\$59,378.00	\$0.00	\$237.73	\$59,615.73

Payment on Account Totals

Applied:	\$0.00
Refunded:	(\$426.74)
Unposted:	\$0.00
Net Posted:	(\$426.74)

Payments & Refunds

Cash:	\$4,017.50
Check (POA Refund):	-\$426.74
Check:	\$47,289.50
Debit/Credit:	\$5,098.00
eRECORDING:	\$2,973.00
Total:	\$58,951.26

Revenue Account Activity

1000.000.44003.0100.000	RECORDING FEES (REAL)	\$9,685.00	\$0.00	\$237.73	\$9,922.73
1000.000.44003.0100.000	PLATS (RECORDING FEES)	\$150.00	\$0.00	\$0.00	\$150.00
1000.000.42001.0100.000	MARRIAGE LICENSES	\$270.00	\$0.00	\$0.00	\$270.00
1000.000.44002.0100.000	FINANCING (FILING FEES)	\$4,715.00	\$0.00	\$0.00	\$4,715.00
1000.000.44002.0100.000	STATEMENTS (FILING FEES)	\$5.00	\$0.00	\$0.00	\$5.00
1000.000.44001.0100.000	TITLES	\$12,145.00	\$0.00	\$0.00	\$12,145.00
1000.000.44000.0100.000	ALL OTHER INSPECTIONS	\$120.00	\$0.00	\$0.00	\$120.00
1000.000.44000.0100.000	CITY POLICE INSPECTION	\$190.00	\$0.00	\$0.00	\$190.00
1000.000.42000.0100.000	LIQUOR LICENSES	\$30,530.00	\$0.00	\$0.00	\$30,530.00
1000.000.44000.0100.000	SO INSPECTION	\$1,050.00	\$0.00	\$0.00	\$1,050.00
1000.000.42003.0100.000	COPIES	\$139.00	\$0.00	\$0.00	\$139.00
1000.020.50231.0100.000	ADVERTISING-PUBLICATION	\$315.00	\$0.00	\$0.00	\$315.00
1000.000.44000.0100.000	OUT OF STATE INSPECTIONS	\$30.00	\$0.00	\$0.00	\$30.00
1000.000.44000.0100.000	RANCHESTER PD INSPECTIONS	\$10.00	\$0.00	\$0.00	\$10.00

Receipt Totals

By Date: 2/1/2025 12:00 AM - 2/28/2025 11:59 PM; Departments: All; Accrual-based detail.

Sheridan County

Wednesday, March 5, 2025 4:38 PM

1000.000.42003.0100.000	PUBLIC RECORDS FEES	\$24.00	\$0.00	\$0.00	\$24.00
Totals:		\$59,378.00	\$0.00	\$237.73	\$59,615.73

2K.



March 18, 2025

Sheridan County Public Works
County Engineer
224 S. Main St. Suite 428
Sheridan, WY 82801

RE: Right-of-way License - Provide new service across Ulm Road (49) and along Dutch Creek Road (161)
Range Work Order No. 1025912

Board of Commissioners :

Range has received requests for ungraded broadband services along Dutch Creek Rd. These requests have been received by the following:

Lindy and Sheridan Burgess of 22 Dutch Creek Rd
Jame Hardesty of 133 Dutch Creek Rd
Jarrod and Sandra Green of 100 Dutch Creek Rd
Kayla Brown of 244 Dutch Creek Rd

Range is requesting permission to bury communication cables across Ulm Rd. in SW1/4 Sections 29, Township 56 North, Range 82 West, Crossing #1. Along and crossing Dutch Creek Rd located in SW1/4 of Section 29, Township 56 East, Range 82 West, Crossing # 2. Crossing in the NW1/4SE1/4 Section 32, Township 56 North, Range 82 West, Crossing #3. Crossing in the NE1/4NE1/4 of Section 8, Township 55 North, Range 82 West, Crossing #4. These placements will allow Range to provide new and improved telecommunications services to the above listed customers along Dutch Creek Rd.

Enclosed is a signed and notarized Right-Of-Way License along with drawings showing the proposed placement of cable, which will be bored across the existing county right-of-way. We ask that you wave the permit fees as we are doing this work in order to provide services to individual residences in this area. Once approved, Range will coordinate with you on our dates and time for the proposed construction.

If you have any questions or comments regarding this matter, please call Frank Miller, Engineer, or write to PO Box 127 Forsyth, Montana 59327, or call 1-406-347-2882.

Thank you for your assistance in this matter.

A handwritten signature in blue ink that reads "Frank Miller". The signature is written in a cursive style with a large, stylized "F" and "M".

Frank Miller
Engineer

SHERIDAN COUNTY LICENSE AGREEMENT

Submit to: Public Works Department, 224 S. Main Street, Suite 428, Sheridan, WY 82801; (307) 674-2920

License requested for County Road ULM ROADMile Post _____ Township/Range/Section T56N, R82W SEC 29 NESWGPS Coordinates 44.798401 -106.758801Type of installation proposed PLACEMENT OF BFO4B (FIBER OPTIC) BORESKETCH (or attach separately)CROSSING #1

SEE ATTACHED SHEET

INSPECTION FEE SCHEDULE

Select the type of installation you will be making

- ☐ Open Trench Installation/Repair, perpendicular to roadway centerline: \$600.⁰⁰ plus \$6.00 per foot
Compaction test under roadway required.
- ☐ Open Trench Installation/Repair, parallel to roadway centerline: \$600.⁰⁰ plus \$2.40 per foot
Compaction test under roadway required.
- ☐ Plowed type installation: \$600.⁰⁰ plus \$0.25 per foot.
- ☐ Overhead install with poles or structures in County ROW: \$600.⁰⁰ plus \$0.25 per foot
- ☐ Overhead install without poles or structures in County ROW: \$150.⁰⁰ plus \$0.25 per foot
- ☒ Bored crossing: \$150.⁰⁰ plus \$0.25 per foot of installation/repair.

Additional inspection fees may apply.

\$ 150.00 Fee for type of installation
 + \$ 15.00 (\$ 60 per foot x 125 feet)
 \$ 165.00 Total Fee

REQUEST FOR A WAIVER

Exceptions

- a. Service for utilities for individual residences may be exempt from charges, however, an application with a waiver request (including name & address of the individual) must be filed with the Public works department.
- b. For joint trench installation, only one fee will be charged. All utilities using the joint trench shall be listed on the application.
- c. For repair work, the fee may be charged only when work disturbs roadway surface.
- If an exception is desired, applicant shall submit a request in writing to the public works department. The department shall make a recommendation to the Board of County Commissioners, who shall take action to accept, reject, or modify the proposed exception.

AGREEMENT

I, the undersigned applicant, request a Sheridan County License Agreement to construct the afore-mentioned installation at the above location, subject to the terms of Sheridan County Master License Agreement No. M07-07 entered with Sheridan County.

Company RANGE Rep. Name FRANK MILLER Title ENG
 Address 7325 FRONT ST City/State/Zip FORSYTH MT 59327
 Phone 406-347-2882 Email frank.miller@range.net

Reviewed and approved by Sheridan County Public Works Department:

Frank Miller
 County Representative Signature

3-24-25
 Date

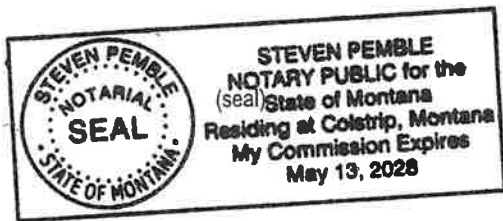
APPROVAL

By signing below, the parties agree to the terms of this agreement, and that this License Agreement is subject to the terms of the Sheridan County Master License Agreement No. 407-07, which is hereby incorporated by reference. Any person signing below certifies he or she has been properly authorized to enter into this Agreement by his or her respective party.

RANGE
GRANTEE (Company Name)
FRANK MILLER
Printed Representative Name & Title

BY: Frank Miller
Authorized Representative Signature
DATE: 3-17-25

STATE OF ~~WYOMING~~)
 MONTANA) ss.
COUNTY OF ~~SHERIDAN~~)
 ROSEBUD
The foregoing instrument was acknowledged before me on 3-17-25 by
FRANK MILLER
Name of Person



WITNESS my hand and official seal.

[Signature]
Signature of Notarial Officer

My Commission Expires: 5/13/2028

BOARD OF COUNTY COMMISSIONERS
Sheridan County, Wyoming

Attest:

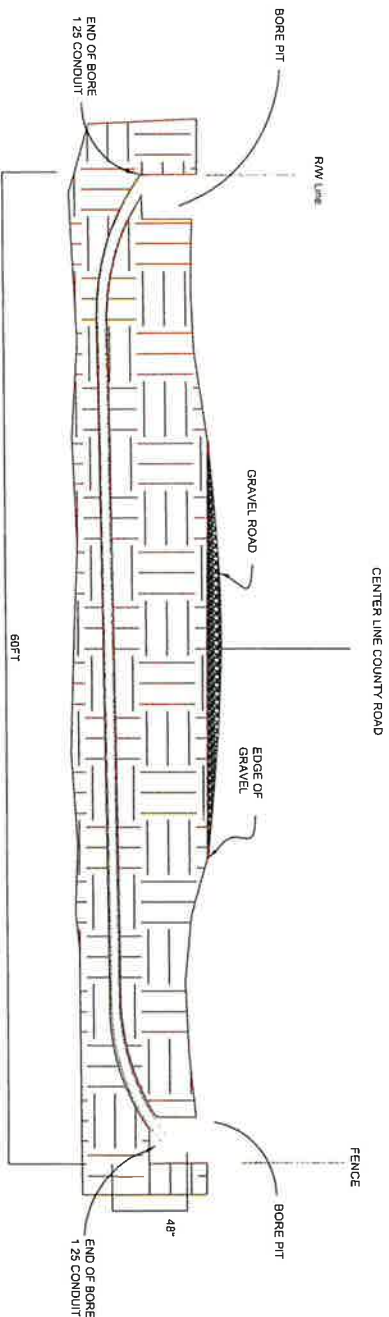
By: _____
Chairman

County Clerk

BORE CROSSING # 1

Eest of the intersection of Ulm Rd and Dutch Creek Rd

Boring north to south



SEE SHT. OF

SEE SHT. OF

LEGEND		RANGE
EXISTING SUB	EXISTING SUB	
NEW VENTED SUB	NEW VENTED SUB	
JOINT LINE	JOINT LINE	
EXISTING DRAINAGE	EXISTING DRAINAGE	
NEW DRAINAGE	NEW DRAINAGE	
EXISTING FISH	EXISTING FISH	
NEW FISH	NEW FISH	
EXISTING BURIED	EXISTING BURIED	
NEW BURIED	NEW BURIED	
EXISTING AERIAL	EXISTING AERIAL	
NEW AERIAL	NEW AERIAL	
EXISTING FIBER	EXISTING FIBER	
NEW FIBER	NEW FIBER	
EXISTING RIBB	EXISTING RIBB	
NEW RIBB	NEW RIBB	
EXISTING BURIED	EXISTING BURIED	
NEW BURIED	NEW BURIED	
EXISTING AREA	EXISTING AREA	
NEW AREA	NEW AREA	
EXISTING FENCE	EXISTING FENCE	
NEW FENCE	NEW FENCE	
EXISTING DRAIN	EXISTING DRAIN	
NEW DRAIN	NEW DRAIN	
EXISTING POWER	EXISTING POWER	
NEW POWER	NEW POWER	
EXISTING WATER	EXISTING WATER	
NEW WATER	NEW WATER	
EXISTING FENCE	EXISTING FENCE	
NEW FENCE	NEW FENCE	
EXISTING ROAD	EXISTING ROAD	
NEW ROAD	NEW ROAD	

EXCH	SE SHERIDAN
SERV AREA	DOWP HUT
ROUTE	
SO #	
MO #	1025912
CONTRACT #	
STATE	WYOMING
COUNTY	SHERIDAN
CITY	UCROSS
TWP	56 N
RNG	82 W
SEC	29
TAX DIST	03-0202
STAGED BY:	FAM
DATE	3/18/25
REVISION	DESCRIPTION
1	
2	
3	
4	
CONST. SHT.	1 OF 1
CONST. DATE	
AS BUILT DATE	
SUB. INFO.	
ULM ROAD	
CROSSING # 1	
6TH P.M., SHERIDAN	
COUNTY WYOMING	
TOWNSHIP 56NORTH	
RANGE 82 WEST,	
SE1/4 SECTION 29	



March 18, 2025

Sheridan County Public Works
County Engineer
224 S. Main St. Suite 428
Sheridan, WY 82801

RE: Right-of-way License - Provide new service across Ulm Road (49) and along Dutch Creek Road (161)
Range Work Order No. 1025912

Board of Commissioners :

Range has received requests for ungraded broadband services along Dutch Creek Rd. These requests have been received by the following:

Lindy and Sheridan Burgess of 22 Dutch Creek Rd
Jame Hardesty of 133 Dutch Creek Rd
Jarrod and Sandra Green of 100 Dutch Creek Rd
Kayla Brown of 244 Dutch Creek Rd

Range is requesting permission to bury communication cables across Ulm Rd. in SW1/4 Sections 29, Township 56 North, Range 82 West, Crossing #1. Along and crossing Dutch Creek Rd located in SW1/4 of Section 29, Township 56 East, Range 82 West, Crossing # 2. Crossing in the NW1/4SE1/4 Section 32, Township 56 North, Range 82 West, Crossing #3. Crossing in the NE1/4NE1/4 of Section 8, Township 55 North, Range 82 West, Crossing #4. These placements will allow Range to provide new and improved telecommunications services to the above listed customers along Dutch Creek Rd.

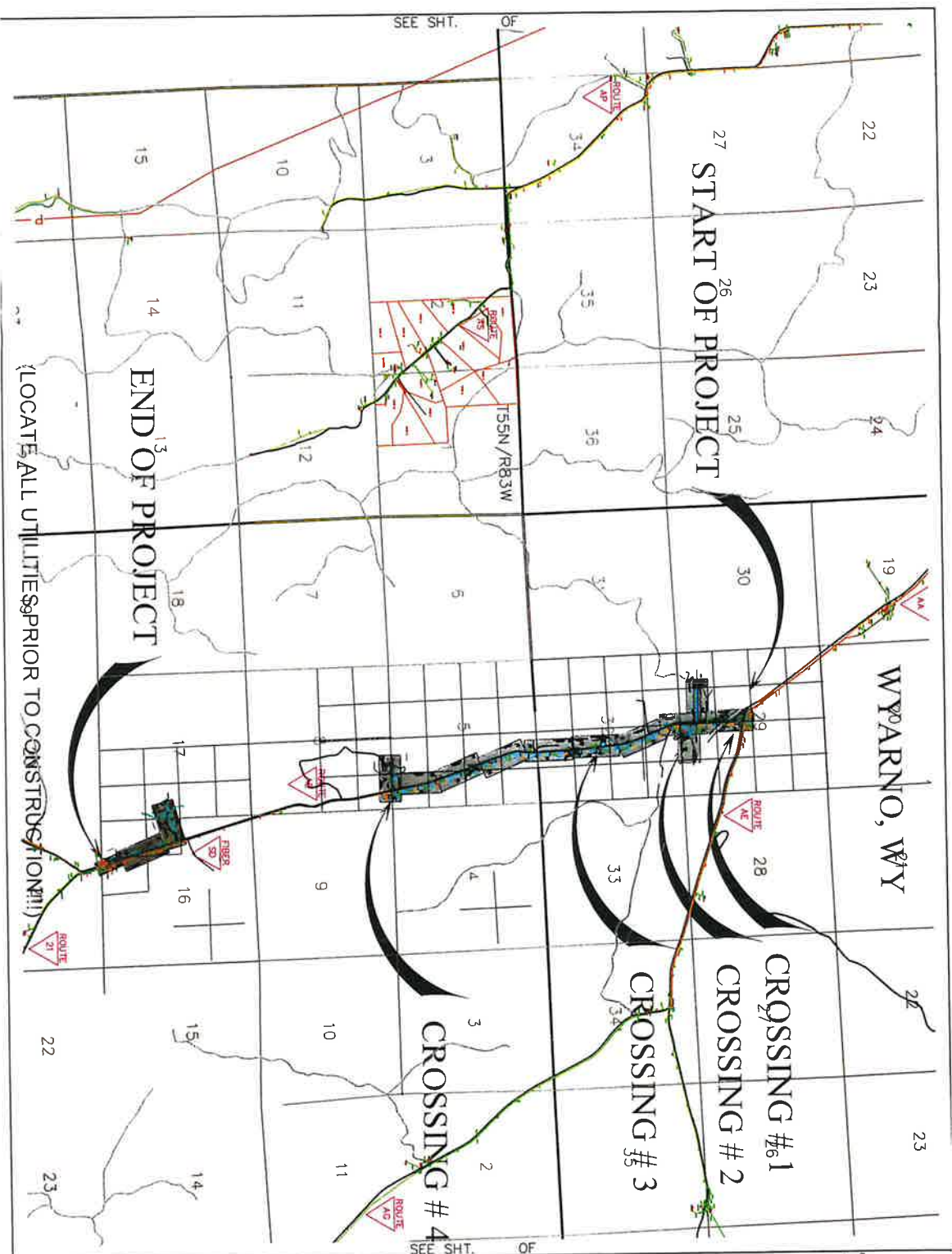
Enclosed is a signed and notarized Right-Of-Way License along with drawings showing the proposed placement of cable, which will be bored across the existing county right-of-way. We ask that you wave the permit fees as we are doing this work in order to provide services to individual residences in this area. Once approved, Range will coordinate with you on our dates and time for the proposed construction.

If you have any questions or comments regarding this matter, please call Frank Miller, Engineer, or write to PO Box 127 Forsyth, Montana 59327, or call 1-406-347-2882.

Thank you for your assistance in this matter.

A handwritten signature in blue ink that reads "Frank Miller". The signature is written in a cursive style with a large, stylized "F" and "M".

Frank Miller
Engineer



SHERIDAN COUNTY LICENSE AGREEMENT

Submit to: Public Works Department, 224 S. Main Street, Suite 428, Sheridan, WY 82801; (307) 674-2920

License requested for County Road DUTCH CREEK ROADMile Post _____ Township/Range/Section T56N. R82W. SEC 29 NESWGPS Coordinates START: 44.797201 / -106.758801 - CROSSING 44.793601 / -106.7581Type of installation proposed PLACEMENT BFO48 + BORE BFO4 (FIBER OPTIC)SKETCH (or attach separately)PLACEMENT + CROSSING #2SEE ATTACHED SHEETS**INSPECTION FEE SCHEDULE**

Select the type of installation you will be making

- ☐ Open Trench Installation/Repair, perpendicular to roadway centerline: \$600.⁰⁰ plus \$6.00 per foot
Compaction test under roadway required.
- ☐ Open Trench Installation/Repair, parallel to roadway centerline: \$600.⁰⁰ plus \$2.40 per foot
Compaction test under roadway required.
- ☒ Plowed type installation: \$600.⁰⁰ plus \$0.25 per foot.
- ☐ Overhead install with poles or structures in County ROW: \$600.⁰⁰ plus \$0.25 per foot
- ☐ Overhead install without poles or structures in County ROW: \$150.⁰⁰ plus \$0.25 per foot
- ☒ Bored crossing: \$150.⁰⁰ plus \$0.25 per foot of installation/repair.

Additional inspection fees may apply.

\$ 750.00 Fee for type of installation
 + \$ 133.75 (\$ 0.25 per foot x 535 feet)
 \$ 883.75 Total Fee

REQUEST FOR A WAIVERExceptions

- a. Service for utilities for individual residences may be exempt from charges, however, an application with a waiver request (including name & address of the individual) must be filed with the Public works department.
- b. For joint trench installation, only one fee will be charged. All utilities using the joint trench shall be listed on the application.
- c. For repair work, the fee may be charged only when work disturbs roadway surface.

If an exception is desired, applicant shall submit a request in writing to the public works department. The department shall make a recommendation to the Board of County Commissioners, who shall take action to accept, reject, or modify the proposed exception.

AGREEMENT

I, the undersigned applicant, request a Sheridan County License Agreement to construct the aforementioned installation at the above location, subject to the terms of Sheridan County Master License Agreement No. M07-07 entered with Sheridan County.

Company RANGE Rep. Name FRANK MILLER Title ENGAddress 2375 FRONT ST City/State/Zip FORSYTH MT 59327Phone 406-347-2882 Email frank.miller@range.net

Reviewed and approved by Sheridan County Public Works Department:

Frank Miller
 County Representative Signature

3-24-25
 Date

APPROVAL

By signing below, the parties agree to the terms of this agreement, and that this License Agreement is subject to the terms of the Sheridan County Master License Agreement No. MD7-07, which is hereby incorporated by reference. Any person signing below certifies he or she has been properly authorized to enter into this Agreement by his or her respective party.

RANGE
GRANTEE (Company Name)

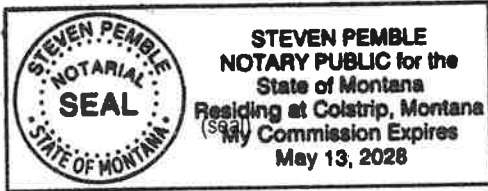
BY: Frank Miller
Authorized Representative Signature

FRANK MILLER - ENG DATE: 3-17-25
Printed Representative Name & Title

STATE OF ~~WYOMING~~)
MONTANA) ss.
COUNTY OF SHERIDAN)
ROSEBUD

The foregoing instrument was acknowledged before me on 3/17/25 by

Frank Miller
Name of Person



WITNESS my hand and official seal.

[Signature]
Signature of Notarial Officer

My Commission Expires: 5/13/2028

BOARD OF COUNTY COMMISSIONERS
Sheridan County, Wyoming

Attest:

By: _____
Chairman

County Clerk

SEE SHT. OF



March 18, 2025

Sheridan County Public Works
County Engineer
224 S. Main St. Suite 428
Sheridan, WY 82801

RE: Right-of-way License - Provide new service across Ulm Road (49) and along Dutch Creek Road (161)
Range Work Order No. 1025912

Board of Commissioners :

Range has received requests for ungraded broadband services along Dutch Creek Rd. These requests have been received by the following:

Lindy and Sheridan Burgess of 22 Dutch Creek Rd
Jame Hardesty of 133 Dutch Creek Rd
Jarrod and Sandra Green of 100 Dutch Creek Rd
Kayla Brown of 244 Dutch Creek Rd

Range is requesting permission to bury communication cables across Ulm Rd. in SW1/4 Sections 29, Township 56 North, Range 82 West, Crossing #1. Along and crossing Dutch Creek Rd located in SW1/4 of Section 29, Township 56 East, Range 82 West, Crossing # 2. Crossing in the NW1/4SE1/4 Section 32, Township 56 North, Range 82 West, Crossing #3. Crossing in the NE1/4NE1/4 of Section 8, Township 55 North, Range 82 West, Crossing #4. These placements will allow Range to provide new and improved telecommunications services to the above listed customers along Dutch Creek Rd.

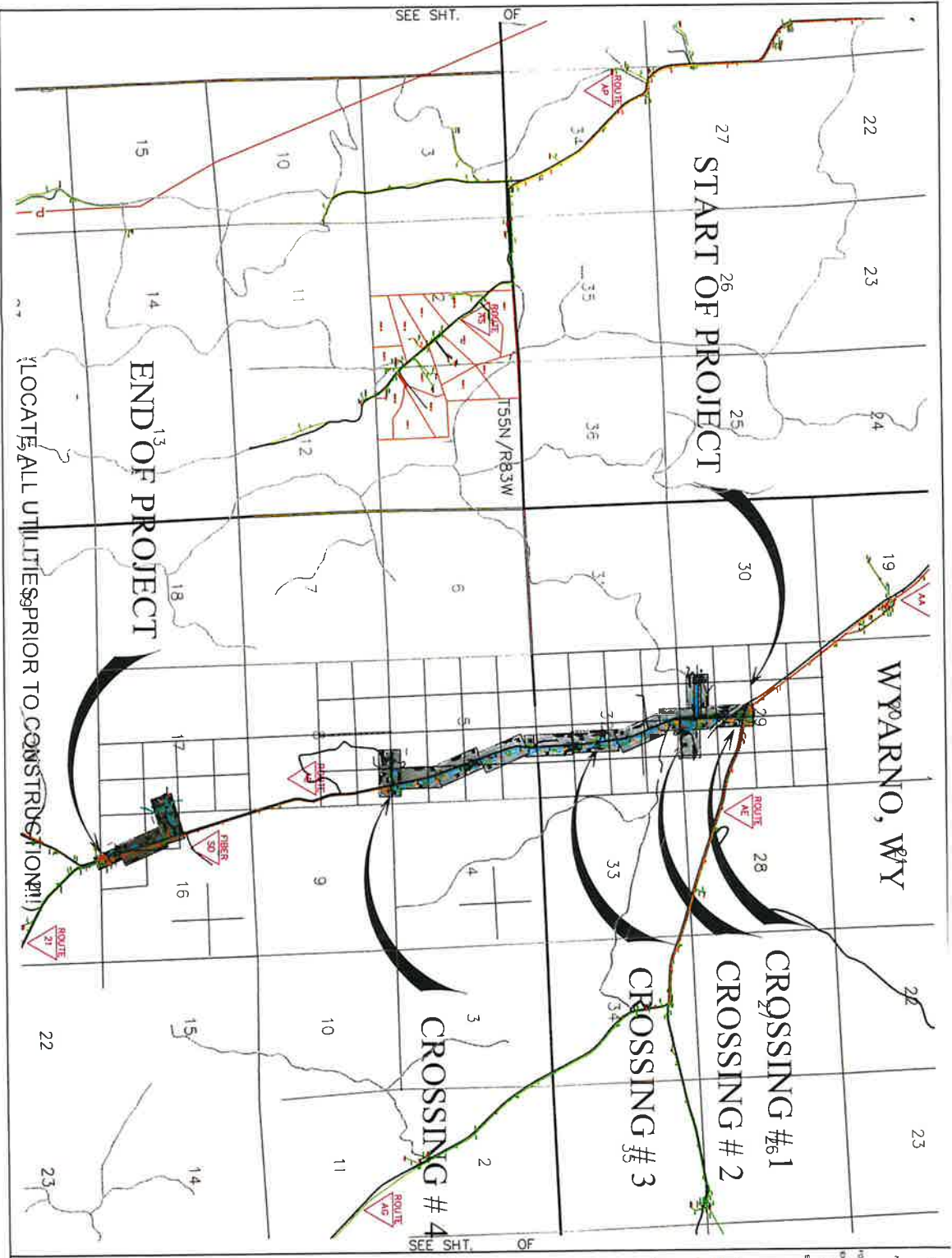
Enclosed is a signed and notarized Right-Of-Way License along with drawings showing the proposed placement of cable, which will be bored across the existing county right-of-way. We ask that you wave the permit fees as we are doing this work in order to provide services to individual residences in this area. Once approved, Range will coordinate with you on our dates and time for the proposed construction.

If you have any questions or comments regarding this matter, please call Frank Miller, Engineer, or write to PO Box 127 Forsyth, Montana 59327, or call 1-406-347-2882.

Thank you for your assistance in this matter.

A handwritten signature in blue ink that reads "Frank Miller". The signature is written in a cursive style with a large, stylized "F" and "M".

Frank Miller
Engineer



LEGEND			
EXISTING SUB		RANGE	
NEW SUB		SE SHERIDAN	
EXISTING PAVEMENT		SESH-DOWP	
NEW PAVEMENT		3A	
EXISTING BARRIERS		ROUTE	
NEW BARRIERS		SO #	
EXISTING BARRIERS		1025912	
NEW BARRIERS		CONTRACT #	
EXISTING BARRIERS		STATE	
NEW BARRIERS		COUNTY	
EXISTING BARRIERS		CITY	
NEW BARRIERS		TWP	
EXISTING BARRIERS		RNG	
NEW BARRIERS		SEC-CD	
EXISTING BARRIERS		TAX DIST.	
NEW BARRIERS		DRAWN BY:	
EXISTING BARRIERS		FAM	
NEW BARRIERS		3/14/25	
EXISTING BARRIERS		REVISION	
NEW BARRIERS		DESCRIPTION	
EXISTING BARRIERS		REVISION	
NEW BARRIERS		DESCRIPTION	
EXISTING BARRIERS		SHEET	
NEW BARRIERS		1 OF 1	
EXISTING BARRIERS		CONST. SHT.	
NEW BARRIERS		1 OF 1	
EXISTING BARRIERS		CONST. DATE	
NEW BARRIERS		AS BUILT DATE	
EXISTING BARRIERS		SUB. INFO.	
NEW BARRIERS		BARRY BAUER	
EXISTING BARRIERS		EXHIBIT MAP	
NEW BARRIERS		6TH P.M., SHERIDAN	
EXISTING BARRIERS		COUNTY WYOMING	
NEW BARRIERS		TOWNSHIP 53NORTH,	
EXISTING BARRIERS		RANGE 80 WEST,	
NEW BARRIERS		SE1/4 SECTION 9	

SHERIDAN COUNTY LICENSE AGREEMENT

Submit to: Public Works Department, 224 S. Main Street, Suite 428, Sheridan, WY 82801; (307) 674-2920

License requested for County Road DUTCH CREEK ROAD
Mile Post _____ Township/Range/Section T56N, R82W, SEC 32NWSEGPS Coordinates 44.783601 / -106.756001Type of installation proposed PLACEMENT OF BFO4 (FIBER OPTIC) BORESKETCH (or attach separately)CROSSING # 3

SEE ATTACHED SHEET

INSPECTION FEE SCHEDULE

Select the type of installation you will be making

- ☐ Open Trench Installation/Repair, perpendicular to roadway centerline: \$600.00 plus \$6.00 per foot
Compaction test under roadway required.
- ☐ Open Trench Installation/Repair, parallel to roadway centerline: \$600.00 plus \$2.40 per foot
Compaction test under roadway required.
- ☐ Plowed type installation: \$600.00 plus \$0.25 per foot.
- ☐ Overhead install with poles or structures in County ROW: \$600.00 plus \$0.25 per foot
- ☐ Overhead install without poles or structures in County ROW: \$150.00 plus \$0.25 per foot
- ☒ Bored crossing: \$150.00 plus \$0.25 per foot of installation/repair.

Additional inspection fees may apply.

\$ 150.00 Fee for type of installation
+ \$ 15.00 (\$.25 per foot x 60 feet)
\$ 165.00 Total Fee

REQUEST FOR A WAIVER

Exceptions

- a. Service for utilities for individual residences may be exempt from charges, however, an application with a waiver request (including name & address of the individual) must be filed with the Public works department.
- b. For joint trench installation, only one fee will be charged. All utilities using the joint trench shall be listed on the application.
- c. For repair work, the fee may be charged only when work disturbs roadway surface.
- If an exception is desired, applicant shall submit a request in writing to the public works department. The department shall make a recommendation to the Board of County Commissioners, who shall take action to accept, reject, or modify the proposed exception.

AGREEMENT

I, the undersigned applicant, request a Sheridan County License Agreement to construct the aforementioned installation at the above location, subject to the terms of Sheridan County Master License Agreement No. 107-07 entered with Sheridan County.

Company RANGE Rep. Name FRANK MILLER Title ENG
Address 2325 FRONT ST City/State/Zip FORSYTH MT 59327
Phone 406-347-7882 Email frank.miller@range.net

Reviewed and approved by Sheridan County Public Works Department:

Frank Miller
County Representative Signature

3-24-25
Date

APPROVAL

By signing below, the parties agree to the terms of this agreement, and that this License Agreement is subject to the terms of the Sheridan County Master License Agreement No. MD7-07, which is hereby incorporated by reference. Any person signing below certifies he or she has been properly authorized to enter into this Agreement by his or her respective party.

RANGE
GRANTEE (Company Name)

BY: Frank Miller
Authorized Representative Signature

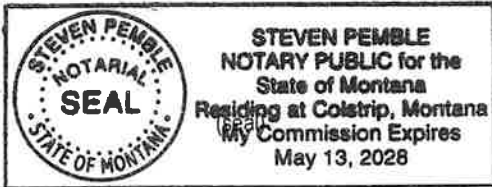
FRANK MILLER ENG
Printed Representative Name & Title

DATE: 3-17-25

STATE OF ~~WYOMING~~)
MONTANA) ss.
COUNTY OF ~~SHERIDAN~~)
ROSEBUD

The foregoing instrument was acknowledged before me on 3-17-25 by
Date

FRANK MILLER
Name of Person



WITNESS my hand and official seal.

[Signature]
Signature of Notarial Officer

My Commission Expires: 5/13/2025

BOARD OF COUNTY COMMISSIONERS
Sheridan County, Wyoming

Attest:

By: _____
Chairman

County Clerk

SEE SHT. OF

[illegible]

24.



March 18, 2025

Sheridan County Public Works
County Engineer
224 S. Main St. Suite 428
Sheridan, WY 82801

RE: Right-of-way License - Provide new service across Ulm Road (49) and along Dutch Creek Road (161)
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If you have any questions or comments regarding this matter, please call Frank Miller, Engineer, or write to PO Box 127 Forsyth, Montana 59327, or call 1-406-347-2882.

Thank you for your assistance in this matter.

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Frank Miller
Engineer

SHERIDAN COUNTY LICENSE AGREEMENT

Submit to: Public Works Department, 224 S. Main Street, Suite 428, Sheridan, WY 82801; (307) 674-2920

License requested for County Road DUTCH CREEK ROAD
 Mile Post _____ Township/Range/Section T55N. R82W SEC 5 SESE
 GPS Coordinates 44.762801 / -106.751201
 Type of installation proposed PLACEMENT BFO 4 (FIBER OPTIC) BORE

SKETCH (or attach separately)CROSSING # 4SEE ATTACHED SHEET**INSPECTION FEE SCHEDULE**

Select the type of installation you will be making

- ☐ Open Trench Installation/Repair, perpendicular to roadway centerline: \$600.⁰⁰ plus \$6.00 per foot
 Compaction test under roadway required.
- ☐ Open Trench Installation/Repair, parallel to roadway centerline: \$600.⁰⁰ plus \$2.40 per foot
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\$150.00 Fee for type of installation
 + \$15.00 (\$0.25 per foot x 60 feet)
\$165.00 Total Fee

REQUEST FOR A WAIVER**Exceptions**

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- If an exception is desired, applicant shall submit a request in writing to the public works department. The department shall make a recommendation to the Board of County Commissioners, who shall take action to accept, reject, or modify the proposed exception.*

AGREEMENT

I, the undersigned applicant, request a Sheridan County License Agreement to construct the afore-mentioned installation at the above location, subject to the terms of Sheridan County Master License Agreement No. MOI-01 entered with Sheridan County.

Company RANGE Rep. Name FRANK MILLER Title ENG
 Address 2325 FRONT ST City/State/Zip FORSYTH MT 59327
 Phone 406.347-2882 Email frank.miller@range.net

Reviewed and approved by Sheridan County Public Works Department:

Frank Miller
 County Representative Signature

3-24-25
 Date

APPROVAL

By signing below, the parties agree to the terms of this agreement, and that this License Agreement is subject to the terms of the Sheridan County Master License Agreement No. M07-07, which is hereby incorporated by reference. Any person signing below certifies he or she has been properly authorized to enter into this Agreement by his or her respective party.

RANGE
GRANTEE (Company Name)

BY:

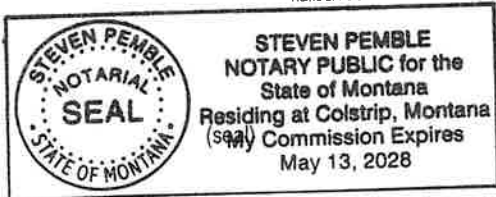
Frank Miller
Authorized Representative Signature

FRANK MILLER ENG DATE: 3-17-25
Printed Representative Name & Title

STATE OF ~~WYOMING~~)
MONTANA) ss.
COUNTY OF ~~SHERIDAN~~)

ROSEBUD
The foregoing instrument was acknowledged before me on 3-17-25 by
Date

FRANK MILLER
Name of Person



WITNESS my hand and official seal.

[Signature]
Signature of Notarial Officer

My Commission Expires: 5/13/2028

BOARD OF COUNTY COMMISSIONERS
Sheridan County, Wyoming

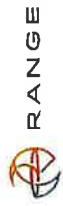
Attest:

By: _____
Chairman

County Clerk

SEE SHT. OF

[illegible]



RANGE



RANGE

EXCH. SE SHERIDAN

SERV. AREA SESIDOWP

ROUTE F3A

SQ #

WO # 1025912

CONTRACT #

STATE WYOMING

COUNTY SHERIDAN

CITY SHERIDAN

TWP 55 N R82 W SEC 00 NE 8

TAX DIST. 03-0202

STAKED BY: FAM 1/22/25

DRAWN BY:

REVISION

REVISION

REVISION

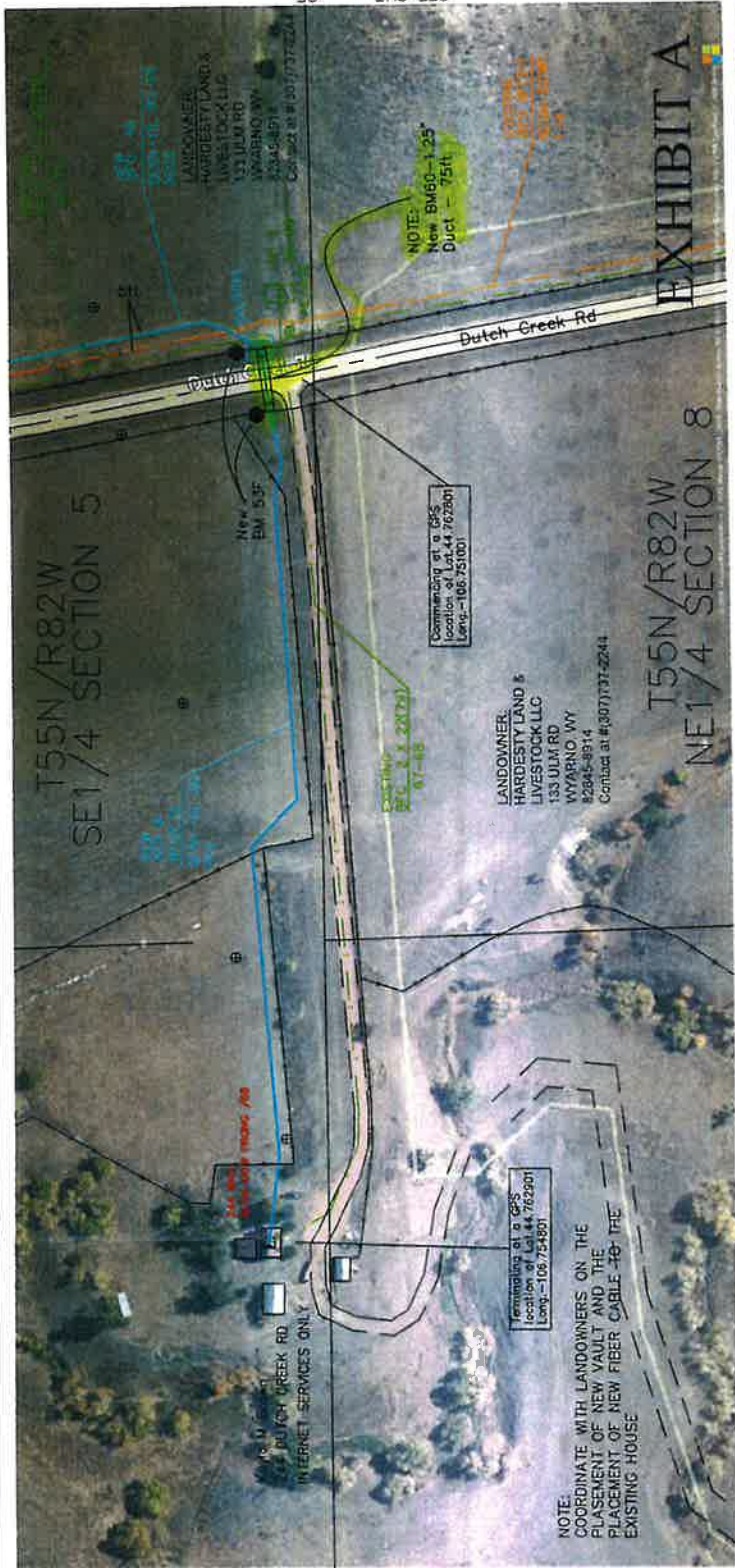
SHEET 9 OF 9

CONST. SHT. 8 OF 37

CONST. DATE

AS BUILT DATE

SUB. INFO.



HAZARDOUS PED OR POLE NUMBER	BM3	BUD3A	BM60 (1.25) SEC 00	BM42	BM3	BM70	BM53F	BFO 6	BFO 6	SEB04 BFOV75	BHFO EDD-0034	HEFO BM	HO-1	SUB NO. (2025)	Cable Type	Start Seq	End Seq	Unit	Waste
F3A0H4	1	1	85	1	1	1	1	1	6570	1246	1	1	1	1	244 Dutch Creek Rd				
TABLE	1	1	85	2	1	###	2	###	6570	1246	1	1	2	1				###	###

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY

Customer #: C1771

Trf from:

Reviewer: Initials

Date

Agent:

Mgr:

To be completed by City / Town / County Clerk

Local License #: 8025-L-9045

License

Fees Annual Fee: \$1500.00

Date filed with clerk: 1/1/2025

Prorated Fee: \$

Advertising Dates: (2 Consecutive Weeks Prior to Hearing)

Transfer Fee: \$

March 7, 2025 & March 14, 2025

Publishing Fee: \$15.00

Public Hearing Date: April 1, 2025

Publishing Fee Direct Billed to Applicant: ☐

License Term: 6/1/2025

Through

5/31/2026

LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.

Applicant (Business Name): EATON BROTHERS INC

Doing Business As (DBA) / Trade Name: EATON'S RANCH

Building to be licensed / Building Address: 270 EATONS RANCH RD

WOLF, WY 82844 SHERIDAN

Local Mailing Address: 270 EATONS RANCH RD

WOLF, WY 82844

Local Business Telephone Number: (307) 655-9285

Fax Number:

(307) 655-9269

Business E-Mail Address: jeffway@eatonsranch.com

Business Primary Contact:

JEFF

First Name

WAY

Last Name

FILING IN:

SHERIDAN COUNTY

FILING AS:

CORPORATION (INC)

TYPE OF LICENSE OR PERMIT: RETAIL LIQUOR LICENSE

RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)

☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE

SPECIAL STATUTORY DESIGNATIONS

(NONE IF BLANK)

GUEST RANCH DESIGNATION W.S. 12-5-201(f)

OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))

☐ FULL TIME

MONTHS OF OPERATION

from JAN to MAY

☐ All Year (Jan-Dec)☒ SEASONAL

DAYS OF WEEK OF OPERATION:

from MON to SUN

☒ Every Day (Mon-Sun)☐ NON-OPERATIONAL / PARKED

HOURS OF OPERATION

from 4 PM to 10 PM

☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

(a) The Applicant OWNS the licensed building.

☒ YES (own)

(b) The Applicant LEASES the licensed building.

☐ YES (lease)

(c) The Lease is current and on file with the licensing authority and Liquor Division.

☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

(i) Lease term expiration date; located on page _____ paragraph _____.

Note: The lease term **MUST** continue at least through the term of the liquor license or permit(ii) **Sales** provision for alcoholic or malt beverages; located, on page _____ paragraph _____.**Note:** The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES.**

ALL APPLICANTS MUST COMPLETE QUESTIONS 2 and 3**2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)**

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 3) Entertainment Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?
1. If NO to (g), please attach a current copy the club bylaws. ☐ YES ☐ NO
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
SEE ATTACHED						YES ☐	YES ☐
						NO ☐	NO ☐
						YES ☐	YES ☐
						NO ☐	NO ☐
						YES ☐	YES ☐
						NO ☐	NO ☐
						YES ☐	YES ☐
						NO ☐	NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approval permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)

) SS.

COUNTY OF Frederick)

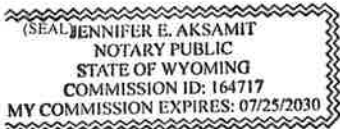
Signed and sworn to before me on this 18th day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>William T. Ferguson</u> (Signature)	<u>William T. Ferguson</u> (Printed Name)	<u>President</u> Title
2) <u>Jeffrey E. Way</u> (Signature)	<u>JEFFREY E. WAY</u> (Printed Name)	<u>Treasurer</u> Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:

My commission expires: 7/25/2030

Signature of Notary Public



RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY			
Customer #:	C545		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9033</u>
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>3/13/2025</u>
	Prorated Fee: \$	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		

Applicant (Business Name):	<u>BLAIR HOTELS INC</u>		
Doing Business As (DBA) / Trade Name:	<u>THE RANCH AT UCROSS</u>		
Building to be licensed / Building Address:	<u>2673 US HWY 14 EAST</u>		
	<u>CLEARMONT, WY 82835 SHERIDAN</u>		
Local Mailing Address:	<u>PO BOX 30</u>		
	<u>CODY, WY 82414</u>		
Local Business Telephone Number:	<u>(307) 737-2281</u>	Fax Number:	<u>(307) 737-2211</u>
Business E-Mail Address:	<u>ucross@blairhotels.com</u>		
Business Primary Contact:	<u>Tyler</u>	<u>Cape</u>	
	First Name	Last Name	

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>CORPORATION (INC)</u>
TYPE OF LICENSE OR PERMIT: RETAIL LIQUOR LICENSE			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE) ☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS (NONE IF BLANK) <u>GUEST RANCH DESIGNATION W.S. 12-5-201(f)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv))) ☐ FULL TIME MONTHS OF OPERATION from <u>January</u> to <u>December</u> ☒ All Year (Jan-Dec) ☐ SEASONAL DAYS OF WEEK OF OPERATION: from <u>Sunday</u> to <u>Saturday</u> ☒ Every Day (Mon-Sun) ☐ NON-OPERATIONAL / PARKED HOURS OF OPERATION from <u>7am</u> to <u>2am</u> ☐ 24 Hours a Day			

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☒ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☐ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page _____ paragraph _____.

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) **Sales** provision for alcoholic or malt beverages: located, on page _____ paragraph _____.

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**.

ALL APPLICANTS MUST COMPLETE QUESTIONS 2 and 3**2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)**

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 3) Entertainment Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? ☐ YES ☐ NO
(W.S. 12-1-101(a)(xix))
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If NO to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Frederick G. Blair	5-28-54	5586 Cecyhall Hwy Cody, WY 82414	307-272-5555	31	100%	YES ☐ NO ☒	YES ☐ NO ☒
James M. Blair	9-13-71	831 Outlook Court Cody, WY 82414	307-272-9015	11	0%	YES ☐ NO ☒	YES ☐ NO ☒
Lloyd Tyler Cope	11-29-86	240 Grand St. Powell, WY 82414	307-763-2115	1	0%	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approve permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING

COUNTY OF Park)
) SS.

Signed and sworn to before me on this 27 day of Jan, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>[Signature]</u> (Signature)	<u>Frederick G. Blair</u> (Printed Name)	<u>LFO</u> Title
2) <u>[Signature]</u> (Signature)	<u>Tyler Cope</u> (Printed Name)	<u>CFO</u> Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:

Melinda Jones
 Signature of Notary Public

(SEAL)

My commission expires: 1-3-29



RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY

Customer #:	H6856		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #:	<u>2035-L-9042</u>
License Fees	Annual Fee: \$500.00	Date filed with clerk:	<u>1/1</u>
	Prorated Fee: \$	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)	
	Transfer Fee: \$	March 7, 2025 & March 14, 2025	
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025	
Publishing Fee Direct Billed to Applicant: ☐			
License Term:	<u>6/1/2025</u>	Through	<u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.			
Applicant (Business Name): <u>BIG HORN MERC PIZZA LLC</u>			
Doing Business As (DBA) / Trade Name: <u>BIG HORN MERCANTILE</u>			
Building to be licensed / Building Address: <u>210 JOHNSON ST</u>			
<u>BIG HORN, WY 82833 SHERIDAN</u>			
Local Mailing Address: <u>PO BOX 775</u>			
<u>BIG HORN, WY 82833</u>			
Local Business Telephone Number: <u>(307) 672-5534</u>		Fax Number:	
Business E-Mail Address: <u>kirstin.maestri@yahoo.com</u>			
Business Primary Contact: <u>Kirstin</u>		<u>Maestri</u>	
		First Name Last Name	

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RESTAURANT LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME		MONTHS OF OPERATION	from <u>JAN</u> to <u>DEC</u> ☐ All Year (Jan-Dec)
☐ SEASONAL		DAYS OF WEEK OF OPERATION:	from <u>MON</u> to <u>SAT</u> ☐ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED		HOURS OF OPERATION	from <u>M/T 4-8</u> to <u>W-F 11-8</u> ☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☐ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☐ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page
- on file
- paragraph _____.

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii)
- Sales**
- provision for alcoholic or malt beverages: located, on page _____ paragraph _____.

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**.

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$27,338 (5 %)
(Line 2) Food Sales: \$519,427 (95 %)
(Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$546,765 (100 %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
(Line 2) Food Sales: \$ _____ (_____ %)
(Line 3) Entertainment Sales: \$ _____ (_____ %)
(Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If **YES** to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If **NO** to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If **NO** to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Frank J. Marsh, Jr.	3-10-73	Shenandoah 26 Jack Dr. 822801	775-750-7476	4	100	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☒ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approval permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING

COUNTY OF Shenandoah) SS.

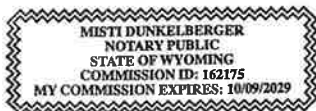
Signed and sworn to before me on this 14th day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>[Signature]</u> (Signature)	<u>Frank Marsh, Jr.</u> (Printed Name)	<u>Owner</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:

[Signature]
Signature of Notary Public

(SEAL)

My commission expires: 10/9/2029

NEW OR TRANSFER LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY

Customer #:

Trf from:

Reviewer:

Initials

Date

Agent:

Mgr:

To be completed by City / Town / County Clerk

Local License #: 2025-L-9056

License Fees

Annual Fee:

\$ 500.00sm

Date filed with clerk: 3 / 11 / 2025

Prorated Fee:

\$ 83.34

Advertising Dates: (2 Consecutive Weeks Prior to Hearing)

Transfer Fee:

\$

March 21 & March 28

Publishing Fee:

\$ 76.19

Public Hearing Date: 4 / 1 / 2025

Publishing Fee Direct Billed to Applicant: ☐License Term: 4 / 1 / 2025 Through 5 / 31 / 2025
Month Day Year Month Day Year

LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.

Applicant (Business Name):

NOLA SHERIDAN LLC.

Doing Business As (DBA) / Trade Name:

NOLA CATERING + PRIVATE DINING

Building to be licensed / Building Address:

6 N. PINEY RD

(Address Number, and Suite or Unit Number, and Street or Road Name)

STORY

WY

82832

SHERIDAN

City

State

Zip

County

Local Mailing Address:

6 N. PINEY RD

(Address Number or PO Box, and Suite or Unit Number, and Street or Road Name)

STORY

WY

82832

SHERIDAN

City

State

Zip

County

Local Business Telephone Number:

(307) 763-2256

Fax Number:

Business E-Mail Address:

MEGAN@NOLAWYOMING.COM

Business Primary Contact:

MEGAN

MENTZER

First Name

Last Name

FILING FOR

☒ NEW LICENSE☐ TRANSFER OF LOCATION☐ TRANSFER OF OWNERSHIP☐ ASSIGNMENT LETTER MUST BE ATTACHED

FORMERLY HELD BY:

FILING IN (CHOOSE ONLY ONE)

☐ CITY / TOWN OF:☒ COUNTY OF:

SHERIDAN

FILING AS (CHOOSE ONLY ONE)

☐ INDIVIDUAL☐ PARTNERSHIP☐ LP☐ LLP☐ LLLP☐ LLC☐ LC☐ CORPORATION (INC)☐ POLITICAL SUBDIVISION☐ ORGANIZATION☐ OTHER

TYPE OF LICENSE OR PERMIT (CHOOSE ONLY ONE)

☐ RETAIL LIQUOR LICENSEPRIMARY BUSINESS TYPE
(CHOOSE ONLY ONE)☐ ON-PREMISE BAR☐ OFF-PREMISE PACKAGE STORE☐ ON & OFF PREMISE BAR &
PACKAGE STORE☒ RESTAURANT LIQUOR LICENSE
☐ BAR AND GRILL LIQUOR LICENSE
☐ RESORT LIQUOR LICENSELIMITED RETAIL LIQUOR LICENSE
(CLUB)☐ VETERANS CLUB
☐ FRATERNAL CLUB
☐ GOLF CLUB
☐ SOCIAL CLUB☐ MICROBREWERY PERMIT☐ WINERY PERMIT☐ MANUFACTURER SATELLITE PERMIT☐ WINERY SATELLITE PERMIT☐ COUNTY MALT BEVERAGE PERMIT☐ SPECIAL MALT BEVERAGE PERMIT

SPECIAL STATUTORY DESIGNATIONS (CHOOSE ONLY ONE)

☐ COMMERCIAL AIRPORT (W.S. 12-4-201(d)(iv))☐ GOLF CLUB (W.S. 12-5-201(f))☐ GUEST RANCH (W.S. 12-5-201(f))☐ RESORT☐ GOLF CLUB-POLIT. SUBDIVISION☐ Other:

(W.S. 12-4-401(iv) / 12-5-201(f))

(W.S. 12-4-301(e) / 12-5-201(f))

OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv))

☒ FULL TIME☐ SEASONAL☐ NON-OPERATIONAL / PARKED

MONTHS OF OPERATION

from to ☒ All Year (Jan-Dec)

DAYS OF WEEK OF OPERATION

from to ☒ Every Day (Mon-Sun)

HOURS OF OPERATION

from 9AM to 2AM ☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3**1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)**

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building.
 (b) The Applicant **LEASES** the licensed building.

☐ YES (own)
☒ YES (lease)

If the building is leased, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page 1 paragraph 3/4.

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) **Sales** provision for alcoholic or malt beverages: located, on page 1 paragraph 1.

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**.**2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)**

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building?

☐ YES ☒ NO

- (b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403 -

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
 (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
 (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
 (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city?

☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted?

☐ YES ☐ NO

1. If **YES**, is a copy of the food and beverage contract or lease attached?

☐ YES ☐ NO

6. BAR AND GRILL LICENSE OR RESTAURANT LIQUOR LICENSE ONLY: 12-4-413(a) / W.S. 12-4-407(a)

Is a copy of the valid food service permit or the approved permit application attached?

☒ YES ☐ NO

7. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
 (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
 (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
 (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
 (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
 1. If **YES** to (e), is a copy of the food and beverage contract or lease attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: WHOLESALE DISTRIBUTION: W.S. 12-2-201(a)

- (a) Will the microbrewery self-distribute its products or distribute through a licensed wholesaler? ☐ YES ☐ NO

If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. LIMITED RETAIL (CLUB) LIQUOR LICENSE:**FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)**

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE:**VETERANS CLUBS W.S. 12-1-101(a)(iii)(A):**

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its duly organized auxiliary? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE:**GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e):**

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES, is a copy of the food and beverage contract or lease attached? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE:**SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b):**

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws attached to this application? ☐ YES ☐ NO
- (h) Has at least fifty one percent (51%) of the membership signed a petition indicating a desire to secure a Limited Retail Liquor License? (Petition(s) Attached) ☐ YES ☐ NO

13. Applicant is Filing As Individual, Partnership, Political Subdivision, Organization or Other:
W.S. 12-4-102(a)(ii) & (iii)

Each individual, partner or officer (as applicable) must complete all of the information below.
 (If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

(7/23)

14. Applicant is Filing As a Corporation, Limited Company, Limited Liability Company, Limited Liability Partnership or Limited Partnership: W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
MEGAN MENTZER	11/21/ 1988	18 N. PINEY RD. 307- BANNER, WY. 82803 743- 2254		2 yrs	100%	YES ☐ NO ☒	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS:

- ☒ A statement indicating the financial condition and financial stability of the Applicant. W.S. 12-4-102(a)(vi).
- ☐ If transferring a license or permit to another Applicant, attach a form of assignment from the current licensee to the new Applicant authorizing the transfer. W.S. 12-4-601(b).
- ☒ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☒ Bar & Grill and Restaurant liquor license Applicants: attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)
- ☐ If filing for a Golf Club or Social Club liquor license attach a copy of the club's bylaws W.S. 12-4-301(c)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)

COUNTY OF Shoshone) S.S.

Signed and sworn to before me on this 11 day of March, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>[Signature]</u> (Signature)	<u>MEGAN MENTZER</u> (Printed Name)	<u>OWNER</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title



Witness my hand and official seal:

[Signature]
Signature of Notary Public
My commission expires: 10/9/2029

1500RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

9A

FOR LIQUOR DIVISION USE ONLY			
Customer #:	B7097		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9036</u>
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 4 / 2025</u>
	Prorated Fee: \$ _____	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$ _____	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		

Applicant (Business Name):	<u>ALBATRAOZ LLC</u>	
Doing Business As (DBA) / Trade Name:	<u>LAST CHANCE BAR</u>	
Building to be licensed / Building Address:	<u>44 JOHNSON ST</u>	
	<u>BIG HORN, WY 82833 SHERIDAN</u>	
Local Mailing Address:	<u>10 CATO DR</u>	
	<u>SHERIDAN, WY 82801</u>	
Local Business Telephone Number:	<u>(307) 674-8369</u>	Fax Number:
Business E-Mail Address:	<u>albatraozchance@gmail.com</u>	
Business Primary Contact:	<u>Jessica</u>	<u>Winner</u>
	First Name	Last Name

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME	MONTHS OF OPERATION	from <u>Jan</u> to <u>Dec</u> ☒ All Year (Jan-Dec)	
☐ SEASONAL	DAYS OF WEEK OF OPERATION:	from <u>Mon</u> to <u>Sun</u> ☒ Every Day (Mon-Sun)	
☐ NON-OPERATIONAL / PARKED	HOURS OF OPERATION	from <u>10am</u> to <u>2am</u> ☐ 24 Hours a Day	

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

(a) The Applicant **OWNS** the licensed building.☒ YES (own)(b) The Applicant **LEASES** the licensed building.☐ YES (lease)

(c) The Lease is current and on file with the licensing authority and Liquor Division.

☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

(i) Lease term expiration date; located on page _____ paragraph _____.

Note: The lease term **MUST** continue at least through the term of the liquor license or permit(ii) **Sales** provision for alcoholic or malt beverages: located, on page _____ paragraph _____.**Note:** The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**

ALL APPLICANTS MUST COMPLETE QUESTIONS 2 and 3**2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)**

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
(Line 2) Food Sales: \$ _____ (_____ %)
(Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
(Line 2) Food Sales: \$ _____ (_____ %)
(Line 3) Entertainment Sales: \$ _____ (_____ %)
(Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If NO to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership, Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip <i>DO NOT LIST PO BOXES</i>	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Jessica Marie Winner	2/16/1987	10000 Drive Sheridan, WY 82801	307-751-2903	2.5	100%	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements, W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)
COUNTY OF Sheridan) SS.

Signed and sworn to before me on this 4 day of February, 20 25 that the facts alleged in the foregoing instrument are true by the following:

1) <u>Jessica Winner</u> (Signature)	<u>Jessica Winner</u> (Printed Name)	<u>OWNER</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:

Misti Tunk
Signature of Notary Public

My commission expires: 10/9/2029



RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

9B

FOR LIQUOR DIVISION USE ONLY			
Customer #:	C345		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9044</u>
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 19 / 2025</u>
	Prorated Fee: \$	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		

Applicant (Business Name):	<u>ARROWHEAD LODGE LLC</u>		
Doing Business As (DBA) / Trade Name:	<u>ARROWHEAD LODGE</u>		
Building to be licensed / Building Address:	<u>6002 US HWY 14</u>		
	<u>DAYTON, WY 82836 SHERIDAN</u>		
Local Mailing Address:	<u>PO BOX 390</u>		
	<u>DAYTON, WY 82836</u>		
Local Business Telephone Number:	<u>(307) 683-0111</u>	Fax Number:	
Business E-Mail Address:	<u>arrowheadlodgewy@gmail.com</u>		
Business Primary Contact:	<u>Jared</u>	<u>Severson</u>	
	First Name	Last Name	

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME	MONTHS OF OPERATION	from _____ to _____	☒ All Year (Jan-Dec)
☐ SEASONAL	DAYS OF WEEK OF OPERATION:	from <u>Mon</u> to <u>Sun</u>	☐ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED	HOURS OF OPERATION	from <u>7 AM</u> to <u>2 AM</u>	☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☒ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☐ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) Sales provision for alcoholic or malt beverages: located, on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**.

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 3) Entertainment Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If **YES** to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If **NO** to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If **NO** to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Charlene Severson	2-20 -73	6002 US Hwy 14 Dayton, WY 82836	701-770- 3310	9	51%	YES ☐ NO ☒	YES ☐ NO ☒
Jared Severson	6-4 -79	6002 US Hwy 14 Dayton, WY 82836	701-570- 4898	9	49%	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approve permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING

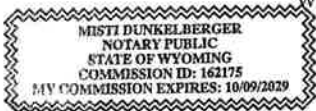
) SS.

COUNTY OF Wyoming

Signed and sworn to before me on this 19 day of February, 2026 that the facts alleged in the foregoing instrument are true by the following:

1) <u>Jared Severson</u> (Signature)	<u>Jared Severson</u> (Printed Name)	<u>Owner</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:



Misti Dunkelberger
Signature of Notary Public

My commission expires: 10/29/29

(SEAL)

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY			
Customer #:	C352		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>9025-L-9049</u>
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 20 / 25</u>
	Prorated Fee: \$ _____	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$ _____	March 7, 2025 & March 14, 2025
	Publishing Fee: 15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		

Applicant (Business Name):	<u>ARVADA BAR LLC</u>		
Doing Business As (DBA) / Trade Name:	<u>ARVADA BAR</u>		
Building to be licensed / Building Address:	<u>14 RAILWAY ST</u>		
	<u>ARVADA, WY 82831 SHERIDAN</u>		
Local Mailing Address:	<u>PO BOX 81</u>		
	<u>ARVADA, WY 82831</u>		
Local Business Telephone Number:	<u>(307) 736-2443</u>	Fax Number:	
Business E-Mail Address:	<u>krismalli@yahoo.com</u>		
Business Primary Contact:	<u>Kris</u>	<u>Malli</u>	
	First Name	Last Name	

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME	MONTHS OF OPERATION	from <u>Jan</u> to <u>Dec</u>	☒ All Year (Jan-Dec)
☐ SEASONAL	DAYS OF WEEK OF OPERATION:	from <u>Tues</u> to <u>Sunday</u>	☐ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED	HOURS OF OPERATION	from <u>12:00</u> to <u>2:00</u>	☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☒ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☐ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) **Sales** provision for alcoholic or malt beverages: located, on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES.**

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☒ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 3) Entertainment Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If NO to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Kris Malli	9/24/71	367 Wild Horse Rd Arvada, WY 82833	307 752-5543	12 years	50%	YES ☐ NO ☒	YES ☐ NO ☒
LeRoy Malli	4/19/68	367 Wild Horse Rd Arvada, WY 82830	307 751-6494	12 years	50%	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approve permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING

COUNTY OF Shoshone,)
) SS.

Signed and sworn to before me on this 20 day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1)	<u>Kris Malli</u> (Signature)	<u>Kris Malli</u> (Printed Name)	<u>owner</u> Title
2)	 (Signature)	 (Printed Name)	 Title
3)	 (Signature)	 (Printed Name)	 Title
4)	 (Signature)	 (Printed Name)	 Title
5)	 (Signature)	 (Printed Name)	 Title

Witness my hand and official seal:



Signature of Notary Public Misti Dunkelberger
My commission expires: 10/9/2029

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY			
Customer #:	C518		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk Local License #: 9025-L-9040

License Fees: Annual Fee: 1500.00 Date filed with clerk: 2 / 12 / 2025
 Prorated Fee: \$ _____ Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
 Transfer Fee: \$ _____ March 7, 2025 & March 14, 2025
 Publishing Fee: \$15.00 Public Hearing Date: April 1, 2025

Publishing Fee Direct Billed to Applicant: ☐

License Term: 6/1/2025 Through 5/31/2026

LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: **NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.**

Applicant (Business Name): BIG HORN EQUESTRIAN CENTER INC

Doing Business As (DBA) / Trade Name: BIG HORN EQUESTRIAN CENTER

Building to be licensed / Building Address: 352 BIRD FARM RD
BIG HORN, WY 82833 SHERIDAN

Local Mailing Address: PO BOX 6413
SHERIDAN, WY 82801

Local Business Telephone Number: (307) 673-0454 Fax Number: _____

Business E-Mail Address: director@thebhec.org

Business Primary Contact: Sheila Blackburn
 First Name Last Name

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>CORPORATION (INC)</u>
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TYPE OF LICENSE OR PERMIT: RETAIL LIQUOR LICENSE

RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)

☒ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☐ ON & OFF PREMISE BAR & PACKAGE STORE

SPECIAL STATUTORY DESIGNATIONS (NONE IF BLANK)

OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))

☒ FULL TIME MONTHS OF OPERATION from Jan to Dec ☒ All Year (Jan-Dec)

☐ SEASONAL DAYS OF WEEK OF OPERATION: from _____ to _____ ☒ Every Day (Mon-Sun)

☐ NON-OPERATIONAL / PARKED HOURS OF OPERATION from 10am to 2am ☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☐ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☒ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☒ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) Sales provision for alcoholic or malt beverages: located on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES.**

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|---------------------------------|-----------------------|---------------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 1 + Line 2 must = Line 3) | (Line 3) Gross Sales: | \$ _____ (_____ %) |
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|--|-----------------------|---------------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 3) Entertainment Sales: | \$ _____ | (_____ %) |
| (Line 1 + Line 2 + Line 3 must = Line 4) | (Line 4) Gross Sales: | \$ _____ (_____ %) |
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NC
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b)
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If **YES** to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If **NO** to (c) (1), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?
1. If **NO** to (g), please attach a current copy of the club bylaws. ☐ YES ☐ NO
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Joe Steger	7/5/83	307. 128 Canvasback Rd Sheridan, WY 82801	763-2752	9	n/A	YES ☐ NO ☒	YES ☐ NO ☒
John Chase	4/1/64	25 Eaton Ranch Rd Wolf, WY 82844	307. 752-2876	28	n/A	YES ☐ NO ☒	YES ☐ NO ☒
Doyl Fritz	10/12/43		307. 751-3616	16	n/A	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approval permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)

) SS.

COUNTY OF Sheridan,

Signed and sworn to before me on this 10th day of February, 2025 that the facts alleged

in the foregoing instrument are true by the following:

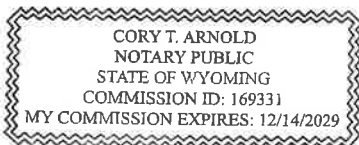
1) <u>[Signature]</u> (Signature)	<u>Joe Steger</u> (Printed Name)	<u>President</u> Title
2) <u>[Signature]</u> (Signature)	<u>John H. Chase</u> (Printed Name)	<u>Vice President</u> Title
3) <u>[Signature]</u> (Signature)	<u>Doyl M Fritz</u> (Printed Name)	<u>Treasurer</u> Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:

[Signature]
Signature of Notary Public

My commission expires: 12/14/2029

(SEAL)



RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

9E

FOR LIQUOR DIVISION USE ONLY			
Customer #:	A531		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9041</u>
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 12 / 2025</u>
	Prorated Fee: \$	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		

Applicant (Business Name):	<u>BIG HORN Y LLC</u>		
Doing Business As (DBA) / Trade Name:	<u>BIG HORN Y</u>		
Building to be licensed / Building Address:	<u>7088 COFFEEN AVE</u>		
	<u>SHERIDAN, WY 82801 SHERIDAN</u>		
Local Mailing Address:	<u>7088 COFFEEN AVE</u>		
	<u>SHERIDAN, WY 82801</u>		
Local Business Telephone Number:	<u>(307) 672-2447</u>	Fax Number:	
Business E-Mail Address:	<u>bonbonwallace@gmail.com</u>		
Business Primary Contact:	<u>Bonnie</u>	<u>Wallace</u>	
	First Name	Last Name	

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS (NONE IF BLANK)			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME	MONTHS OF OPERATION	from <u>JAN</u> to <u>DEC</u>	☒ All Year (Jan-Dec)
☐ SEASONAL	DAYS OF WEEK OF OPERATION:	from <u>SUN</u> to <u>SAT</u>	☒ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED	HOURS OF OPERATION	from <u>6am</u> to <u>10pm</u>	☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☐ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☒ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☒ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) Sales provision for alcoholic or malt beverages: located on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES.**

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☒ YES ☐ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|---------------------------------|-----------------------|---------------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 1 + Line 2 must = Line 3) | (Line 3) Gross Sales: | \$ _____ (_____ %) |
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|--|-----------------------|---------------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 3) Entertainment Sales: | \$ _____ | (_____ %) |
| (Line 1 + Line 2 + Line 3 must = Line 4) | (Line 4) Gross Sales: | \$ _____ (_____ %) |
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If **YES** to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If **NO** to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?
1. If **NO** to (g), please attach a current copy the club bylaws. ☐ YES ☐ NO
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Bonnie E. Wallace	9/11/78	863 W. Works St. Sheridan, WY 82801	307 752 7181	9	100%	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approve permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

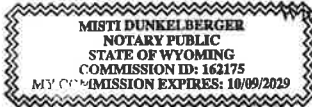
Requires signatures by **ALL** individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)
COUNTY OF Sheridan) ss.

Signed and sworn to before me on this 12 day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1)	<u>Bonnie Wallace</u> (Signature)	<u>Bonnie Wallace</u> (Printed Name)	<u>owner</u> Title
2)	_____ (Signature)	_____ (Printed Name)	_____ Title
3)	_____ (Signature)	_____ (Printed Name)	_____ Title
4)	_____ (Signature)	_____ (Printed Name)	_____ Title
5)	_____ (Signature)	_____ (Printed Name)	_____ Title

(SEAL)  Witness my hand and official seal:

Misti Dunkelberger
Signature of Notary Public
My commission expires: 10/9/2029

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY			
Customer #:	B7063		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9034</u>
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 4 / 2026</u>
	Prorated Fee: \$ _____	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$ _____	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		
Applicant (Business Name): <u>CODY MEFFORD LLC</u>		
Doing Business As (DBA) / Trade Name: <u>WYARNO BAR AND GRILL</u>		
Building to be licensed / Building Address: <u>1041 WYARNO RD</u>		
<u>WYARNO, WY 82845 SHERIDAN</u>		
Local Mailing Address: <u>1039 WYARNO RD</u>		
<u>WYARNO, WY 82845</u>		
Local Business Telephone Number:	<u>(307) 466-3425</u>	Fax Number:
Business E-Mail Address:	<u>cody.mefford@outlook.com</u>	
Business Primary Contact:	<u>Cody Mefford</u>	Last Name

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME		MONTHS OF OPERATION	from _____ to _____ ☒ All Year (Jan-Dec)
☐ SEASONAL		DAYS OF WEEK OF OPERATION:	from <u>Wed</u> to <u>Sun</u> ☐ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED		HOURS OF OPERATION	from <u>11 am</u> to <u>2 am</u> ☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☐ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☐ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page 1 paragraph 2.1

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) Sales provision for alcoholic or malt beverages: located, on page 1 paragraph 5.1

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES.**

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 3) Entertainment Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b)
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If NO to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Cody McFford	4/19/1984	1034 W. Grand Rd Wynona, WY 82895	307-466-3425	<3	100%	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☒ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approval permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)
) SS.
COUNTY OF Wyoming)

Signed and sworn to before me on this 4 day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

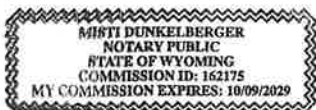
1) <u>[Signature]</u> (Signature)	<u>Cody McFford</u> (Printed Name)	<u>Owner</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:

[Signature]
Signature of Notary Public

My commission expires: 10/9/29

(SEAL)



RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY

Customer #:	B70024		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk

Local License #: 2025-L-9046

License

Fees

Annual Fee: \$1500.00

Prorated Fee: \$

Transfer Fee: \$

Publishing Fee: \$15.00

Publishing Fee Direct Billed to Applicant: ☐Date filed with clerk: 2 / 19 / 2025

Advertising Dates: (2 Consecutive Weeks Prior to Hearing)

March 7, 2025 & March 14, 2025

Public Hearing Date: April 1, 2025

License Term:

6/1/2025

Through

5/31/2026

LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.

Applicant (Business Name): CRAIG PROPERTIES LLCDoing Business As (DBA) / Trade Name: EVERETT'S TUNNEL INNBuilding to be licensed / Building Address: 402 HWY 193BANNER, WY 82832 SHERIDANLocal Mailing Address: 402 HWY 193BANNER, WY 82832Local Business Telephone Number: (307) 683-3297

Fax Number:

Business E-Mail Address: craigshenella@gmail.com

Business Primary Contact:

First Name

Last Name

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME		MONTHS OF OPERATION from _____ to _____ ☒ All Year (Jan-Dec)	
☐ SEASONAL		DAYS OF WEEK OF OPERATION: from <u>Wed</u> to <u>Sun</u> ☐ Every Day (Mon-Sun)	
☐ NON-OPERATIONAL / PARKED		HOURS OF OPERATION from <u>11:00am</u> to <u>8:00pm</u> ☐ 24 Hours a Day	

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

(a) The Applicant **OWNS** the licensed building.☐ YES (own)(b) The Applicant **LEASES** the licensed building.☒ YES (lease)

(c) The Lease is current and on file with the licensing authority and Liquor Division.

☒ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

(i) Lease term expiration date; located on page 3 paragraph 7**Note:** The lease term **MUST** continue at least through the term of the liquor license or permit

(ii) Sales provision for alcoholic or malt beverages: located, on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|------------------------|----------|------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 3) Gross Sales: | \$ _____ | (_____ %) |
- (Line 1 + Line 2 must = Line 3)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|-------------------------------|----------|------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 3) Entertainment Sales: | \$ _____ | (_____ %) |
| (Line 4) Gross Sales: | \$ _____ | (_____ %) |
- (Line 1 + Line 2 + Line 3 must = Line 4)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ N
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?
1. If NO to (g), please attach a current copy the club bylaws. ☐ YES ☐ NO
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Shenella Craig	1-13-1977	75 N Piney Rd Ste 416 Bldg	2910-200-0978	0	100%	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approval permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)

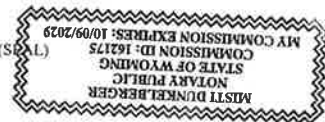
) SS.

COUNTY OF Wyoming

Signed and sworn to before me on this 19th day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>Shenella Craig</u> (Signature)	<u>Shenella Craig</u> (Printed Name)	<u>Manager</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:



Justin Dunkelberger
Signature of Notary Public

My commission expires: 10/9/29

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY			
Customer #:	C6912		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9043</u>
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 18 / 2025</u>
	Prorated Fee: \$	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		

Applicant (Business Name):	<u>ELK VIEW INN WYOMING LLC</u>		
Doing Business As (DBA) / Trade Name:	<u>ELK VIEW INN</u>		
Building to be licensed / Building Address:	<u>4622 W US HWY 14</u>		
	<u>DAYTON, WY 82836 SHERIDAN</u>		
Local Mailing Address:	<u>PO BOX 410</u>		
	<u>DAYTON, WY 82836</u>		
Local Business Telephone Number:	<u>(307) 461-4168</u>	Fax Number:	
Business E-Mail Address:	<u>elkviewinnwyoming@gmail.com</u>		
Business Primary Contact:	<u>Heather</u>	<u>Joseph</u>	
	First Name	Last Name	

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME ☐ SEASONAL ☐ NON-OPERATIONAL / PARKED		MONTHS OF OPERATION from <u>Jan</u> to <u>Dec</u> ☒ All Year (Jan-Dec) DAYS OF WEEK OF OPERATION: from <u>Mon</u> to <u>Sun</u> ☒ Every Day (Mon-Sun) HOURS OF OPERATION from <u>6am</u> to <u>2:30am</u> ☐ 24 Hours a Day	

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☒ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☐ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) **Sales** provision for alcoholic or malt beverages: located, on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**.

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 3) Entertainment Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?
1. If NO to (g), please attach a current copy the club bylaws. ☐ YES ☐ NO
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Heather Ann Joseph	01-15-76	4622 W US Hwy 17 Dayton, WY 82836	307-621- 0465	4	50%	YES ☐ NO ☒	YES ☐ NO ☒
Steven Patrick Joseph	07-05-69	same as above.	307-461- 4168	4	50%	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approve permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING

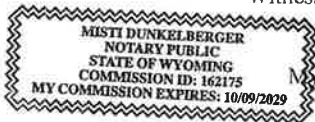
COUNTY OF Shirley

) SS.

Signed and sworn to before me on this 18 day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>[Signature]</u> (Signature)	<u>Heather Joseph</u> (Printed Name)	<u>Owner</u> Title
2) <u>[Signature]</u> (Signature)	<u>Steve Joseph</u> (Printed Name)	<u>owner</u> Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:



[Signature]
Signature of Notary Public

My commission expires: 10/9/2029

(SEAL)

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY

Customer #: C6538

Trf from:

Reviewer: Initials

Date

Agent:

Mgr:

To be completed by City / Town / County Clerk

Local License # 2025-L-9051

License

Fees

Annual Fee: \$1500.00

Prorated Fee: \$

Transfer Fee: \$

Publishing Fee: \$15.00

Date filed with clerk: 2/21/2025

Advertising Dates: (2 Consecutive Weeks Prior to Hearing)

March 7, 2025 & March 14, 2025

Public Hearing Date: April 1, 2025

Publishing Fee Direct Billed to Applicant: ☐

License Term:

6/1/2025

Through

5/31/2026

LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.

Applicant (Business Name): LIVERY STABLE LLCDoing Business As (DBA) / Trade Name: JUST LEDOUX IT SALOON & STEAK OUTBuilding to be licensed / Building Address: 158 JOHNSON STBIG HORN, WY 82833 SHERIDANLocal Mailing Address: PO BOX 696BIG HORN, WY 82833Local Business Telephone Number: (307) 672-5837Fax Number: (307) 672-0259Business E-Mail Address: glenda@ledouxsaloon.comBusiness Primary Contact: GLEND JELLIS

First Name

Last Name

FILING IN:

SHERIDAN COUNTY

FILING AS:

LIMITED LIABILITY COMPANY (LLC)TYPE OF LICENSE OR PERMIT: RETAIL LIQUOR LICENSE

RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)

☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE

SPECIAL STATUTORY DESIGNATIONS

(NONE IF BLANK)

OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))

☒ FULL TIME

MONTHS OF OPERATION

from _____ to _____ ☒ All Year (Jan-Dec)☐ SEASONAL

DAYS OF WEEK OF OPERATION:

from _____ to _____ ☒ Every Day (Mon-Sun)☐ NON-OPERATIONAL / PARKED

HOURS OF OPERATION

from 10 AM to 12 AM ☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1-3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

(a) The Applicant OWNS the licensed building.

☐ YES (own)

(b) The Applicant LEASES the licensed building.

☒ YES (lease)

(c) The Lease is current and on file with the licensing authority and Liquor Division.

☒ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

(i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term MUST continue at least through the term of the liquor license or permit

(ii) Sales provision for alcoholic or malt beverages: located, on page _____ paragraph _____

Note: The lease MUST contain a provision for SALE OF ALCOHOLIC or MALT BEVERAGES.

ALL APPLICANTS MUST COMPLETE QUESTIONS 2 and 3

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was YES to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was YES to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city?

☒ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If YES to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If NO to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____%)
(Line 2) Food Sales: \$ _____ (_____%)
(Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____%)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____%)
(Line 2) Food Sales: \$ _____ (_____%)
(Line 3) Entertainment Sales: \$ _____ (_____%)
(Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____%)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If YES, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b)
1. If YES to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If NO to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If NO to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip <i>DO NOT LIST PO BOXES</i>	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
GLEND K JELLIS	08/06/1953	17 HIGH SADDLE RD SHERIDAN, WY 82801	(307) 461- 0347	3YRS 5 M	90%	YES ☐ NO ☒	YES ☐ NO ☒
GERALD MORIARTY	02/11/1952	21 GALLATIN DR SHERIDAN, WY 82801	(307) 763-2934	3 YRS	10%	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)

) SS.

COUNTY OF Sheridan)

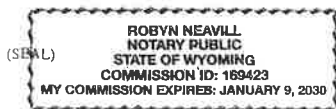
Signed and sworn to before me on this 21st day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>Glenda K. Jellis</u> (Signature)	<u>GLEND K. JELLIS</u> (Printed Name)	<u>Managing Member</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:

Robyn Neavill

Signature of Notary Public

My commission expires January 9th 2030

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY			
Customer #:	B7108		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #:
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 26 / 25</u>
	Prorated Fee: \$	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		

Applicant (Business Name):	<u>LODGEOPS LLC</u>		
Doing Business As (DBA) / Trade Name:	<u>BEAR LODGE RESORT</u>		
Building to be licensed / Building Address:	<u>5657 US 14A AT BURGESS JCT</u>		
	<u>DAYTON, WY 82836 SHERIDAN</u>		
Local Mailing Address:	<u>PO BOX 159</u>		
	<u>DAYTON, WY 82836</u>		
Local Business Telephone Number:	<u>(307) 752-2444</u>	Fax Number:	<u>(866) 775-4684</u>
Business E-Mail Address:	<u>jkjorgens@gmail.com</u> <i>jady@beardlodge-resort.com</i>		
Business Primary Contact:	<u>JADY</u>	<u>JORGENSEN</u>	First Name Last Name

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☐ FULL TIME	MONTHS OF OPERATION	from <u>JAN</u> to <u>DEC</u>	☒ All Year (Jan-Dec)
☐ SEASONAL	DAYS OF WEEK OF OPERATION:	from <u>MON</u> to <u>SUN</u>	☒ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED	HOURS OF OPERATION	from <u>11AM</u> to <u>2AM</u>	☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building.
- (b) The Applicant **LEASES** the licensed building.
- (c) The Lease is current and on file with the licensing authority and Liquor Division.

☒ YES (own)
☐ YES (lease)
☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

(i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

(ii) **Sales** provision for alcoholic or malt beverages: located, on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES.**

ALL APPLICANTS MUST COMPLETE QUESTIONS 2 and 3**2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)**

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|------------------------|----------|-------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____) % |
| (Line 2) Food Sales: | \$ _____ | (_____) % |
| (Line 3) Gross Sales: | \$ _____ | (_____) % |
- (Line 1 + Line 2 must = Line 3)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|-------------------------------|----------|-------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____) % |
| (Line 2) Food Sales: | \$ _____ | (_____) % |
| (Line 3) Entertainment Sales: | \$ _____ | (_____) % |
| (Line 4) Gross Sales: | \$ _____ | (_____) % |
- (Line 1 + Line 2 + Line 3 must = Line 4)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B) *N/A*

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A) *N/A*

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e) *N/A*

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b) *N/A*

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If NO to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other *N/A*
W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

**Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)**

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip <i>DO NOT LIST PO BOXES</i>	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
SCOTT JOHNSON	2.5.60	96 S. MAIN ALPINE, UT 84004	907-790 4866	4	25	YES ☐ NO ☒	YES ☐ NO ☒
JODY JOHNSON	11.12.60	96 S. MAIN ALPINE, UT 84004	907-723 9300	4	25	YES ☐ NO ☒	YES ☐ NO ☒
TIMOTHY HIRST	11.16.77	2510E MEADOWVIEW DR TULSA, AZ 85298	480-246 7253	4	50	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approve permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

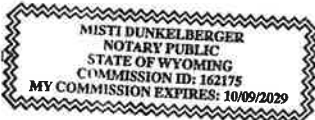
STATE OF WYOMING

COUNTY OF Shenandoah,) SS.

Signed and sworn to before me on this 26 day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>[Signature]</u> (Signature)	<u>Jody Johnson</u> (Printed Name)	<u>MEMBER</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:



[Signature]
Signature of Notary Public

My commission expires: 10/9/29

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY

Customer #: C2986

Trf from:

Reviewer:

Initials

Date

Agent:

Mgr:

To be completed by City / Town / County Clerk

Local License #: 2025-L-9050

License

Fees

Annual Fee: \$1500.00

Prorated Fee: \$

Transfer Fee: \$

Publishing Fee: \$15.00

Publishing Fee Direct Billed to Applicant: ☐

Date filed with clerk: 2 / 2 / 2025

Advertising Dates: (2 Consecutive Weeks Prior to Hearing)

March 7, 2025 & March 14, 2025

Public Hearing Date: April 1, 2025

License Term: 6/1/2025

Through

5/31/2026

LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.

Applicant (Business Name): MELANIE THOMAS KLIER

Doing Business As (DBA) / Trade Name: LEITER

Building to be licensed / Building Address: 4679 HWY 14-16E

LEITER, WY 82837 SHERIDAN

Local Mailing Address: PO BOX 184

LEITER, WY 82837

Local Business Telephone Number: (307) 758-4343

Fax Number:

Business E-Mail Address: mightymel0476@yahoo.com

Business Primary Contact: Melanie Thomas Klier

First Name

Last Name

FILING IN:

SHERIDAN COUNTY

FILING AS:

INDIVIDUAL

TYPE OF LICENSE OR PERMIT: RETAIL LIQUOR LICENSE

RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)

☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE

SPECIAL STATUTORY DESIGNATIONS

(NONE IF BLANK)

OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))

☒ FULL TIME

MONTHS OF OPERATION

from Jan to Dec ☒ All Year (Jan-Dec)
☐ SEASONAL

DAYS OF WEEK OF OPERATION:

from Sun to Sat ☐ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED

HOURS OF OPERATION

from 10am to 8pm ☐ 24 Hours a Day

Sunday 12-7pm

ALL APPLICANTS MUST COMPLETE QUESTIONS 1-3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

(a) The Applicant OWNS the licensed building.

☒ YES (own)

(b) The Applicant LEASES the licensed building.

☐ YES (lease)

(c) The Lease is current and on file with the licensing authority and Liquor Division.

☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

(i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

(ii) Sales provision for alcoholic or malt beverages: located on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**

ALL APPLICANTS MUST COMPLETE QUESTIONS 2 and 3

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☒ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 3) Entertainment Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? ☐ YES ☐ NO
(W.S. 12-1-101(a)(xix))
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?
1. If NO to (g), please attach a current copy the club bylaws. ☐ YES ☐ NO
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Melanie Thomas Klier	8-9-74	4679 US HWY 14-16E Heiter wy 82837	307 758 4343	YES ☒ NO ☐	YES ☐ NO ☒	YES ☐ NO ☒
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
						YES ☐	YES ☐
						NO ☐	NO ☐
						YES ☐	YES ☐
						NO ☐	NO ☐
						YES ☐	YES ☐
						NO ☐	NO ☐
						YES ☐	YES ☐
						NO ☐	NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approval permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING

COUNTY OF Sheridan,)
) SS.

Signed and sworn to before me on this 21st day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>[Signature]</u> (Signature)	<u>Melanie Thompson Klien</u> (Printed Name)	<u>Owner</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:



[Signature]
Signature of Notary Public

My commission expires: 10/9/2029

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY			
Customer #:	C2293		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9053</u>
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 21 / 25</u>
	Prorated Fee: \$	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		
Applicant (Business Name): <u>PATRICK L GREEN</u>		
Doing Business As (DBA) / Trade Name: <u>MY BUDDY'S PLACE</u>		
Building to be licensed / Building Address: <u>2146 N MAIN ST</u>		
<u>SHERIDAN, WY 82801 SHERIDAN</u>		
Local Mailing Address: <u>2146 N MAIN ST</u>		
<u>SHERIDAN, WY 82801</u>		
Local Business Telephone Number:	<u>(307) 672-7652</u>	Fax Number: <u>(307) 686-6326</u>
Business E-Mail Address: <u>admin@hcbre.com</u>		
Business Primary Contact: _____		
First Name		Last Name

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>INDIVIDUAL</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME		MONTHS OF OPERATION	from _____ to _____ ☒ All Year (Jan-Dec)
☐ SEASONAL		DAYS OF WEEK OF OPERATION:	from _____ to _____ ☒ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED		HOURS OF OPERATION	from <u>7:00AM</u> to <u>2:00AM</u> ☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1-3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☐ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☒ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☒ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) **Sales** provision for alcoholic or malt beverages: located, on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES.**

ALL APPLICANTS MUST COMPLETE QUESTIONS 2 and 3**2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)**

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☒ YES ☐ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 3) Entertainment Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b)
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If NO to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Patrick L Green	8/15/55	107 E HOGUE SILVER, WY 82116	307 680-0407	YES ☒ NO ☐	YES ☐ NO ☒	YES ☐ NO ☒
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approval permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)

) SS.

COUNTY OF Campbell)

Signed and sworn to before me on this 19th day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>[Signature]</u> (Signature)	<u>PHILIP GREEN</u> (Printed Name)	<u>OWNER</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:

Ashley Kendrick
Signature of Notary Public

My commission expires: 12-13-2029

ASHLEY KENDRICK
Notary Public - State of Wyoming
Commission ID # 153604
My Commission Expires
December 13, 2029

(SEAL)

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

9m

FOR LIQUOR DIVISION USE ONLY			
Customer #:	B7079		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #:
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 19 / 2025</u>
	Prorated Fee: \$	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		

Applicant (Business Name):	<u>PAUL McNIEL</u>
Doing Business As (DBA) / Trade Name:	<u>WAGON BOX LODGE</u>
Building to be licensed / Building Address:	<u>103 N PINEY RD</u>
	<u>STORY, WY 82842 SHERIDAN</u>
Local Mailing Address:	<u>PO BOX 550</u>
	<u>STORY, WY 82842</u>
Local Business Telephone Number:	<u>(252) 375-4569</u>
Fax Number:	
Business E-Mail Address:	<u>officemcniel@gmail.com</u>
Business Primary Contact:	
First Name	Last Name

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>INDIVIDUAL</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME		MONTHS OF OPERATION	from _____ to _____ ☒ All Year (Jan-Dec)
☐ SEASONAL		DAYS OF WEEK OF OPERATION:	from <u>Tues</u> to <u>Sat</u> ☐ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED		HOURS OF OPERATION	from <u>8am</u> to <u>8pm</u> ☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☒ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☐ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

(i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

(ii) Sales provision for alcoholic or malt beverages: located, on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES.**

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|------------------------|----------|------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 3) Gross Sales: | \$ _____ | (_____ %) |
- (Line 1 + Line 2 must = Line 3)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|-------------------------------|----------|------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 3) Entertainment Sales: | \$ _____ | (_____ %) |
| (Line 4) Gross Sales: | \$ _____ | (_____ %) |
- (Line 1 + Line 2 + Line 3 must = Line 4)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

I. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b)
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?
1. If NO to (g), please attach a current copy the club bylaws. ☐ YES ☐ NO
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Paul McNeil	7/29/82	103 N. Pine St Jury, WY 82842	252 375-4569	YES ☐ NO ☒	YES ☐ NO ☒	YES ☐ NO ☒
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approve permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

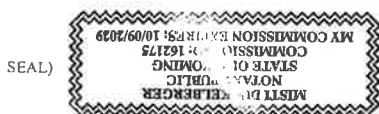
Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)
COUNTY OF Sheridan) SS.

Signed and sworn to before me on this 19th day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>Paul B. McNeil</u> (Signature)	<u>Paul B. McNeil</u> (Printed Name)	_____ Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:



Misti D. Kelberger
Signature of Notary Public

My commission expires: 10/9/2029

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

9N

FOR LIQUOR DIVISION USE ONLY

Customer #:	C4684		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9048</u>
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 20 / 25</u>
	Prorated Fee: \$ _____	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$ _____	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		

Applicant (Business Name):	<u>POWDER HORN RANCH LLC</u>		
Doing Business As (DBA) / Trade Name:	<u>THE POWDER HORN GOLF CLUB</u>		
Building to be licensed / Building Address:	<u>23 COUNTRY CLUB LN</u>		
	<u>SHERIDAN, WY 82801 SHERIDAN</u>		
Local Mailing Address:	<u>51 POWDER HORN RD</u>		
	<u>SHERIDAN, WY 82801</u>		
Local Business Telephone Number:	<u>(307) 673-4800</u>	Fax Number:	<u>(307) 672-5893</u>
Business E-Mail Address:	<u>riggin.smith@thepowderhorn.com</u>		
Business Primary Contact:	<u>Jason</u>	<u>Busch</u>	
	First Name	Last Name	

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS (NONE IF BLANK)			
<u>GOLF CLUB DESIGNATION W.S. 12-5-201(f)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME	MONTHS OF OPERATION	from <u>Jan</u> to <u>Dec</u>	☒ All Year (Jan-Dec)
☐ SEASONAL	DAYS OF WEEK OF OPERATION:	from <u>10:00</u> to _____	☒ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED	HOURS OF OPERATION	from <u>10:00am</u> to <u>10:00pm</u>	☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☒ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☐ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

(i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit(ii) **Sales** provision for alcoholic or malt beverages: located, on page _____ paragraph _____**Note:** The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**.

ALL APPLICANTS MUST COMPLETE QUESTIONS 2 and 3**2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)**

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city?

☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|------------------------|----------|------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 3) Gross Sales: | \$ _____ | (_____ %) |
- (Line 1 + Line 2 must = Line 3)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|-------------------------------|----------|------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 3) Entertainment Sales: | \$ _____ | (_____ %) |
| (Line 4) Gross Sales: | \$ _____ | (_____ %) |
- (Line 1 + Line 2 + Line 3 must = Line 4)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? ☐ YES ☐ NO
(W.S. 12-1-101(a)(xix))
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b)
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If **YES** to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If **NO** to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If **NO** to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip <i>DO NOT LIST PO BOXES</i>	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
James M. Scott	8/7/69	620 Mountain Shadows Blvd Sheridan, WY 82801		29	33	YES ☐ NO ☒	YES ☐ NO ☒
Sandra Scott Suzon	5/15/59	7 Beantooth Ln. Sheridan, WY 82801		29	33	YES ☐ NO ☒	YES ☐ NO ☒
Homer R. Scott	8/28/71	235 Waning Birch Ct Sheridan, WY 82801		1	33	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

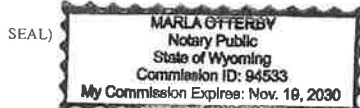
Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)
) SS.
COUNTY OF Sheridan)

Signed and sworn to before me on this 18 day of Feb, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>[Signature]</u> (Signature)	<u>Homer R Scott</u> (Printed Name)	<u>member</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:



My commission expires: 11/19/2030

Marla Otterby
Signature of Notary Public

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY

Customer #:	A6944		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9052</u>
Licenses	Annual Fee: \$1500.00	Date filed with clerk: <u>2</u> / <u>21</u> / <u>25</u>
Fees	Prorated Fee: \$	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		
Applicant (Business Name): <u>STORY'S OLD FIREHALL STORE LLC</u>		
Doing Business As (DBA) / Trade Name: <u>STORY STORE</u>		
Building to be licensed / Building Address: <u>30 N PINEY RD</u>		
<u>STORY, WY 82842 SHERIDAN</u>		
Local Mailing Address: <u>PO BOX 58</u>		
<u>STORY, WY 82842</u>		
Local Business Telephone Number:	<u>(307) 683-3150</u>	Fax Number: <u>(307) 683-3152</u>
Business E-Mail Address: <u>storystore@hotmail.com</u>		
Business Primary Contact: _____		
First Name		Last Name

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☐ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME	MONTHS OF OPERATION	from <u>Jan</u> to <u>Dec</u>	☒ All Year (Jan-Dec)
☐ SEASONAL	DAYS OF WEEK OF OPERATION:	from <u>07:30</u> to <u>19:30</u>	☒ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED	HOURS OF OPERATION	from <u>07:30</u> to <u>19:30</u>	☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☐ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☒ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☒ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

(i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

(ii) Sales provision for alcoholic or malt beverages: located, on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**

ALL APPLICANTS MUST COMPLETE QUESTIONS 2 and 3**2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)**

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|------------------------|----------|------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 3) Gross Sales: | \$ _____ | (_____ %) |
- (Line 1 + Line 2 must = Line 3)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|-------------------------------|----------|------------|
| (Line 1) Liquor Sales: | \$ _____ | (_____ %) |
| (Line 2) Food Sales: | \$ _____ | (_____ %) |
| (Line 3) Entertainment Sales: | \$ _____ | (_____ %) |
| (Line 4) Gross Sales: | \$ _____ | (_____ %) |
- (Line 1 + Line 2 + Line 3 must = Line 4)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b)
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If NO to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip <i>DO NOT LIST PO BOXES</i>	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip <i>DO NOT LIST PO BOXES</i>	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Derrick J Burns	3/23/93	222 Fish Hatchery Rd Story, WY 82812	307 3614	5	50%	YES ☐ NO ☒	YES ☐ NO ☒
Peggy L Pink	10/11/62	222 Fish Hatchery Rd Story, WY 82812	307 620 1058	5	50%	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☐ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

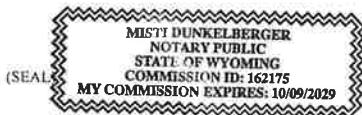
Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)
COUNTY OF Shoshone) SS.

Signed and sworn to before me on this 21 day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>[Signature]</u> (Signature)	<u>Derrick J Burns</u> (Printed Name)	<u>President</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:



[Signature]
Signature of Notary Public

My commission expires: 10/9/29

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

9P

FOR LIQUOR DIVISION USE ONLY			
Customer #:	C419		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9035</u>
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 4 / 2025</u>
	Prorated Fee: \$ _____	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$ _____	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		

Applicant (Business Name):	<u>THE BARN IN BIG HORN LLC</u>	
Doing Business As (DBA) / Trade Name:	<u>THE BARN IN BIG HORN</u>	
Building to be licensed / Building Address:	<u>228 JOHNSON ST</u>	
	<u>BIG HORN, WY 82833 SHERIDAN</u>	
Local Mailing Address:	<u>PO BOX 425</u>	
	<u>BIG HORN, WY 82833</u>	
Local Business Telephone Number:	<u>(307) 752-3764</u>	Fax Number:
Business E-Mail Address:	<u>collette@barninbighorn.com</u>	
Business Primary Contact:	<u>Collette</u>	<u>Eliasen</u>
	First Name	Last Name

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME ☐ SEASONAL ☐ NON-OPERATIONAL / PARKED		MONTHS OF OPERATION from <u>January</u> to <u>December</u> ☒ All Year (Jan-Dec) DAYS OF WEEK OF OPERATION: from <u>Sunday</u> to <u>Sunday</u> ☒ Every Day (Mon-Sun) HOURS OF OPERATION from <u>6am</u> to <u>11pm</u> ☐ 24 Hours a Day	

ALL APPLICANTS MUST COMPLETE QUESTIONS 1-3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☐ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☒ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☒ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page 1 paragraph 2

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) Sales provision for alcoholic or malt beverages: located on page 1 paragraph 4

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 3) Entertainment Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If NO to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip <i>DO NOT LIST PO BOXES</i>	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐
				YES ☐	YES ☐	YES ☐
				NO ☐	NO ☐	NO ☐

My commission expires: 10/9/2029

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY

Customer #:	C6570		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9038</u>
License		
Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 15 / 2025</u>
	Prorated Fee: \$ _____	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$ _____	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		

Applicant (Business Name):	<u>THE NEW MUSEUM AT THE BRADFORD BRINTON RANCH</u>		
Doing Business As (DBA) / Trade Name:	<u>THE BRINTON MUSEUM</u>		
Building to be licensed / Building Address:	<u>239 BRINTON RD</u>		
	<u>BIG HORN, WY 82833 SHERIDAN</u>		
Local Mailing Address:	<u>PO BOX 460</u>		
	<u>BIG HORN, WY 82833</u>		
Local Business Telephone Number:	<u>(307) 672-3173</u>	Fax Number:	<u>(307) 672-3258</u>
Business E-Mail Address:	<u>jcox@thebrintonmuseum.org</u>		
Business Primary Contact:	<u>Jennifer</u>	<u>Cox</u>	
	First Name	Last Name	

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>CORPORATION (INC)</u>
TYPE OF LICENSE OR PERMIT: <u>RETAIL LIQUOR LICENSE</u>			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS <u>(NONE IF BLANK)</u>			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☐ FULL TIME ☒ SEASONAL ☐ NON-OPERATIONAL / PARKED		MONTHS OF OPERATION <u>*See Attached</u> from _____ to _____ ☐ All Year (Jan-Dec) DAYS OF WEEK OF OPERATION: from _____ to _____ ☐ Every Day (Mon-Sun) HOURS OF OPERATION from _____ to _____ ☐ 24 Hours a Day	

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☒ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☐ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page _____ paragraph _____.

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) Sales provision for alcoholic or malt beverages: located on page _____ paragraph _____.

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES**.

ALL APPLICANTS MUST COMPLETE QUESTIONS 2 and 3**2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)**

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(iii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|---------------------------------|-----------------------|-------------------|
| (Line 1) Liquor Sales: | \$76,221 | (14 %) |
| (Line 2) Food Sales: | \$468,561 | (86 %) |
| (Line 1 + Line 2 must = Line 3) | (Line 3) Gross Sales: | \$544,782 (100 %) |
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☒ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from:
- | | | |
|--|-----------------------|---------|
| (Line 1) Liquor Sales: | \$ | (%) |
| (Line 2) Food Sales: | \$ | (%) |
| (Line 3) Entertainment Sales: | \$ | (%) |
| (Line 1 + Line 2 + Line 3 must = Line 4) | (Line 4) Gross Sales: | \$ (%) |
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If NO to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If NO to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Kendra Heimbeck	8/2/87	237 Brimmon Rd Big Horn, WY	307-751-4123	YES ☒ NO ☐	YES ☐ NO ☒	YES ☐ NO ☒
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip <i>DO NOT LIST PO BOXES</i>	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Kendra Heimbeck	8/2/87	239 Brinton Rd Sheridan WY	307-751 4123	5	NA	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☒ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

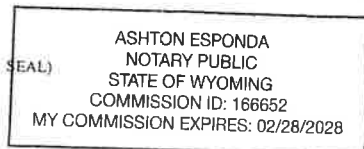
Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)
) SS.
COUNTY OF Sheridan)

Signed and sworn to before me on this 5th day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>Kendra Heimbeck</u> (Signature)	<u>KENDRA C. HEIMBECK</u> (Printed Name)	<u>EXECUTIVE DIR.</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:



Ashton Espanda
Signature of Notary Public
My commission expires: 02/28/2028

The Brinton Museum
Seasonal Operational Schedule

February to May & September to December

Days of Week:

- Restaurant/Bar: from Thursday to Monday (closed Tuesday and Wednesday)
- Package Sales: from Thursday to Monday (closed Tuesday and Wednesday)

Hours of Operation:

- Restaurant/Bar: from 10am to 3pm on Thursday and Friday; occasionally open from 5pm to 10pm on Fridays
- Restaurant/Bar: from 10am to 3pm on Saturday, Sunday and Monday
- Package Sales: from 9:30am to 5pm Thursday to Monday

June through August

Days of Week:

- Restaurant/Bar: from Thursday to Monday (closed Tuesday and Wednesday)
- Package Sales: from Monday to Sunday from 9:30am to 5pm

Hours of Operation:

- Restaurant/Bar: from 10am to 3pm on Thursday and Friday; occasionally open from 5pm to 10pm on Thursday/Friday
- Restaurant/Bar: from 10am to 3pm on Saturday, Sunday and Monday; occasionally open from 4pm to 12am on Saturdays (dependent on event schedule)
- Package Sales: from 9:30am to 5pm

RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY

Customer #:	C6874		
Trf from:			
Reviewer:	Initials	Date	
Agent:		/	/
Mgr:		/	/

To be completed by City / Town / County Clerk		Local License #: <u>2025-L-9039</u>
License Fees	Annual Fee: \$1500.00	Date filed with clerk: <u>2 / 6 / 2025</u>
	Prorated Fee: \$	Advertising Dates: (2 Consecutive Weeks Prior to Hearing)
	Transfer Fee: \$	March 7, 2025 & March 14, 2025
	Publishing Fee: \$15.00	Public Hearing Date: April 1, 2025
Publishing Fee Direct Billed to Applicant: ☐		
License Term:	<u>6/1/2025</u>	Through <u>5/31/2026</u>
LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.		
Applicant (Business Name): <u>TWISTED WOODS LLC</u>		
Doing Business As (DBA) / Trade Name: <u>PARKMAN BAR & GRILL</u>		
Building to be licensed / Building Address: <u>268 HWY 345</u>		
<u>PARKMAN, WY 82838 SHERIDAN</u>		
Local Mailing Address: <u>PO BOX 61</u>		
<u>PARKMAN, WY 82838</u>		
Local Business Telephone Number: <u>(307) 655-9993</u>		Fax Number:
Business E-Mail Address: <u>pkcaywood@gmail.com</u>		
Business Primary Contact: <u>Patricia</u>		<u>Caywood</u>
		First Name Last Name

FILING IN:	<u>SHERIDAN COUNTY</u>	FILING AS:	<u>LIMITED LIABILITY COMPANY (LLC)</u>
TYPE OF LICENSE OR PERMIT: RETAIL LIQUOR LICENSE			
RETAIL LIQUOR LICENSE HOLDERS ONLY: PRIMARY BUSINESS TYPE (CHOOSE ONLY ONE)			
☐ ON-PREMISE BAR ☐ OFF-PREMISE PACKAGE STORE ☒ ON & OFF PREMISE BAR & PACKAGE STORE			
SPECIAL STATUTORY DESIGNATIONS (NONE IF BLANK)			
OPERATIONAL STATUS (To Assist the Liquor Division with scheduling inspections (W.S. 12-1-101(a)(xxi) / 12-2-301(c) / 12-4-103(a)(iv)))			
☒ FULL TIME		MONTHS OF OPERATION	from <u>Jan</u> to <u>Dec</u> ☒ All Year (Jan-Dec)
☐ SEASONAL		DAYS OF WEEK OF OPERATION:	from <u>Mon</u> to <u>Sun</u> ☒ Every Day (Mon-Sun)
☐ NON-OPERATIONAL / PARKED		HOURS OF OPERATION	from <u>10am</u> to <u>2am</u> ☐ 24 Hours a Day

ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 3

1. BUILDING OWNERSHIP: W.S. 12-4-103(a)(iii)

Does the Applicant own or lease the licensed building?

- (a) The Applicant **OWNS** the licensed building. ☒ YES (own)
- (b) The Applicant **LEASES** the licensed building. ☐ YES (lease)
- (c) The Lease is current and on file with the licensing authority and Liquor Division. ☐ YES ☐ NO

If the building is leased and the lease is not current, please submit a copy of the lease and indicate:

- (i) Lease term expiration date; located on page _____ paragraph _____

Note: The lease term **MUST** continue at least through the term of the liquor license or permit

- (ii) Sales provision for alcoholic or malt beverages: located, on page _____ paragraph _____

Note: The lease **MUST** contain a provision for **SALE OF ALCOHOLIC or MALT BEVERAGES.**

2. LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)

- (a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? ☐ YES ☒ NO

(b) If the answer was **YES** to 2(a) above, explain fully and submit any documents in connection there within.

3. INTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403

Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm:

- (a) Hold any interest in the license/permit applied for? ☐ YES ☒ NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in the business? ☐ YES ☒ NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☒ NO
- (d) If the answer was **YES** to any of the above, explain fully and submit any documents in connection there within.

4. RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)

Is the licensed building within five (5) miles of an incorporated town or city? ☐ YES ☒ NO

5. RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)

- (a) Will food and beverage services be contracted or subcontracted? ☐ YES ☐ NO
1. If **YES** to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (a) (1.), please attach a copy of the current contract.

6. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

7. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)

- (a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ _____ (_____ %)
- (Line 2) Food Sales: \$ _____ (_____ %)
- (Line 3) Entertainment Sales: \$ _____ (_____ %)
- (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ _____ (_____ %)
- (b) Is a copy of the valid food service permit or the approved permit application attached? ☐ YES ☐ NO

8. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION

- (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 50,000 barrels (1,550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) ☐ YES ☐ NO
- (b) Are microbrewery products from this location being distributed to other alcohol retailers in Wyoming? (W.S. 12-2-201(a)) ☐ YES ☐ NO
- If **YES**, a wholesale malt beverage license from the Liquor Division will be required.

9. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐ YES ☐ NO
- (b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐ YES ☐ NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐ YES ☐ NO
- (d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv) ☐ YES ☐ NO
- (e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b) ☐ YES ☐ NO
1. If **YES** to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
2. If **NO** to (e) (1.), please attach a copy of the current contract.

10. LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐ YES ☐ NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐ YES ☐ NO

11. LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)

- (a) Does the Veteran's organization hold a charter by the Congress of the United States? ☐ YES ☐ NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary? ☐ YES ☐ NO

12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)

- (a) Does the golf club have more than fifty (50) bona fide members? ☐ YES ☐ NO
- (b) Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse? ☐ YES ☐ NO
- (c) Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course? ☐ YES ☐ NO
1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) ☐ YES ☐ NO
2. If **YES** to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
3. If **NO** to (c) (1.), please attach a copy of the current contract.

13. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) / W.S. 12-4-301(b)

- (a) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐ YES ☐ NO
- (b) Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐ YES ☐ NO
- (c) Is the club qualified as a tax-exempt organization under the Internal Revenue Service? ☐ YES ☐ NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year? ☐ YES ☐ NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐ YES ☐ NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐ YES ☐ NO
- (g) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division? ☐ YES ☐ NO
1. If **NO** to (g), please attach a current copy the club bylaws.
- (h) Is a detailed statement with itemized expenditures of the club's activities during the last year attached? ☐ YES ☐ NO

14. If the Applicant is Filing As an Individual, Partnership, Political Subdivision, Organization or Other W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application.)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:	
					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.
(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:	
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Patricia Kaye Caywood	8/26/76	268 Highway 345 Panama Wy 82835	307-751- 6807	3.5	100%	YES ☐ NO ☒	YES ☐ NO ☒
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

REQUIRED ATTACHMENTS

- ☐ A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- ☒ Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- ☐ If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

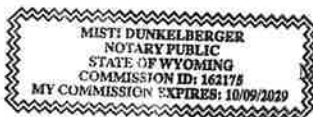
STATE OF WYOMING

COUNTY OF Sheridan) SS.

Signed and sworn to before me on this 6th day of February, 2025 that the facts alleged in the foregoing instrument are true by the following:

1) <u>[Signature]</u> (Signature)	<u>Patricia Kaye Caywood</u> (Printed Name)	<u>Owner</u> Title
2) _____ (Signature)	_____ (Printed Name)	_____ Title
3) _____ (Signature)	_____ (Printed Name)	_____ Title
4) _____ (Signature)	_____ (Printed Name)	_____ Title
5) _____ (Signature)	_____ (Printed Name)	_____ Title

Witness my hand and official seal:



[Signature]
Signature of Notary Public

My commission expires: 10/9/2029

(SEAL)

**RESOLUTION 25-04-007
CREATING THE SHERIDAN COUNTY
SEMIQUINCENTENNIAL COMMITTEE**

WHEREAS, On July 4, 1776, the United States of America declared its independence, laying the foundation for the freedoms and liberties we hold dear today; and

WHEREAS, the year 2026 marks the 250th anniversary of this monumental occasion, an opportunity to reflect upon our nation's history, honor the sacrifices made by generations past, and celebrate the achievements and shared values that continue to inspire us; and

WHEREAS, it is fitting that the residents of Sheridan County come together to commemorate this milestone in a meaningful and memorable manner, engaging citizens of all ages in reflection, education, and community activities that honor our collective heritage; and

WHEREAS, a County Semiquincentennial Committee would be instrumental in coordinating, organizing, and promoting commemorative events, educational programs, and celebrations within Sheridan County to highlight our community's role in the nation's history and the ongoing contributions of its residents;

NOW, THEREFORE, BE IT RESOLVED BY THE SHERIDAN COUNTY, WYOMING, BOARD OF COUNTY COMMISSIONERS: the Board of County Commissioners hereby establishes the Sheridan County Semiquincentennial Committee (the "Committee") for the purpose of planning, coordinating, and organizing activities commemorating the 250th anniversary of the United States; and

BE IT FURTHER RESOLVED that the Committee shall consist of members representing a diverse array of community organizations, historical societies, educational institutions, civic groups, municipalities, and other stakeholders to ensure a community-wide celebration; and

BE IT FURTHER RESOLVED that the Committee shall have the authority to:

- 1) Develop a schedule of commemorative events, programs, and activities to be held throughout Sheridan County leading up to and during the year 2026.
- 2) Collaborate with local, state, and federal organizations to align with other national and regional Semiquincentennial celebrations.
- 3) Promote educational opportunities and materials to enhance public awareness of American history, with a particular focus on the local contributions of Sheridan County residents.
- 4) Seek grants, partnerships and sponsorships to support Semiquincentennial activities and to ensure community accessibility to events and programs.
- 5) Provide regular updates to the County Commission and offer recommendations for additional actions to enhance the county's observance of this historical anniversary.

BE IT FINALLY RESOLVED that the Sheridan County, Wyoming, Board of County Commissioners supports the Committee's endeavors and encourages all county residents, businesses, and organizations to join in the celebration of our nation's 250 anniversary.

PROCLAIMED this 1st day of April 2025, in Sheridan County, Wyoming

With this resolutions, Sheridan County proudly takes steps to honor America's Semiquincentennial and celebrate the enduring spirit of freedom, unity, and progress that defines our nation.

BOARD OF COUNTY COMMISSIONERS
Sheridan County, Wyoming:

Attest:

Lonnie Wright, Chairman

Eda Schunk Thompson, County Clerk

AMENDMENT # 1 TO LEASE AGREEMENT BETWEEN THE SHERIDAN COUNTY SPORTSMEN'S ASSOCIATION AND SHERIDAN COUNTY

This Amendment to Lease Agreement is entered into by and between the Sheridan County Board of County Commissioners (Board), and the Sheridan County Sportsmen's Association (Association) on this 1st day of April, 2025.

WHEREAS, the Board and the Association entered into a Lease Agreement dated November 4, 2020, for certain lands within the Sheridan County Recreation Complex; and

WHEREAS, the Board and the Association now desire to modify and expand the lease premises included in the Lease Agreement; and

WHEREAS, the Board and the Association also desire to modify the annual rental payment in the Lease Agreement to reflect the addition of property to the leased premises;

NOW THEREFORE, the Board and the Association hereby agree to amend the Lease Agreement as follows:

1. Section 1 Leased Premises shall be amended to read:

Township 56 North, Range 85 West, 6th Principal Meridian: Sheridan County, Wyoming

Section 14: NE $\frac{1}{4}$; N $\frac{1}{2}$ SE $\frac{1}{4}$, excepting the portion of the sixty (60) foot wide strip being the right-of-way of Keystone Road (aka County Road No. 98); NW $\frac{1}{4}$, portion being north of the north right-of-way line of Keystone Road (aka County Road No. 98); NE $\frac{1}{4}$ SW $\frac{1}{4}$, portion being north of the north right-of-way line of Keystone Road (aka County Road No. 98); totaling 406 $\pm$ acres. (Lease Premises highlighted on attached Exhibit.)

2. Section 3. Obligations of Renters, Subsection B. shall be amended to read, "Pay the BOCC an rental payment of Four Hundred Dollars (\$400.00) each year no later than the 31st day of January of that year.
3. Section 5 General Covenants, C. *Use of Leased Premises*, first paragraph, shall be amended to read, "Use of the Leased Premises shall be limited to those functions necessary for Renters to promote their activities and to provide the public with practical and safe opportunities to utilize the leased premises. If a different use of the Leased Premises is intended, a written request must be made to the P&R Board, who in turn will provide Renters with written approval, if proposed use is acceptable. Renters' use of the portion of the leased premises lying within the W $\frac{1}{2}$ of the NW $\frac{1}{4}$ of Section 14 shall be limited to archery activities."



SHERIDAN COUNTY AIRPORT

908 W Brundage Ln • Sheridan, WY 82801
Phone: 307-674-4222 • FAX: 307-672-6795

12, 13, 14
E. Robert Gill C.M., Manager
rgill@sheridancountyairport.com

MEMO

TO: Sheridan County Board of Commissioners
Kelly Iott, Administrative Coordinator

FROM: E. Robert Gill
Airport Manager

DATE: 3/19/2025

RE: Business Airport for BoCC Meeting of April 1, 2025

Kelly, please place the following items on the BoCC agenda for consideration at the April 1, 2025 meeting.

- 1. Consider Specialized Aviation Service Operator use agreement between Sheridan County and Gardner-Lowe Aviation Services, LLC.** Gardner-Lowe Aviation Services, an FAA-certified Part 145 maintenance and repair station based in Peachtree City, Georgia, seeks to establish a second facility at Sheridan County Airport. The demand for General Aviation maintenance services in our region is significant, resulting in difficulty along with extended wait times for inspections and repairs for aircraft. Establishing an additional maintenance shop at the airport would greatly benefit the General Aviation community. In addition to offering maintenance and repair services, Gardner-Lowe will sell aircraft parts and supplies, along with the sales and installation of avionics. This agreement is for ten years, and given the critical need for General Aviation maintenance, there are no associated fees. Gardner-Lowe Aviation Services will operate through a sublease agreement with Sheridan Pilots 307, LLC utilizing space in their newly constructed hangar. **Therefore, I respectfully recommend the Sheridan County Board of Commissioners to approve and authorize the Chairman to sign all associated documents for the Specialized Aviation Service Operator use agreement between Sheridan County and Gardner-Lowe Aviation Services, LLC.**
- 2. Consider Lessor's Consent to Sublease between Sheridan Pilots 307, LLC, and Gardner-Lowe Aviation Services, LLC.** As Gardner-Lowe Aviation Services prepares to offer maintenance and avionics services in Sheridan, they require a temporary location to operate their maintenance shop until securing a permanent facility. Sheridan Pilots 307, LLC has reached an agreement with Gardner-Lowe to sublease space in their hangar for maintenance operations. According to the executive hangar lease agreement between Sheridan County and Sheridan Pilots 307, Sheridan Pilots 307, LLC must obtain consent from Sheridan County before subleasing. After reviewing the agreement between both parties, deputy county attorney Clint Beaver and I find it to be acceptable. **Therefore, I respectfully recommend the Sheridan County Board of Commissioners to approve and consent to the Sublease agreement between Sheridan Pilots 307, LLC, and Gardner-Lowe Aviation Services, LLC and authorize the Chairman to sign associated documents.**

3. **Consider Rules & Regulations Governing Self-Fueling of Aircraft at the County Airport.** The purpose of these Rules and Regulations is to establish policies and procedures for the self-fueling of aircraft at Sheridan County Airport. Self-fueling refers to the transfer of fuel—of any type—from a fixed or mobile fuel tank owned by the aircraft owner into their aircraft, either by the owner or an employee acting on their behalf. As outlined in this policy, individuals intending to self-fuel must first obtain a permit from the airport manager's office by completing the "Application for Private Self-Fueling Permit." This permit verifies aircraft ownership, specifies the equipment to be utilized, and confirms the applicant's understanding of the rules and regulations governing self-fueling activities. These rules also emphasize adherence to safety protocols and regulatory compliance, including NFPA 407 (National Fire Protection Association guidelines addressing fuel fire safety, as adopted by the FAA), 14 CFR Part 139 (regulations on handling and storing hazardous materials at airports with commercial air service), and required training standards. Additionally, the document details applicable flowage fees and exemptions. **Therefore, I respectfully recommend that the Sheridan County Board of Commissioners approve and Adopt the Rules & Regulations Governing Self-Fueling of Aircraft at the County Airport.**

SHERIDAN COUNTY AIRPORT
SPECIALIZED AVIATION SERVICE OPERATOR (SASO)
USE AGREEMENT

The County of Sheridan, Wyoming ("County"), and Gardner-Lowe Aviation Services ("Operator") enter into this Agreement ("Agreement"). In consideration of the mutual covenants contained herein, the parties agree as follows:

I. **DEFINITIONS.**

Aeronautical Activity - any activity which involves, making possible, or is required for the operation of aircraft, or to which contributes to or is required for the safety of such operations.

Aircraft - any contrivance invented, used, or designated for navigation of, or flight in, the air.

Aircraft Maintenance - the repair, adjustment or inspection of aircraft.

Aircraft Movement Area (AMA) - as used in this Agreement shall mean those portions of the Airport made available for aircraft operations and identified as the "Premises" and shall include runways, taxiways, safety areas, ramps, aprons, tie-downs, and areas directly associated therewith, and which are not leased by any other tenant on the Airport.

Airport - the Sheridan County Airport and all of the property, buildings, facilities, and improvements within the exterior boundaries of such airport as it now exists in the Airport Layout Plan or as it may hereinafter be extended enlarged or modified.

Airport Layout Plan (ALP) - The FAA approved plans and drawings of an airport depicting the layout of existing and proposed airport facilities.

Air Operations Area (AOA) - as used in this Agreement shall mean those portions of the Airport made available for aircraft operations and shall include runways, taxiways, safety areas, ramps, aprons, tie-downs, and areas directly associated therewith, and which are not leased by any other tenant on the Airport.

Apron - a paved area suitable for aircraft parking

Commercial Aeronautical Activity - Any Aeronautical Activity which involves, makes possible or relates to the operation of aircraft, the purpose of such activity being to secure income, earnings, compensation or profit, whether or not such objective(s) is accomplished.

Commercial Aeronautical Endeavor - Any entity making a concerted effort in pursuing with Airport Management a lease agreement, which allows for the operation of a commercial aeronautical activity on the airport.

Entity - A person, persons, firm, partnership, Limited Liability Company, unincorporated proprietorship, association, group, or corporation.

FAA - Federal Aviation Administration

Fixed Base Operator (FBO) - any aviation business or fixed base operator duly licensed and authorized by written agreement with the airport owner to provide aeronautical activities at the airport under strict compliance with such agreement.

Improvements - any buildings, structures, and facilities including pavement, fencing, signs, and landscaping constructed, installed, or placed on, under or above any leased area.

Minimum Operating Standards – Qualifications established by the Sheridan County Board of County Commissioners and the Airport Management as the minimum requirements to be met as a condition for the right to conduct a commercial aeronautical activity on the Airport.

Operator – an entity that provides any commercial aeronautical activity.

Ramp - a paved area suitable for aircraft parking.

Specialized Aviation Service Operator (SASO) - An aeronautical business that offers a single or limited service. Examples of these specialized services may include aircraft fueling, retail aircraft fuel sales, aircraft flying clubs, flight training, aircraft airframe and power plant repair/maintenance, aircraft charter, air taxi or air ambulance, aircraft sales, avionics, instrument or propeller services, aircraft management, or other specialized commercial flight support business. With written approval from County, a Specialized Aviation Service Operator may offer one or more of the activities stated herein.

Tie-downs – the area, paved, or unpaved, suitable for parking and mooring of aircraft wherein suitable tie down points have been located.

II. PREMISES.

- A. The "Premises" shall be identified as the Aircraft Movement Area (AMA) i.e., runways, taxiways, ramps, aprons, etc. as identified and shown on the Sheridan County Airport's ALP attached hereto as Exhibit A, together with the right of ingress and egress for both aircraft and vehicles.
- B. Operator has acquired a sublease from Sheridan Pilots 307, LLC for the premises identified and shown on Exhibit B attached hereto (the "Premises"), together with the right of ingress and egress. Nothing in this Agreement relieves the Operator from compliance with all terms and conditions as sublessee under that sublease.

III. USE OF PREMISES.

Operator is hereby granted the non-exclusive privilege to engage as a Specialized Aviation Service Operator (SASO) at the Sheridan County Airport to provide the following commercial aviation activities/services; ***FAA certified Part 145 repair station, aircraft parts supply store, and avionics sales*** and no other. Operator shall not engage in any other commercial operation either aviation and non-aviation related, without the written consent of County. Such consent shall not be unreasonably withheld or delayed.

IV. OPERATOR'S RIGHTS AND OBLIGATIONS.

A. OPERATOR'S RIGHTS.

1. Operator shall have the quiet enjoyment of the Premises in accordance with the covenants in this Agreement.
2. Operator shall be entitled to the non-exclusive use of all facilities and improvements of a public nature which now are or may hereafter be connected with or appurtenant to the Airport, including the use of landing areas, runways, taxiways, navigational aids, etc., as designated by County.
3. Operator in providing the authorized services pursuant to this Agreement shall have the right to choose, at its sole discretion, its vendors, and suppliers.
4. Operator shall have the non-exclusive right to utilize the apron immediately adjacent to the leased Premises and the public tie downs located west of the A and B hangars for Operator's commercial operations and customers.

B. AUTHORIZED SERVICES.

AIRCRAFT AIRFRAME AND POWER PLANT REPAIR, MAINTENANCE, AVIONICS

1. Operator shall operate and maintain an Aircraft Maintenance Repair Station consistent with Federal Aviation Administration regulations for based and transient aircraft to include as a minimum:
 - a. Inspection Services.
 - b. Airframe and Power Plant overhauls and repairs.
 - c. Structural overhauls and repairs.
 - d. Sales of engine parts, instruments, and accessories.

C. OPERATING STANDARDS.

In providing any of the authorized services or activities specified in the Agreement, Operator shall meet or exceed the following standards:

1. Business Office hours shall be established based upon discussions between Operator and the Airport Manager. Such hours shall be agreed to in writing by both parties and reviewed periodically to see if current hours are adequate.
2. Operator shall furnish service on a fair, reasonable, and non-discriminatory basis to all customers of Operator. Operator shall furnish good, prompt, and efficient services adequate to meet all reasonable demands for its services at the Airport. Operator shall charge fair, reasonable, and non-discriminatory prices for each unit of sale or service; provided, however, that Operator may be allowed to make reasonable and

non-discriminatory discounts, rebates, or other similar types of price reductions to volume purchasers.

3. Operator shall comply with all federal, state, and local laws, rules, and regulations, which may apply to the conduct of Operator's business, including rules and regulations promulgated by County. Operator shall keep in effect and post in a prominent place all necessary or required licenses or permits.
4. Operator shall select and appoint a full-time manager for its operations at the Airport. The manager shall be qualified and experienced, and vested with full power and authority to act in the name of Operator with respect to the method, manner, and conduct of the operation of the Specialized Aviation Service Operator (SASO) services to be provided under this Agreement.
5. Operator shall provide, at its sole expense, a sufficient number of employees to provide effectively and efficiently the services required or authorized under this Agreement.
6. Operator shall control the conduct, demeanor, and appearance of its employees, who shall be trained and possess such technical qualifications and hold such certificates of qualification as may be required in carrying out assigned duties. It shall be the responsibility of Operator to maintain close supervision over its employees to assure a high standard of service to its customers
7. Operator shall at its sole expense repair any improvements existing, installed, altered, or constructed on the Premises in a reasonable appearance and state of repair with normal wear and tear excepted. In the event Operator fails to so reasonably repair the improvements, County may, after providing notice to Operator, enter the Premises and perform the repair. Operator shall pay the costs of any such repairs in addition to all other rental fees and other charges.
8. Operator shall comply with the Sheridan County Airport's Security Program and Airport Certification Manual.

V. COUNTY'S RIGHTS AND OBLIGATIONS.

1. County reserves the right, at its sole discretion, to grant others certain rights and privileges upon the Airport which are identical in part or in whole to those granted to Operator. However, County does covenant that:

- a. County shall enforce all minimum operating standards or requirements for all aeronautical endeavors and activities conducted at the Airport.
2. County reserves a right of flight for the passage of aircraft in the airspace above the surface of the Premises and for the noise and fumes inherent in the operation of aircraft including landing, taking off, and operating aircrafts now known or hereafter used for flight or navigation.
3. County shall maintain all public and common or joint use areas of the Airport, including the AOA in good repair and shall make such repairs, replacements or additions thereto as, in its opinion, are required and necessary for the safe and efficient operation of the Airport, together with the right to direct and control all activities of Operator in this regard.
4. County shall keep the aircraft taxilanes and ramps adjacent to the Premises reasonably free and clear of snow in accordance with the Airport Snow and Ice Control Plan (SICP) a copy of which can be requested by Operator.

VI. TERM.

1. This Agreement is for a term of ten years, commencing May 1, 2025 (the "Commencement Date") and ending May 1, 2035 (the "Termination Date"), unless sooner terminated, upon termination of the sublease agreement between Operator and Sheridan Pilots 307, LLC.

VII. FEES.

Under this agreement, there shall be no fees for providing the following commercial aviation services and activities; FAA certified Part 145 repair station, aircraft parts supply store, and avionics sales.

VIII. INSURANCE.

A. OPERATOR'S REQUIREMENTS.

Operator shall obtain and maintain continuously in effect at all times during the term of this Agreement, at Operator's sole expense, the following insurance:

1. Comprehensive general liability insurance protecting County against any and all liability from Operator's use of the Premises, or resulting from any accident occurring on or about the roads, driveways, or other public places, including runways, taxiways, ramps, or aprons used by Operator at

the Airport, caused by or arising out of any wrongful act or omission of Operator, in an amount of not less than one million dollars.

2. \$1,000,000 Products and Completed Operations Liability Insurance for aircraft maintenance, and the sale of aircraft parts
3. Fire and extended coverage insurance on all fixed improvements erected by Operator on or in the Premises to the full insurable value thereof. Operator agrees that all proceeds received from said insurance for any loss or damage covered thereby shall be used to repair and replace such loss or damage.
4. The insurance specified in Paragraphs A.1. through A.3., above, shall name County as an additional insured. Operator shall furnish a Certificate from the Insurance Carrier or Carriers showing such insurance to be in full force and effect during the term of the Agreement. All said policies shall provide for a minimum of ten-business days notice to County in the event of cancellation, non-renewal, or material change in the terms thereof.
5. Operator bears sole risk of loss to all personal property on the premises.

IX. GENERAL COVENANTS.

- A. AGREEMENT CONSTRUCTION. This Agreement has been negotiated between the parties and no preference shall be given to any party should the construction of any term of this Agreement be required by a Court.
- B. AMENDMENTS/MODIFICATION. Any changes, modifications, revisions or amendments to this Agreement which are mutually agreed upon by the parties to this Agreement shall be incorporated by written instrument, executed and signed by all parties to this Agreement.
- C. AMERICANS WITH DISABILITIES ACT (ADA). The parties shall not discriminate against a qualified individual with a disability and shall comply with the Americans with Disabilities Act P.L. 101-336, 42 U.S.C. 12101, et seq., and/or any properly promulgated rules and regulations related thereto. By signing below the parties agree to the above-terms. Additionally, any person signing certifies that he or she has been properly authorized to enter into this Agreement by his or her respective party.
- D. APPLICABLE LAW/VENUE. The construction, interpretation and enforcement of this Agreement shall be governed by the laws of the State of Wyoming. The Courts of the State of Wyoming shall have jurisdiction over this Agreement and the parties, and the venue shall be the Fourth Judicial District, Sheridan County, Wyoming.

- E. ASSIGNMENT/AGREEMENT NOT USED AS COLLATERAL. This Agreement is not assignable. Neither this Agreement nor any interest herein shall pass to any trustee or receiver in bankruptcy or to any other receiver or assignee for the benefit of creditors or in any other way by operation of law. Operator shall not use this Agreement, or any portion thereof, for collateral for any financial obligation, without the prior written permission of County.
- F. BEYOND TERM. This Agreement provides a definable benefit to Sheridan County and its citizens and desires to enter into this agreement beyond the term of this Board of County Commissioners so that the full benefit to Sheridan County might be realized.
- G. BUILDING CODES. Operator shall comply with all requirements of local, state or federal laws and building codes.
- H. BUILDING PERMITS. Operator shall obtain all permits required for construction of improvements. Operator shall, at its sole expense, pay all costs and expenses associated with obtaining said building permits.
- I. BUSINESS ASSOCIATE. If under the Health Insurance Portability and Accountability Act, OPERATOR / CONTRACTOR is a "business associate", OPERATOR / CONTRACTOR shall appropriately safeguard any protected health information.
- J. COMPLIANCE WITH LAWS. Operator shall comply with all applicable municipal, state, and federal ordinances, laws, rules, and regulations as they are now or as they are enacted.
- K. DEFAULT AND TERMINATION.
1. If Operator defaults in performance of any term of this Agreement and that default remains for a period of thirty days after written notice of default, Airport may terminate this Agreement. If County defaults in its performance of any term of this Agreement and that default remains for a period of thirty days after written notice of default, Operator may terminate this Agreement.
 2. A second default in any of the terms of this Agreement by Operator shall result in the immediate termination of this Agreement.
 3. Neither party shall be held to be in breach of the Agreement because of any failure to perform any of its obligations hereunder if said failure is due to any cause for which it is not responsible and over which it has no control. However, this shall not apply to failure by Operator to pay any fees or other charges due pursuant to this Agreement.

4. This Agreement may also be terminated upon mutual written agreement by the parties.
- L. EFFECT OF TERMINATION. All covenants of this Agreement that should, by their nature, survive the termination of this Agreement shall so survive.
- M. ENTIRE AGREEMENT. This thirteen-page document and all Exhibits constitute the entire agreement between the parties and supersedes all prior agreements between the parties covering the subject matter hereof.
- N. FORCE MAJEURE. Neither party shall be liable for failure to perform under this Agreement if such failure to perform arises out of causes beyond the control and without the fault or negligence of the nonperforming party. Such causes may include, but are not limited to acts of the public enemy, fires, floods, epidemics, quarantine restrictions, freight embargoes, and unusually severe weather. This provision shall become effective only if the party failing to perform immediately notifies the other party of the extent and nature of the problem, limits delay in performance to that required by the event, and takes all reasonable steps to minimize delays.
- O. GOVERNMENTAL IMMUNITY. Nothing in this Agreement shall in any way be deemed a waiver of any of the requirements or immunities provided by the Wyoming Governmental Claims Act.
- P. HEADINGS. The headings used in this Agreement are intended for convenience of reference only and do not define or limit the scope or meaning of any provision of this Agreement.
- Q. INDEMNIFICATION.
1. Operator shall indemnify, defend, and save County, its agents, officers, representatives and employees, harmless from and against any and all penalties, liability or loss, including costs and attorney fees resulting from claims or court action, whether civil, criminal or in equity, arising directly or indirectly out of acts or omissions of Operator or its agents or employees or through any injury or casualty occurring on the Premises as a result thereof unless gross negligence or willful misconduct by County, its agents, officers, representatives or employees was the proximate cause.
 2. County shall indemnify, defend, and save Operator, its agents, officers, representatives, employees and guests, harmless from and against any and all penalties, liability or loss, including costs and attorney fees resulting from claims or court action, whether civil, criminal or in equity, arising directly or indirectly out of acts or omissions of County or its agents or employees or through any injury or casualty occurring on the Premises as a result thereof unless gross

negligence or willful misconduct by Operator, its agents, officers, representatives or employees was the proximate cause.

R. INDEPENDENT CONTRACTOR. Operator is an independent contractor and not an employee or agent of County. The selection, retention, assignment, direction, and payment of Operator's employees shall be the sole responsibility of Operator, and County shall not attempt to exercise any control over the daily performance of duties by Operator's employees.

S. NON-DISCRIMINATION.

1. Operator shall use the Premises in compliance with all other requirements imposed by or pursuant to Title 49, Code of Federal Regulations, Department of Transportation, Subtitle A, Office of the Secretary, Part 21, Nondiscrimination in Federally Assisted Programs of the Department of Transportation - Effectuation of Title VI of the Civil Rights Act of 1964, and as said regulations may be amended.
2. In all use and operation of the Premises, Operator shall not discriminate or permit discrimination against any person or class of persons by reason of disability, age, sex, race, creed, color, national origin, ancestry, or religion in any manner prohibited by any federal or state laws, rules or regulations existing now, or any amendments thereto.
3. County reserves the right to take such action as the United States Government may direct to enforce nondiscrimination. Noncompliance with this subsection shall constitute a material breach of this Agreement.

T. NO THIRD PARTY BENEFICIARY INTENDED. This Agreement is for the benefit of the parties hereto and is not intended for the benefit of any third party.

U. NOTICE. Any notice given by one party to the other in conjunction with this Agreement shall be in writing and shall be sent by certified mail, return receipt requested, with postage and certification fees prepaid:

If to County, addressed to:
Office of the Airport Manager
Sheridan County Airport
908 W. Brundage Lane
Sheridan, WY 82801

If to Operator, addressed to:
Karl H. Gardner
Gardner-Lowe Aviation Services
500 Aviation Way, B-5
Peachtree City, GA 30269

- V. NONWAIVER. Any waiver by County of any breach of any covenant herein to be kept and performed by Operator shall not be deemed as a continuing waiver and shall not operate to prevent County from declaring a forfeiture for any succeeding breach, either of the same or other covenant.

W. REQUIREMENTS OF THE UNITED STATES.

1. The parties hereto acknowledge that this Agreement is subject to the lawful emergency demands of one or more governmental agencies of the United States of America. Operator shall comply with all lawful demands of the United States, including a lawful demand to deliver possession of all of the Premises as promptly as possible. In the event of any loss of use of the Premises by Operator, Operator shall retain its independent rights and claims for damages and compensation against the government agency responsible therefore, or, at its election, it may share on an equitable basis in any award which may be made for the taking of all the Airport property of which the Premises is a part. In the event such taking by one or more governmental agencies at any time shall constitute less than a termination of all the rights to be enjoyed by Operator hereunder, then during such time of suspension Operator shall be excused from paying rent and the term of this Agreement shall be extended on the same terms expressed herein for a time equivalent to such suspension.
2. County reserves the right to further develop or improve the landing area of the Airport as it deems fit, regardless of the desires or views of Operator, and without interference. Operator understands that this Agreement is subordinate to provisions and requirements of any existing and future agreements between the County and the United States relative to the development, operation or maintenance of the Airport.
3. Operator shall comply with the notification and review requirements covered in part 77 of the Federal Aviation Regulations for the Premises, and on any alterations of the structure.
4. Nothing herein contained shall be construed to grant or authorize the granting of an exclusive right within the meaning of Section 308 of the Federal Aviation Act.
5. Operator shall observe faithfully all rules and regulations affecting use of the Airport, whether established by the Airport Manager, by Sheridan County, by the

State of Wyoming or the United States, or agencies thereof, including, but not limited to rules affecting the operation of motor vehicles upon, to, and from the Airport, provided that such rules shall apply to all users of the Airport and shall not be made specific to Operator alone.

- X. SEVERABILITY. If a provision of this Agreement shall be finally declared void or illegal by any court or administrative agency having jurisdiction, the remaining provisions shall continue in effect as nearly as possible in accordance with the original intent of the parties.
- Y. TAXES. Operator shall pay such taxes as may be levied upon all improvements by the County of Sheridan during the term of this Agreement. It is the understanding that any improvements placed on the Premises shall be considered property of Operator for the purpose of assessing taxes.
- Z. UTILITIES. Operator shall, at its sole expense, pay all costs and expenses required to extend any utility lines from their current location to the Operator's improvements and to bury all utilities and be responsible for the payment of all utilities service hookups, including plant investment and tap fees payable to the City of Sheridan for water and sewer hookups on the Premises and promptly pay for all utilities including, but not limited to trash removal, water, gas, sewer, electric, cable, fiber optics and telephone.

BOARD OF COUNTY COMMISSIONERS
Sheridan County, Wyoming

Clinton Beaver, _____ Date
Deputy County Attorney

Page 12 of 13

GARDNER LOWE AVIATION SERVICES

BY: _____
Karl Gardner Date

STATE OF WYOMING)
) ss.
COUNTY OF SHERIDAN)

The foregoing instrument was acknowledged before me by _____
on _____, 20____.

WITNESS my hand and official seal.

Notary Public

My Commission Expires:

LESSOR'S CONSENT TO SUBLEASE

This Lessor's Consent to Sublease is executed pursuant to Subsection VII. (E) of the Executive Hangar Lease Agreement, commencing on July 29, 2024, between Sheridan County, Wyoming, and Sheridan Pilots 307, LLC., for the leased premises at LA-E1 of the Executive Hangars, phase 1, Sheridan, Wyoming identified on Exhibit A.

WHEREAS, Sheridan Pilots 307, LLC., P.O. Box 10, Sheridan, Wyoming has requested Sheridan County's consent to a sublease of the leased premises (attached hereto as Exhibit A) to Gardner-Lowe Aviation Services, LLC, 500 Aviation Way, B-5, Peachtree City, GA 30269, dated April 24, 2024, for the term commencing April 1, 2025 and thereafter on a month-to-month basis;

NOW THEREFORE, the Board of County Commissioners of Sheridan County, Wyoming hereby grants its consent to the sublease agreement (attached hereto as Exhibit B) from Sheridan Pilots 307, LLC to Gardner-Lowe Aviation Services, LLC.

BOARD OF COUNTY COMMISSIONERS
SHERIDAN COUNTY, WYOMING

Lonnie Wright, Chairman

Date

ATTEST

Eda Schunk Thompson, County Clerk

Date

SUBLEASE

This Sublease agreement (the "Sublease") dated and effective _____, 2025, is between Sheridan Pilots, LLC a Wyoming limited liability company, ("Tenant"), and Lowe Aviation Services, LLC, a Georgia limited liability company, DBA: Gardner Lowe Aviation Services ("Subtenant").

RECITALS

- A. Tenant is lessee under the Sheridan County Airport Executive Hangar Lease Agreement with Sheridan County Airport, dated July 29, 2024, (the "Original Lease"). A copy of the Original Lease is attached as Exhibit A and incorporated hereto. The Original Lease includes a lease for possession of lot E-2 of the airport property wherein Tenant has built an airplane hangar (the "E-2 Hangar").
- B. Tenant wishes to sublease 3,600 square feet of the E-2 Hangar to Subtenant.
- C. Subtenant agrees to lease the E-2 Hangar space under the same terms and conditions as provided in the Original Lease and as provided in this Sublease.

In consideration of the mutual covenants contained in this Sublease, the parties agree as follows:

- 1. The E-2 Hangar is to be used by Subtenant only for an aircraft maintenance and avionics business. The size of the space within the E-2 Hangar available to Subtenant may be altered upon written agreement between Tenant and Subtenant.
- 2. Subtenant shall pay to Tenant each month \$0.8335 per square foot of space rented (\$3,000.00 for 3,600 sq/ft). Rent shall be paid monthly, in advance, on or before the 1st day of each month during the term of this Agreement. After six (6) months, this rate shall be renegotiated by Tenant and Subtenant.
- 3. The term of this Sublease shall begin on April 1, 2025, and continue on a month to month basis thereafter. Either Tenant or Subtenant may cancel this Sublease upon thirty (30) days advance written notice to the other party of this Sublease.
- 4. The Original Lease shall remain in full force and effect according to its terms. Tenant shall remain primarily obligated to perform all terms and conditions of the Original Lease. Subtenant shall remain obligated to perform all obligations under this Sublease.
- 5. Subtenant shall not assign or sublet the E-2 Hangar in whole or part; and shall not permit Subtenant's interest in this Sublease to be vested in any third party by operation of law or otherwise. Tenant has, or will receive, consent from Sheridan County for this Sublease. This Sublease shall terminate if Sheridan County revokes or fails to provide its written consent. This Sublease may be modified or amended only upon written agreement executed by the parties.

6. This Sublease is in all respects subordinate to the terms of the Original Lease. Insofar as the specific terms of this Sublease purport to amend or modify or are in conflict with the specific terms of the Original Lease, the terms of the Original Lease shall control, and such Original Lease terms shall apply in all respects to Subtenant, except that Subtenant's obligation to pay rent to Tenant shall be determined by this Sublease.
7. Any rights under this Sublease may be enforced by Subtenant only against Tenant, and Subtenant shall have no right to enforce any of Tenant's rights under the Original Lease against Sheridan County by virtue of this Sublease, or otherwise. Any termination of the Original Lease automatically extinguishes this Sublease.

IN WITNESS WHEREOF, the undersigned have executed this Sublease as of the date first written above.

TENANT

Sheridan Pilots 307, LLC

By:
Title:

SUBTENANT

Lowe Aviation Services, LLC

By:
Title:



APPLICATION FOR PRIVATE SELF FUELING PERMIT

Applicant Information

Applicant's Name: _____

Mailing Address: _____ State: _____ Zip: _____

Telephone Number: _____ Cell Phone: _____ Fax: _____

Email Address: _____

Authorized/Designated Signatory: _____
(Please Print)

Applicant's Aircraft

1. Aircraft Owner Name: _____

Aircraft Make and Model: _____ N-Number: _____

2. Aircraft Owner Name: _____

Aircraft Make and Model: _____ N-Number: _____

Please attach an additional list, if necessary.

Mobile Refuelers

Owner/Operator Name: _____ *(Must be the same as aircraft owner)*

Vehicle Description: _____

Vehicle I.D. No.: _____ Fuel Type *(circle one)*: 100LL Jet A

Please attach an additional list, if necessary.

Required Submittals

The documents listed below must be submitted with this Application. Failure to include them may result in a delay in the processing of your application and/or the issuance of your permit.

1. For each aircraft listed above, evidence of the applicant's ownership or exclusive control must be provided.
2. For aircraft owned by a Corporation, Limited Liability Company (LLC), Limited Partnership (LP) or General Partnership, the applicable documents from the following list must be provided with this application:

Corporation Articles of Incorporation, breakdown of Ownership interests, written shareholders agreement (if applicable) and evidence that the entity is currently active and in good standing.

Limited Liability Company Articles of Organization, breakdown of Ownership interests, written Operating Agreement, written Operating Agreement, and evidence that the entity is currently active and in good standing.

Limited Partnership Certificate of Limited Partnership, breakdown of Ownership interests, written Limited Partnership Agreement (if applicable) and evidence that the entity is currently active and in good standing.

General Partnership Breakdown of Ownership interests, written Partnership Agreement (if applicable) and evidence that the entity is currently active and in good standing.

3. The applicant must provide all other documents and information as may be requested by Sheridan County Airport

The granting of a permit shall not be construed as the release, waiver, abrogation or right to sell aviation fuels at the Sheridan County Airport.

The Applicant's signature below indicates that the Applicant has read and understands the Sheridan County Airport Self-Fueling Policy and agrees to be bound by them. The Applicant also acknowledges that fraudulent concealment of the true facts related to this Application or in connection with a Private Self Fueling License shall result in the revocation of the License.

Authorized Signature, Title

Date

RULES AND REGULATIONS GOVERNING OPERATIONS AT THE COUNTY AIRPORT

Table of Contents

Section 1. Authority.

Section 2. Purpose.

Section 3. Definitions.

Section 4. Self-fueling of Aircraft

SECTION 1. Authority.

These rules and regulations are adopted under the authority of W.S. 16-3-101 et.seq., W.S. 18-2-101(a)(iii), and W.S. 18-3-504(a)(i).

SECTION 2. Purpose.

The purpose of these rules and regulations is to establish the policies and procedures for various operations and activities conducted at the Airport.

SECTION 3. General Policy.

The general policy of these rules and regulations is that all operations and activities conducted at the Airport be safe, responsible, and in conformity with applicable federal, state, or local regulations.

SECTION 4. Definitions.

As used in these rules and regulations, the following definitions apply:

(a) "Airport" means the Sheridan County, Wyoming, Airport.

(b) "Operator" means the individual who performs the self-fueling of an aircraft.

(c) "Self-fueling" means the transfer of any type of fuel from a fixed or mobile fuel tank owned by the owner of the aircraft into any type of aircraft by the owner of the aircraft or the owner's employee.

(d)

(e)

SECTION 4. Self-Fueling of Aircraft

(a) Permit Required. Self-fueling is permitted only if the aircraft owner receives a self-fueling permit from the Airport Manager and complies with the requirements of this Section.

- (i) Obtain and complete self-fueling permit application from Airport Managers Office (307-674-4222 / 908 West Brundage Lane, Sheridan, WY 82801)
- (ii) Have fueling equipment inspected by the Airport Manager or his designated representative.

(b) Flowage Fees.

- (i) Exemptions. Self-fueling permittees fueling from containers with a capacity of 50 gallons or less and dispensing not more than 200 gallons annually are exempt from fuel flowage fees.
- (ii) Self-fueling permittees fueling from containers with a capacity in excess of 50 gallons shall pay fuel flowage fees for each gallon of fuel dispensed.
- (iii) For every gallon dispensed above 200 gallons annually, a fuel flowage fee shall be paid.
- (iv) Fuel flowage fees shall be remitted to the Airport Manager annually.

(c) Operation Requirements.

- (i) All operators, tenants, and lessees shall conform with NFPA 407 and 14 CFR Part 139.
- (ii) A properly trained and qualified operator shall be present and responsive at all times while fuel is being transferred into or out of any fuel storage facility or fueling vehicles and equipment.
 - (A) The aircraft owner shall provide to the Airport Manager yearly, or when requested, confirmation of training of all employees authorized to refuel under this permit.
 - (B) Operators shall provide certificates of completion of an aviation refueling course approved by the Airport Manager yearly or when requested.
- (iii) No aircraft shall be fueled or defueled while passengers are on board.
- (iv) No aircraft shall be fueled, defueled or oil serviced while the aircraft engines are running, or the aircraft is being warmed by application of heat, or while the aircraft is in a hangar, a congested space, or an enclosed space.

(v) The Airport Manager may approve "hot" fueling with engines running after notification from the permittee of unforeseen circumstances preventing shut down of the engines.

(vi) A turbine powered auxiliary power unit installed aboard an aircraft may be operated during fueling or defueling provided its design, location, and combustion does not constitute a fuel vapor ignition source.

(vii) Only persons authorized in pursuit of official duties shall be permitted in the immediate vicinity of an aircraft while it is being fueled.

(viii) Refueling vehicle operators shall not operate the vehicle in reverse anywhere at the Airport unless a qualified and trained person is present to monitor and direct the safe movement of the vehicle.

(ix) All aircraft shall be positively bonded to the refueler, when applicable, during fueling or defueling operations. Over wing dispensing nozzles shall make positive contact with the edge of the intake or be connected by a bonding wire and clamp.

(x) In the event of fuel spillage, and when there is no apparent presence of fire, fuel delivery units shall not be moved until the spillage is absorbed and removed. Spilled fuel must be cleaned immediately, and the area secured. No aircraft or vehicular movement shall be allowed in the area, nor shall any vehicle or aircraft engine be started if there is fuel on the ground under the aircraft unless authorized by the Fire Department.

(xi). Any person causing or responsible for a fire in the fuel delivery unit while servicing an aircraft shall immediately notify the Sheridan County Airport Aircraft Rescues and Firefighting personnel at 307-751-5442. In the event of spillage, fueling shall be discontinued immediately and all emergency valves and dome covers shall be secured.

(xii) The fuel cargo of any refueling unit shall be unloaded by approved transfer apparatus only, into the fueling tanks of aircraft. Through truck fueling of aircraft is prohibited.

(xiii) If a fueling unit becomes disabled through accident or mechanical failure, fuel may be transferred to another refueling tank or vehicle provided the necessary bonding connections have been made prior to fuel transfer. Metallic "drop tubes" shall be utilized for top load fuel transfers.

(xiv) Fuel trucks shall not approach within one hundred (100) feet of any aircraft to be serviced until aircraft engines are shut off (and propellers motionless) and the pilot or authorized representative has approved the servicing of the plane.

(xv) Fuel trucks shall be positioned at the aircraft to permit direct driving away from the loading or fueling position.

(xvi) No fueling personnel shall use or carry any material, equipment or wear any clothing article which would likely cause a spark or ignition.

(xvii) No smoking or open flame is allowed within one hundred (100) feet of an aircraft being serviced, or any fuel storage area, fuel truck or hydrant or parked aircraft.

(xviii) Fueling operations at storage sites, mobile fuelers, and aircraft shall cease when electrical storms are active within five (5) nautical miles of the Airport.

(xix) No one shall operate any radio transmitter/receiver, cell phones, switch electrical appliances on or off, or operate aircraft radar equipment within fifty (50) feet while an aircraft is being fueled.

(xx) Mobile fuelers, hydrant trucks or fixed dispensing sites shall have at least two (2) dry chemical fire extinguishers with a minimum rating of 40 B:C and a minimum capacity on twenty (20) pounds of dry chemical agent readily available mounted on each side of the fueler. Extinguishers shall be maintained in good working order and shall be inspected monthly by fueling personnel and annually by a competent, certified inspection company. Periodic inspections shall be conducted by fueling personnel as required by local or fire ordinances.

(xxi) Fuel storage areas, mobile fuelers, hydrant trucks or fixed dispensing sites shall be conspicuously marked in contrasting color with the word "FLAMMABLE" in letters at least six (6) inches in height, placed on both sides and rear of the cargo tank, and with the wording "EMERGENCY FUEL SHUT OFF" and other appropriate operating instructions required at the emergency operating devices, in letters at least two (2) inches in height. Each unit will also be conspicuously marked on both sides and rear with the type and grade of fuel it contains as well as DOT hazardous material placards. These standards shall be in compliance with NFPA 407.

(xxii) No new fueling vehicles or fuel storage tanks may be put into service until they are inspected by the Airport Manager.

(xxiii) Pouring or gravity transfer of fuel from any container larger than five (5) gallons is prohibited.

(xxiv) If any malfunction or irregularity is detected on or within the aircraft being fueled or defueled, operations shall cease immediately, and the malfunction or irregularity shall be brought to the attention of the aircraft operator.

(xxv) Self-fueling of aircraft shall only be conducted in areas designated by the Airport Manager.

(xxvi) Fueling personnel and tenants shall take all precautions to ensure fuel farms and fuel facilities are kept clean and safe of accumulated debris, trash, oily rags, vegetation and other conditions which represent serious fire hazards. Hoses, funnels, pumps, motors, electrical wiring and connections, and other equipment used in fueling or defueling operations are subject to inspection by Airport personnel and Fire Department personnel and must be maintained in a safe, sound and nonleaking condition.

(xxvii) The Airport assumes no liability or responsibility for any violation of any aircraft fueling requirement or procedure, any omission, error, negligence, or any other violation of regulatory measures relating to fuel activities.

(xxviii) The operator shall not leave the discharge end of any hose unattended at any time while the transfer of fuel is in progress.

(xxix) The operator shall not block open, disengage, or deactivate the "deadman" switch or any other related controls while fueling or transferring fuel.

16.

238815

**GRANT AGREEMENT BETWEEN
WYOMING DEPARTMENT OF HEALTH, PUBLIC HEALTH DIVISION
AND
SHERIDAN COUNTY**

1. **Parties.** The parties to this Grant Agreement (Agreement) are Wyoming Department of Health, Public Health Division (Agency), whose address is: 122 West 25th Street, 3rd Floor West, Cheyenne, Wyoming 82002, and Sheridan County (Subrecipient), whose address is: 297 South Main Street, Sheridan, Wyoming 82801. This Agreement concerns the Public Health Preparedness and Response Unit.
2. **Purpose of Agreement.** The purpose of this Agreement is to set forth the terms and conditions by which the Subrecipient shall develop public health emergency preparedness and response capability in the jurisdiction through the implementation of the Centers for Disease Control and Prevention Public Health Preparedness Capabilities.
3. **Term of Agreement.** This Agreement is effective when all parties have executed it (Effective Date). The Performance Period of the Agreement is from July 1, 2024, through June 30, 2025. All activities and services shall be completed during this Performance Period.

This Agreement may be extended twice by agreement of both parties in writing and subject to the required approvals. There is no right or expectation of extension and any extension will be determined at the discretion of the Agency.

4. **Payment.**
 - A. The Agency agrees to pay the Subrecipient for the services described in Section 5, below, and in Attachment A, Public Health Preparedness and Response Statement of Work, which is attached to and incorporated into this Agreement by this reference. Total payment under this Agreement shall not exceed ninety-three thousand dollars (\$93,000.00). Payment shall be made in accordance with Attachment A and within forty-five (45) days after submission of invoice pursuant to Wyo. Stat. § 16-6-602. Subrecipient shall submit invoices by the end of the month following expenses incurred in sufficient detail to ensure that payments may be made in conformance with this Agreement.
 - B. No payment shall be made for work performed outside the Performance Period of this Agreement. Should the Subrecipient fail to perform in a manner consistent with the terms and conditions set forth in this Agreement, payment under this Agreement may be withheld until such time as the Subrecipient performs its duties and responsibilities to the satisfaction of the Agency.
 - C. When the Subrecipient is working at a location requiring an overnight stay, the Subrecipient shall be reimbursed at the rates set out in Wyo. Stats. §§ 9-3-102 and 9-3-103.
5. **Responsibilities of Subrecipient.** The Subrecipient agrees to:

- A. Provide the services described in Attachment A; and
 - B. Abide by the terms of the SAFECOM Guidance on Emergency Communications Grants - Fiscal Year 2023, and Centers for Disease Control and Prevention (CDC) Public Health Emergency Preparedness and Response Capabilities: National Standards for State, Local, Tribal, and Territorial Public Health, which are incorporated into this Agreement by this reference.
6. **Responsibilities of Agency.** The Agency agrees to:
- A. Pay Subrecipient in accordance with Section 4 above.
 - B. Provide support as described in Attachment A.
 - C. Monitor and evaluate the Subrecipient's compliance with the conditions set forth in this Agreement.
7. **Special Provisions.**
- A. **Assumption of Risk.** The Subrecipient shall assume the risk of any loss of state or federal funding, either administrative or program dollars, due to the Subrecipient's failure to comply with state or federal requirements. The Agency shall notify the Subrecipient of any state or federal determination of noncompliance.
 - B. **Environmental Policy Acts.** Subrecipient agrees all activities under this Agreement will comply with the Clean Air Act, the Clean Water Act, the National Environmental Policy Act, and other related provisions of federal environmental protection laws, rules or regulations.
 - C. **Human Trafficking.** As required by 22 U.S.C. § 7104(g) and 2 CFR Part 175, this Agreement may be terminated without penalty if a private entity that receives funds under this Agreement :
 - (i) Engages in severe forms of trafficking in persons during the period of time that the award is in effect;
 - (ii) Procures a commercial sex act during the period of time that the award is in effect; or
 - (iii) Uses forced labor in the performance of the award or subawards under the award.
 - D. **Kickbacks.** Subrecipient certifies and warrants that no gratuities, kickbacks, or contingency fees were paid in connection with this Agreement, nor were any fees, commissions, gifts, or other considerations made contingent upon the award of this

Agreement. If Subrecipient breaches or violates this warranty, Agency may, at its discretion, terminate this Agreement without liability to Agency, or deduct from the agreed upon price or consideration, or otherwise recover, the full amount of any commission, percentage, brokerage, or contingency fee.

- E. **Limitations on Lobbying Activities.** By signing this Agreement, Subrecipient certifies and agrees that, in accordance with P.L. 101-121, payments made from a federal grant shall not be utilized by Subrecipient or its sub-subrecipients in connection with lobbying member(s) of Congress, or any federal agency in connection with the award of a federal grant, contract, cooperative agreement, or loan.
- F. **Monitoring Activities.** Agency shall have the right to monitor all activities related to this Agreement that are performed by Subrecipient or its sub-subrecipients. This shall include, but not be limited to, the right to make site inspections at any time and with reasonable notice; to bring experts and consultants on site to examine or evaluate completed work or work in progress; to examine the books, ledgers, documents, papers, and records pertinent to this Agreement; and to observe personnel in every phase of performance of Agreement related work.
- G. **Nondiscrimination.** The Subrecipient shall comply with the Civil Rights Act of 1964, the Wyoming Fair Employment Practices Act (Wyo. Stat. § 27-9-105, *et seq.*), the Americans with Disabilities Act (ADA), 42 U.S.C. § 12101, *et seq.*, and the Age Discrimination Act of 1975 and any properly promulgated rules and regulations thereto and shall not discriminate against any individual on the grounds of age, sex, color, race, religion, national origin, or disability in connection with the performance under this Agreement.
- H. **No Finder's Fees:** No finder's fee, employment agency fee, or other such fee related to the procurement of this Agreement, shall be paid by either party.
- I. **Publicity.** Any publicity given to the projects, programs, or services provided herein, including, but not limited to, notices, information, pamphlets, press releases, research, reports, signs, and similar public notices in whatever form, prepared by or for the Subrecipient and related to the services and work to be performed under this Agreement, shall identify the Agency as the sponsoring agency and shall not be released without prior written approval of Agency.
- J. **Suspension and Debarment.** By signing this Agreement, Subrecipient certifies that neither it nor its principals/agents are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction or from receiving federal financial or nonfinancial assistance, nor are any of the participants involved in the execution of this Agreement suspended, debarred, or voluntarily excluded by any federal department or agency in accordance with Executive Order 12549 (Debarment and Suspension), 44 CFR Part 17, or 2 CFR Part 180, or are on the debarred, or otherwise ineligible, vendors lists maintained by the federal government. Further, Subrecipient agrees to notify Agency by certified mail should it or any of its principals/agents become

ineligible for payment, debarred, suspended, or voluntarily excluded from receiving federal funds during the term of this Agreement.

- K. **Administration of Federal Funds.** Subrecipient agrees its use of the funds awarded herein is subject to the Uniform Administrative Requirements of 2 C.F.R. Part 200, *et seq.*; any additional requirements set forth by the federal funding agency; all applicable regulations published in the Code of Federal Regulations; and other program guidance as provided to it by Agency.
- L. **Copyright License and Patent Rights.** Subrecipient acknowledges that federal grantor, the State of Wyoming, and Agency reserve a royalty-free, nonexclusive, unlimited, and irrevocable license to reproduce, publish, or otherwise use, and to authorize others to use, for federal and state government purposes: (1) the copyright in any work developed under this Agreement; and (2) any rights of copyright to which Subrecipient purchases ownership using funds awarded under this Agreement. Subrecipient must consult with Agency regarding any patent rights that arise from, or are purchased with, funds awarded under this Agreement.
- M. **Federal Audit Requirements.** Subrecipient agrees that if it expends an aggregate amount of seven hundred fifty thousand dollars (\$750,000.00) or more in federal funds during its fiscal year, it must undergo an organization-wide financial and compliance single audit. Subrecipient agrees to comply with the audit requirements of the U.S. General Accounting Office Government Auditing Standards and Audit Requirements of 2 C.F.R. Part 200, Subpart F. If findings are made which cover any part of this Agreement, Subrecipient shall provide one (1) copy of the audit report to Agency and require the release of the audit report by its auditor be held until adjusting entries are disclosed and made to Agency's records.
- N. **Non-Supplanting Certification.** Subrecipient hereby affirms that federal grant funds shall be used to supplement existing funds, and shall not replace (supplant) funds that have been appropriated for the same purpose. Subrecipient should be able to document that any reduction in non-federal resources occurred for reasons other than the receipt or expected receipt of federal funds under this Agreement.
- O. **Program Income.** Subrecipient shall not deposit grant funds in an interest bearing account without prior approval of Agency. Any income attributable to the grant funds distributed under this Agreement must be used to increase the scope of the program or returned to Agency.

8. **General Provisions.**

- A. **Amendments.** Any changes, modifications, revisions, or amendments to this Agreement which are mutually agreed upon by the parties to this Agreement shall be incorporated by written instrument, executed by all parties to this Agreement.
- B. **Applicable Law, Rules of Construction, and Venue.** The construction, interpretation, and enforcement of this Agreement shall be governed by the laws of the State of Wyoming, without regard to conflicts of law principles. The terms

"hereof," "hereunder," "herein," and words of similar import, are intended to refer to this Agreement as a whole and not to any particular provision or part. The Courts of the State of Wyoming shall have jurisdiction over this Agreement and the parties. The venue shall be the First Judicial District, Laramie County, Wyoming.

- C. Assignment Prohibited and Agreement Shall Not be Used as Collateral.** Neither party shall assign or otherwise transfer any of the rights or delegate any of the duties set out in this Agreement without the prior written consent of the other party. The Subrecipient shall not use this Agreement, or any portion thereof, for collateral for any financial obligation without the prior written permission of the Agency.
- D. Audit and Access to Records.** The Agency and its representatives shall have access to any books, documents, papers, electronic data, and records of the Subrecipient which are pertinent to this Agreement. The Subrecipient shall immediately, upon receiving written instruction from the Agency, provide to any independent auditor or accountant all books, documents, papers, electronic data, and records of the Subrecipient which are pertinent to this Agreement. The Subrecipient shall cooperate fully with any such independent auditor or accountant during the entire course of any audit authorized by the Agency.
- E. Availability of Funds.** Each payment obligation of the Agency is conditioned upon the availability of government funds which are appropriated or allocated for the payment of this obligation and which may be limited for any reason including, but not limited to, congressional, legislative, gubernatorial, or administrative action. If funds are not allocated and available for continued performance of the Agreement, the Agreement may be terminated by the Agency at the end of the period for which the funds are available. The Agency shall notify the Subrecipient at the earliest possible time of the services which will or may be affected by a shortage of funds. No penalty shall accrue to the Agency in the event this provision is exercised, and the Agency shall not be obligated or liable for any future payments due or for any damages as a result of termination under this section.
- F. Award of Related Agreements.** The Agency may award supplemental or successor Agreements for work related to this Agreement or may award Agreements to other subrecipients for work related to this Agreement. The Subrecipient shall cooperate fully with other subrecipients and the Agency in all such cases.
- G. Compliance with Laws.** The Subrecipient shall keep informed of and comply with all applicable federal, state, and local laws and regulations, and all federal grant requirements and executive orders in the performance of this Agreement.
- H. Confidentiality of Information.** Except when disclosure is required by the Wyoming Public Records Act or court order, all documents, data compilations, reports, computer programs, photographs, data, and other work provided to or produced by the Subrecipient in the performance of this Agreement shall be kept confidential by the Subrecipient unless written permission is granted by the Agency

for its release. If and when Subrecipient receives a request for information subject to this Agreement, Subrecipient shall notify Agency within ten (10) days of such request and shall not release such information to a third party unless directed to do so by Agency.

- I. **Entirety of Agreement.** This Agreement, consisting of nine (9) pages; and Attachment A, Public Health Preparedness and Response Statement of Work, consisting of thirteen (13) pages, represent the entire and integrated Agreement between the parties and supersede all prior negotiations, representations, and agreements, whether written or oral. In the event of a conflict or inconsistency between the language of this Agreement and the language of any attachment or document incorporated by reference, the language of this Agreement shall control.
- J. **Ethics.** Subrecipient shall keep informed of and comply with the Wyoming Ethics and Disclosure Act (Wyo. Stat. § 9-13-101, *et seq.*) and any and all ethical standards governing Subrecipient's profession.
- K. **Extensions.** Nothing in this Agreement shall be interpreted or deemed to create an expectation that this Agreement will be extended beyond the term described herein. Any extension of this Agreement shall be initiated by the Agency and shall be accomplished through a written amendment between the parties entered into before the expiration of the original Agreement or any valid amendment thereto, and shall be effective only after it is reduced to writing and executed by all parties to the Agreement.
- L. **Force Majeure.** Neither party shall be liable for failure to perform under this Agreement if such failure to perform arises out of causes beyond the control and without the fault or negligence of the nonperforming party. Such causes may include, but are not limited to, acts of God or the public enemy, fires, floods, epidemics, quarantine restrictions, freight embargoes, and unusually severe weather. This provision shall become effective only if the party failing to perform immediately notifies the other party of the extent and nature of the problem, limits delay in performance to that required by the event, and takes all reasonable steps to minimize delays.
- M. **Indemnification.** Each party to this Agreement shall assume the risk of any liability arising from its own conduct. Neither party agrees to insure, defend, or indemnify the other.
- N. **Independent Contractor.** The Subrecipient shall function as an independent Subrecipient for the purposes of this Agreement and shall not be considered an employee of the State of Wyoming for any purpose. Consistent with the express terms of this Agreement, the Subrecipient shall be free from control or direction over the details of the performance of services under this Agreement. The Subrecipient shall assume sole responsibility for any debts or liabilities that may be incurred by the Subrecipient in fulfilling the terms of this Agreement and shall be solely responsible for the payment of all federal, state, and local taxes which may accrue because of this Agreement. Nothing in this Agreement shall be interpreted

as authorizing the Subrecipient or its agents or employees to act as an agent or representative for or on behalf of the State of Wyoming or the Agency or to incur any obligation of any kind on behalf of the State of Wyoming or the Agency. The Subrecipient agrees that no health or hospitalization benefits, workers' compensation, unemployment insurance, or similar benefits available to State of Wyoming employees will inure to the benefit of the Subrecipient or the Subrecipient's agents or employees as a result of this Agreement.

- O. **Notices.** All notices arising out of, or from, the provisions of this Agreement shall be in writing either by regular mail or delivery in person at the addresses provided under this Agreement.
- P. **Ownership and Return of Documents and Information.** Agency is the official custodian and owns all documents, data compilations, reports, computer programs, photographs, data, and other work provided to or produced by the Subrecipient in the performance of this Agreement. Upon termination of services, for any reason, Subrecipient agrees to return all such original and derivative information and documents to the Agency in a useable format. In the case of electronic transmission, such transmission shall be secured. The return of information by any other means shall be by a parcel service that utilizes tracking numbers.
- Q. **Patent or Copyright Protection.** The Subrecipient recognizes that certain proprietary matters or techniques may be subject to patent, trademark, copyright, license, or other similar restrictions, and warrants that no work performed by the Subrecipient or its sub-subrecipients will violate any such restriction. The Subrecipient shall defend and indemnify the Agency for any infringement or alleged infringement of such patent, trademark, copyright, license, or other restrictions.
- R. **Prior Approval.** This Agreement shall not be binding upon either party, and the Wyoming State Auditor shall not draw warrants for payment, until this Agreement has been fully executed, approved as to form by the Office of the Attorney General, filed with and approved by A&I Procurement, and approved by the Governor of the State of Wyoming, or his designee, if required by Wyo. Stat. § 9-2-3204(b)(iv).
- S. **Insurance Requirements.** Subrecipient is protected by the Wyoming Governmental Claims Act, Wyo. Stat. § 1-39-101, et seq., and certifies that it is a member of the Wyoming Association of Risk Management (WARM) pool or the Local Government Liability Pool (LGLP), Wyo. Stat. § 1-42-201, et seq., and shall provide a letter verifying its participation in the WARM or LGLP to the Agency.
- T. **Severability.** Should any portion of this Agreement be judicially determined to be illegal or unenforceable, the remainder of the Agreement shall continue in full force and effect, and the parties may renegotiate the terms affected by the severance.
- U. **Sovereign Immunity and Limitations.** Pursuant to Wyo. Stat. § 1-39-104(a), the State of Wyoming and Agency expressly reserve sovereign immunity by entering

into this Agreement and the Subrecipient expressly reserves governmental immunity. Each of them specifically retains all immunities and defenses available to them as sovereigns or governmental entities pursuant to Wyo. Stat. § 1-39-101, *et seq.*, and all other applicable law. The parties acknowledge that the State of Wyoming has sovereign immunity and only the Wyoming Legislature has the power to waive sovereign immunity. Designations of venue, choice of law, enforcement actions, and similar provisions shall not be construed as a waiver of sovereign immunity. The parties agree that any ambiguity in this Agreement shall not be strictly construed, either against or for either party, except that any ambiguity as to immunity shall be construed in favor of immunity.

- V. **Taxes.** The Subrecipient shall pay all taxes and other such amounts required by federal, state, and local law, including, but not limited to, federal and social security taxes, workers' compensation, unemployment insurance, and sales taxes.
- W. **Termination of Agreement.** This Agreement may be terminated, without cause, by the Agency upon thirty (30) days written notice. This Agreement may be terminated by the Agency immediately for cause if the Subrecipient fails to perform in accordance with the terms of this Agreement.
- X. **Third-Party Beneficiary Rights.** The parties do not intend to create in any other individual or entity the status of third-party beneficiary, and this Agreement shall not be construed so as to create such status. The rights, duties, and obligations contained in this Agreement shall operate only between the parties to this Agreement and shall inure solely to the benefit of the parties to this Agreement. The provisions of this Agreement are intended only to assist the parties in determining and performing their obligations under this Agreement.
- Y. **Time is of the Essence.** Time is of the essence in all provisions of this Agreement.
- Z. **Titles Not Controlling.** Titles of sections and subsections are for reference only and shall not be used to construe the language in this Agreement.
- AA. **Waiver.** The waiver of any breach of any term or condition in this Agreement shall not be deemed a waiver of any prior or subsequent breach. Failure to object to a breach shall not constitute a waiver.
- BB. **Counterparts.** This Agreement may be executed in counterparts. Each counterpart, when executed and delivered, shall be deemed an original and all counterparts together shall constitute one and the same Agreement. Delivery by the Subrecipient of an originally signed counterpart of this Agreement by facsimile or PDF shall be followed up immediately by delivery of the originally signed counterpart to the Agency.

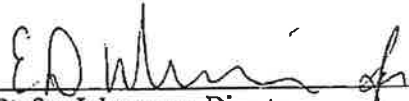
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9. **Signatures.** The parties to this Agreement, either personally or through their duly authorized representatives, have executed this Agreement on the dates set out below, and certify that they have read, understood, and agreed to the terms and conditions of this Agreement.

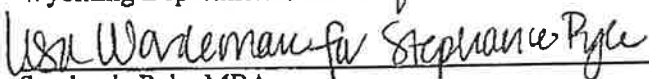
The Effective Date of this Agreement is the date of the signature last affixed to this page.

AGENCY:

Wyoming Department of Health, Public Health Division


Stefan Johansson, Director
Wyoming Department of Health

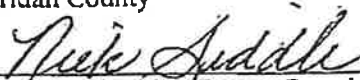
5-31-2024
Date


Stephanie Pyle, MBA
Senior Administrator, Public Health Division

5/29/24
Date

SUBRECIPIENT:

Sheridan County


Chairman, Sheridan County Board of Commissioners

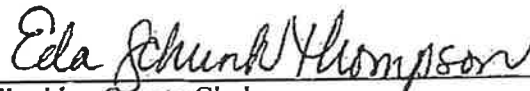
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Date

SHERIDAN COUNTY ATTORNEY: APPROVAL AS TO FORM


Sheridan County Attorney

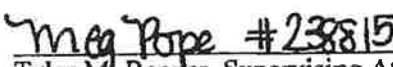
5/21/24
Date

COUNTY CLERK'S ATTESTATION:


Sheridan County Clerk

5/21/24
Date

ATTORNEY GENERAL'S OFFICE: APPROVAL AS TO FORM


for Tyler M. Renner, Supervising Attorney General

4/26/24
Date

9. **Signatures.** The parties to this Agreement, either personally or through their duly authorized representatives, have executed this Agreement on the dates set out below, and certify that they have read, understood, and agreed to the terms and conditions of this Agreement.

The Effective Date of this Agreement is the date of the signature last affixed to this page.

AGENCY:

Wyoming Department of Health, Public Health Division


Stefan Johansson, Director
Wyoming Department of Health

5-31-2024
Date

Stephanie Pyle, MBA
Senior Administrator, Public Health Division

Date _____

SUBRECIPIENT:

Sheridan County

Chairman, Sheridan County Board of Commissioners

Date _____

SHERIDAN COUNTY ATTORNEY: APPROVAL AS TO FORM

Sheridan County Attorney

Date

COUNTY CLERK'S ATTESTATION:

Sheridan County Clerk

Date

ATTORNEY GENERAL'S OFFICE: APPROVAL AS TO FORM

for Meg Pope #23815
Tyler M. Renner, Supervising Attorney General

4/26/24
Date

General Description

The parties to the Agreement are the Wyoming Department of Health, Public Health Division (Agency) and Sheridan County (Subrecipient). This Statement of Work (SOW) pertains to and is managed by the Public Health Preparedness and Response Unit (PHPR). This document is a SOW to identify and describe deliverables and payment structure for developing public health emergency preparedness and response capability in the jurisdiction by implementing the Centers for Disease Control and Prevention Public Health Preparedness Capabilities. Deliverables have been developed from the Centers for Disease Control and Prevention (CDC) *Public Health Emergency Preparedness and Response Capabilities – October 2018* document that is incorporated into the Agreement by this reference.

The requirements articulated in this SOW represent known preparedness requirements articulated by CDC and PHPR. The Agency retains the right to change the deliverables as outlined below upon execution of an Agreement amendment under Section 8.A of the Agreement, based on any additional requirements or information from the CDC. Other requirements or changes will be articulated to the Subrecipient as soon as possible once PHPR receives this information. Failure to meet these requirements and show progress in all requirements may affect future funding for the Agency and, in turn, preparedness and response funding for the Subrecipient. Deliverables must be completed by the due date; payments will only be made once all deliverables for the prior quarter are met. PHPR staff is available to facilitate planning activities and provide technical assistance.

The Subrecipient's Public Health Response Coordinator (PHRC) is typically responsible for addressing the below deliverables. However, the Subrecipient is responsible for meeting these requirements whether or not the Subrecipient has identified a PHRC.

Payment

- A. The source of funds for this Agreement is via a Cooperative Agreement from the Centers for Disease Control and Prevention Assistance Listing Number (ALN) No. 93.069, in the amount of ninety-three thousand dollars (\$93,000.00).
- B. The Agency agrees to pay the Subrecipient for the services described in this SOW. For the Period of Performance, total payment under this Agreement shall not exceed ninety-three thousand dollars (\$93,000.00).
- C. Subrecipient must match ten percent (10%) of total federal funding awarded to the Subrecipient. Match may be provided directly or through donations from public or private entities and may be in cash or in kind, fairly evaluated, including equipment or services. Amounts provided by the federal government or services assisted or subsidized to any significant extent by the federal government may not be included in determining the amount of such non-federal contributions.
- D. Restrictions on funding are:

- a. Subrecipient may not use funds for research.
- b. Subrecipient may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- c. Generally, Subrecipient may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- d. Reimbursement of pre-award costs generally is not allowed, unless the CDC provides written approval to the recipient.
- e. Other than for normal and recognized executive-legislative relationships, no funds may be used for:
 - i. Publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body.
 - ii. The salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

E. General restrictions:

- a. Subrecipient may supplement but not supplant existing state or federal funds for activities described in the budget.
- b. Payment or reimbursement of backfilling costs for staff is not allowed.
- c. None of the funds awarded to these programs may be used to pay the salary of an individual at a rate in excess of Executive Level II or \$189,600 per year.
- d. Funds may not be used to purchase or support (feed) animals for labs, including mice.
- e. Funds may not be used to purchase a house or other living quarters for those under quarantine. Rental may be allowed with approval from the CDC Office of Grants Services.
- f. Subrecipient may (with prior approval) use funds for overtime for individuals directly associated (listed in personnel costs) with the award with prior approval from CDC OGS.

F. Lobbying

- a. Other than for normal and recognized executive-legislative relationships, Public Health Emergency Preparedness (PHEP) funds may not be used for:

- i. Publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body.
- ii. The salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.
- iii. See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC Subrecipient (http://www.cdc.gov/grants/documents/Anti-Lobbying_Restrictions_for_CDC_Grantees_July_2012.pdf).

G. Construction and Major Renovations

- a. Subrecipient may not use funds for construction or major renovations. Generally, Subrecipient may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly justified in the budget.

H. Passenger Road Vehicles

- a. Funds cannot be used to purchase over-the road passenger vehicles.
- b. Funds cannot be used to purchase vehicles to be used as means of transportation for carrying people or goods, such as passenger cars or trucks and electrical or gas-driven motorized carts.
- c. Subrecipient can (with prior approval) use funds to lease vehicles to be used as means of transportation for carrying people or goods, e.g., passenger cars or trucks and electrical or gas-driven motorized carts during times of need.
- d. Additionally, PHEP grant funds can (with prior approval) be used to make transportation agreements with commercial carriers for movement of materials, supplies and equipment. There should be a written process for initiating transportation agreements (e.g., contracts, memoranda of understanding, formal written agreements, and/or other letters of agreement). Transportation agreements should include, at a minimum:
 - i. Type of vendor
 - ii. Number and type of vehicles, including vehicle load capacity and configuration
 - iii. Number and type of drivers, including certification of drivers
 - iv. Number and type of support personnel
 - v. Vendor's response time

- vi. Vendor's ability to maintain cold chain, if necessary to the incident
- vii. This relationship may be demonstrated by a signed transportation agreement or documentation of transportation planning meeting with the designated vendor. All documentation should be available to the CDC project officer for review if requested.

I. Transportation of Medical Materiel

- a. Funds can (with prior approval) be used to procure leased or rental vehicles for movement of materials, supplies and equipment.
- b. Subrecipient can (with prior approval) use funds to purchase material-handling equipment (MHE) such as industrial or warehouse-use trucks to move materials, such as forklifts, lift trucks, turret trucks, etc. Vehicles must be of a type not licensed to travel on public roads.
- c. Subrecipient may purchase basic (non-motorized) trailers with prior approval from the CDC.

J. Procurement of Food and Clothing

- a. Funds may not be used to purchase clothing such as jeans, cargo pants, polo shirts, jumpsuits, sweatshirts, coats, or T-shirts. Purchase of vests to be worn during exercises or responses may be allowed.
- b. Funds may not be used to purchase food.

K. Vaccines

- a. Subrecipient may, with prior CDC approval, use funds to purchase caches of antibiotics for use by public health responders and their households to ensure the health and safety of the public health workforce during an emergency response, or an exercise to test response plans. Funds may not be used to supplant other funding intended to achieve this objective.
- b. Subrecipient may, with prior CDC approval, use funds to purchase caches of vaccines for public health responders and their households to ensure the health and safety of the public health workforce.
- c. Subrecipient may, with prior CDC approval, use funds to purchase caches of vaccines or ancillary supplies for select critical workforce groups to ensure their health and safety during an exercise to validate response plans.
- d. Subrecipient must document in their submitted exercise plans the use of vaccines for select critical workforce personnel before CDC will approve the vaccine purchase.

- e. Subrecipient may not use PHEP funds to supplant other funding intended to achieve these objectives. Subrecipient of PHEP-funded vaccines (within the context of the exercise) may include:

i. Persons who meet the criteria in the CDC-Advisory Committee on Immunization Practices (CDC/ACIP) recommendations www.cdc.gov/vaccines/acip/index.html for who should receive vaccine;

ii. Persons who are not eligible to receive the vaccine through other entitlement programs such as Medicare, Medicaid, or the Vaccines for Children (VFC) program.

1. VFC-eligible children or Medicare beneficiaries may participate in the exercise; however, they should be vaccinated with vaccine purchased from the appropriate funding source.

- f. PHEP funds may not be used to purchase vaccines for seasonal influenza mass vaccination clinics or other routine vaccinations covered by ACIP schedules. PHEP funds may not be used to purchase influenza vaccines for the general public.

Subrecipient may not use funds for clinical care except as allowed by law. For the purposes of this NOFO, clinical care is defined as "directly managing the medical care and treatment of individual patients." PHEP-funded staff may administer MCMs such as antibiotics or vaccines as a public health intervention in the context of an emergency response or an exercise to test response plans. CDC does not consider this clinical care since it is not specific to one.

L. Laboratory Supplies

- a. Instruments, reagents and supplies for the following are not generally purchased with PHEP funding:

- i. Instruments, reagents and supplies for testing seasonal influenza;
- ii. Instruments, reagents and supplies for testing rabies;
- iii. Instruments, reagents and supplies for routine food testing (surveillance);
- iv. Instruments, reagents, and supplies for testing vaccine preventable diseases (e.g. measles, mumps, etc.)
- v. Instruments, reagents, and supplies for routine testing of vector-borne illnesses (both clinical and vector surveillance);
- vi. Routine drug screening of laboratory staff; and
- vii. Influenza vaccines (for the general public).

Because Subrecipient receives substantial assistance from CDC through other programs, Subrecipient should ensure these line items are funded under the appropriate program

- M. All expenditures must support and relate to this SOW.
- N. Subrecipient cannot use funds for bonuses or incentives.
- O. The PHRC will be reimbursed at the rate in the approved Subrecipient budget for 2024 – 2025.
- P. Subrecipient shall provide a full-time PHRC with 100% time and effort allowable, reasonable, and allocable to the PHEP Cooperative Agreement.
- Q. During a federal or state declared emergency, Subrecipient will distribute Personal Protective Equipment (PPE), dispensing medical countermeasures, or vaccines in a manner that will be determined at delivery time.

Timeline and Deliverables

The following table shows specific tasks, milestones, completion dates, and estimated payments. The Deliverables Guidance Matrix for July 1, 2024, through June 30, 2025, will be distributed to the Subrecipient before July 1, 2024. All required deliverable documentation must be submitted to the PHPR established folders on the Contract Reporting Tool (CRT), including invoices for reimbursement, Public Health Nursing Informatics (PHNI) report, and quarterly match summary. Agency will provide a naming convention for posting required documentation to receive credit for the deliverables.

Recurring deliverables to be completed once per quarter:
Domain 1: Strengthen Community Resilience (Capabilities 1 and 2) 1. Support assessment of at-risk populations, including validating data, surveying the jurisdiction community, or fully participating in a state-led at-risk workgroup. 2. Include those with Access and Functional Needs (AFN) and groups who work on their behalf, including the HCC, in preparedness planning, training, exercises, and responses to public health emergencies. 3. Collaborate with local partners and stakeholders, including those representing AFN populations, to identify how communications will be conducted before, during, and following an incident or event.
Domain 2: Strengthen Incident Management (Capability 3) 1. New PHRCs, Public Health Nurse Managers (PHNM), and Health Department Directors (HDD) will attend CRT and fiscal training within thirty (30) days of hire. 2. Submit the quarterly match summary by completing the match spreadsheet on the CRT. Submit supporting documentation from the PHNI system if PHPR time is tracked or another method if the Subrecipient does not use PHNI to track PHPR support and upload to CRT. Due dates are Q1 due October 31, 2024; Q2 due January 31, 2025; Q3 due April 30, 2025; and Q4 due July 31, 2025.

3. Subrecipient shall submit invoices and supporting fiscal documentation by the end of the month following expenses incurred in sufficient detail to ensure that payments may be made in conformance with this Agreement. If the jurisdiction does not comply with the required deliverables, invoices may not be paid until deliverables are complete.
4. Attend monthly joint PHRC and PHPR calls. If the PHRC cannot attend, another jurisdiction member must attend or review the recording within five days.
5. PHNMs and HDDs or designees are to meet with PHRC quarterly to review progress, review deliverables, and complete the progress report. Submit a progress report to the CRT after PHNM or HDD review and approval.
6. Archive all plans and critical documentation for the CRT in a folder established by PHPR for the continuity of operations.
7. Upload quarterly drill data collection sheets to the CRT.

Domain 3: Strengthen Information Management (Capabilities 4 and 6)

1. Review, update, and validate all alerting and notification groups and members, including public health staff in the incident command system and MCM partners each quarter.
2. Review, update, and maintain lists of local physicians, hospital personnel, nurses, and other partners in collaboration with PHPR for inclusion in Wyoming Alert and Response Network (WARN) public health alerts.
3. Review and update public health after-hours contact information quarterly.
4. Respond monthly to statewide (WyoLink) radio drills.
5. Update the list of current spokespersons, local media contacts, and public information officers quarterly or as it changes.

Domain 4: Strengthen Countermeasures and Mitigation (Capabilities 8, 9, 11, and 14)

1. Manage and maintain a stockpile of PPE and respirators for their respective jurisdiction that meets or exceeds the current PHN PPE Guide or stocking levels identified during the COVID-19 response.

Description	Months	Cost	Date
Quarter 1 requirements are due no later than September 30, 2024.	Three (3)	The estimated costs for all deliverables are one quarter (1/4) of the Agreement total.	Upon submission of monthly invoices

Domain 1: Strengthen Community Resilience (Capabilities 1 and 2)

1. Utilize the Threat and Hazard Identification and Risk Assessment (THIRA) identified gaps in all hazard planning.
2. Review, maintain, and update current demographic data and post a list of languages spoken in the Subrecipient jurisdiction on the CRT.

Domain 2: Strengthen Incident Management (Capability 3)

1. Complete CRT training before September 30, 2024, requirement for PHRCs, PHNMs, and HDDs or designees.

2. Review, maintain, and update the Administrative Preparedness Plan or similar document that describes fiscal and administrative authorities and practices.

Quarter 2 requirements are due no later than December 31, 2024.	Three (3)	The estimated costs for all deliverables are one quarter (1/4) of the Agreement total.	Upon submission of monthly invoices
Domain 1: Strengthen Community Resilience (Capabilities 1 and 2) 1. Engage with Emergency Management to identify partners or stakeholders who represent and assist those who may be transportation disadvantaged. Domain 3: Strengthen Information Management (Capabilities 4 and 6) 1. Develop and maintain a documented process for the cycle of maintenance and testing of primary and secondary communication platforms every six (6) months. Domain 4: Strengthen Countermeasures and Mitigation (Capabilities 8, 9, 11, and 14) 1. Conduct MCM dispensing (antivirals) or vaccination activities to improve planning, readiness, and staff training levels. 2. Establish and update PPE, MCM, and equipment inventory in EMSupply. Domain 5: Strengthen Surge Management (Capabilities 5, 7, 10, and 15) 1. Identify three (3) public health staff, emergency operations center, or emergency management staff to have access to the EMResource. One (1) of the three (3) public health staff identified will be the PHNM or HDD. Domain 6: Biosurveillance (Capabilities 12 and 13) 1. Review the Agency's WDH 24/7/365 Emergency Notification Line training webinar before November 1, 2024.			

Quarter 3 requirements are due no later than March 31, 2025.	Three (3)	The estimated costs for all deliverables are one quarter (1/4) of the Agreement total.	Upon submission of monthly invoices
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Domain 2: Strengthen Incident Management (Capability 3)

1. Maintain, review, and update the roster of key roles within the jurisdictional public health incident management structure (general and command staff roles).
2. Submit asset inventory no later than January 31, 2025. Provide updated inventory reports for single items costing five hundred dollars (\$500) or more.

Domain 3: Strengthen Information Management (Capabilities 4 and 6)

1. Document compliance with *SAFECOM Guidance on Emergency Communications Grants - Fiscal Year 2023*.
2. Develop, maintain, review, and update the Crisis and Emergency Risk Communications Plan, including Job Action Sheets for the PIO or spokesperson, message templates, and dissemination procedures considering AFN populations.

Domain 5: Strengthen Surge Management (Capabilities 5, 7, 10, and 15)

1. Develop and maintain procedures for information exchange between public health and the medical sector to include operational status, staffing levels, bed status, medical services status, and patient census using EMResource.
2. Identify a volunteer management system (VMS) and backup system.

Quarter 4 requirements are due no later than June 30, 2025	Three (3)	The estimated costs for all deliverables are one quarter (1/4) of the Agreement total.	Upon submission of monthly invoices
Domain 4: Strengthen Countermeasures and Mitigation (Capabilities 8, 9, 11, and 14) 1. Collaborate with the PHRC Responder Safety and Health workgroup, PHRCs, HPP, HCCs, and other partners to further refine Responder Safety and Health guidelines, to include lessons learned from the COVID-19 response. 2. Review, maintain, and adhere to the Respiratory Protection Program (RPP) and conduct N95 fit testing for all staff assigned an N95 respirator, initially and annually, including those assigned a Powered Air Purifying Respirator (PAPR) unless decided otherwise by the licensed medical provider who completed the medical evaluation. 3. Distribute PPE or countermeasures as required for a public health response or to meet exercise requirements. 4. Collect and provide relevant information for evaluation requirements. 5. Ensure critical workforce support is addressed within plans, including the Medical Countermeasures Plan. 6. Ensure storage and distribution centers have adequate warehousing capacity and capability for all hazard responses. Domain 5: Strengthen Surge Management (Capabilities 5, 7, 10, and 15) 1. In collaboration with community partners, maintain, develop, review, or update the Family Reunification Plan.			

2. In collaboration with community partners, address the AFN exercise improvement plan by maintaining, developing, reviewing, or updating congregate locations and POD or DVC plans with the inclusion of AFN populations.
3. Review and update shelter surveillance forms to ensure the inclusion of AFN, mental, and behavioral health survey questions.

Annual requirements due no later than June 30, 2025

It is highly recommended that these activities be completed early in the Agreement period.

1. Review and update all jurisdictional public health plans with an MCM or vaccine distribution and dispensing component using the latest PPHR guidance. The following jurisdiction plans will be reviewed and updated accordingly:
 - a) Medical Countermeasures Plan
 - i) Ensure the process to identify types and numbers of volunteers required for Point of Dispensing (POD).
 - ii) Develop, review, update, or maintain a Volunteer Management Plan or a Concept of Operations (CONOPS).
 - iii) Develop, review, maintain, or update Job Action Sheets for all public health public health incident management team positions (POD, VAC) volunteer positions based on the POD/VAC plan.
 - b) Emergency Operations Plan (public health)
 - c) Emergency Support Function #8
 - d) Pandemic Influenza Response Plan
 - e) Communications Plan
 - f) Crisis and Emergency Risk Communications Plan
 - g) Non-Pharmaceutical Interventions Plan
 - h) Continuity of Operations Plan
 - i) Security Plan (related to PODS, (LDS) and Regional Distribution Sites (RDS)
2. Update the public health COOP plan or incorporate COOP activities into other plans to support community recovery following an event or incident.
3. Conduct the following drills: Site Activation, Facility Set-Up of a Local Distribution Site (LDS), POD, or DVC site, and complete an After Action Report (AAR) and Improvement Plan.
4. Participate in no less than two (2) Essential Elements of Information (EEI) drills to ensure the ability to share and exchange information with key partners rapidly. One (1) drill before December 31, 2024 and the other before June 20, 2025.
5. Annually maintain PPHR owned PortaCount equipment by appropriately storing, transporting, and ensuring annual calibration and necessary repairs are completed by TSI Incorporated.
6. Include PIO, spokespersons, and HCCs in all situational awareness, information sharing, training, drills, and exercises.
7. Participate in performance measurement data collection activities.

8. Complete two (2) volunteer assembly drills with other drills or exercises. One (1) must be for a POD/VAC using the VMS and the other using the backup VMS.
9. Coordinate a minimum of two planning meetings, the first before December 31, 2024, and the other before June 30, 2025, with whole community partners as identified in the PHPR capabilities to include mental/behavioral health providers for sharing plans, soliciting needs, and obtaining feedback.
10. Engage with Healthcare Coalition partners and other public health partners regarding public health roles to ensure understanding and agreement of those roles during medical surge.
11. Subrecipient will respond to two (2) after-hours 24x7 number call down drills—one (1) before December 31, 2024 and the second before June 30, 2025. Contact must be made with PHRC, Public Health Nursing (PHN) staff, or other 24x7 designated point of contact within 60 minutes of initial contact.
12. Conduct three (3) immediate no-notice Staff Notification and Assembly Drills (SNA), assembling the six (6) key incident command roles within 60 minutes. The three (3) types of assembly drills that must be conducted are physical, virtual, and a combination of both physical/virtual.
13. Conduct annual access functional needs exercises with partners.
14. Post draft After Action Reports (AAR) and Improvement Plans (IP) to the CRT within 120 days after every TTX, Functional Exercise (FE), Full-Scale Exercise (FSE), incident or event involving a public health response.
15. Participate in jurisdictional Integrated Preparedness Planning Workshop (IPPW) with emergency management. If not conducted by emergency management then the Subrecipient will conduct an ESF 8 IPPW.
16. Provide additional supporting documentation upon request for verification of deliverables.
17. As requested, update PPE, Medical Countermeasure (MCM) inventory, and equipment in EMSupply.
18. Participate in virtual or onsite Subrecipient monitoring site visits—complete Subrecipient monitoring requirements by established deadlines.
 - a) Onsite: nine (9) onsite local jurisdictions are Park, Big Horn, Hot Springs, Washakie, Sheridan, Johnson, Campbell, Crook, and Weston counties. If onsite visits are not possible, jurisdictions will complete a virtual monitoring visit with the compliance coordinator.
 - b) Virtual Site Visit: fourteen (14) local jurisdictions are Albany, Carbon, Converse, Fremont, Goshen, Laramie, Lincoln, Natrona, Niobrara, Park, Platte, Sublette, Sweetwater, Teton, Uinta, and Washakie counties. The Compliance coordinator will schedule compliance visits for a virtual site visit.
19. Review operations and security needs at the following:
 - a) LDS
 - b) RDS
 - c) PODS

20. All PHRCs, PHNMs, or HDDs hired during the Agreement period will attend WARN training within thirty (30) days of hire.
21. Continue development of jurisdictional public health incident management command capability through training, drills, and exercises to better equip the team for activating, operating, and managing a public health emergency that includes pandemic influenza, anthrax response, POD or DVC operations, sheltering, and AFN/DIP/VP.
22. Track and report the number of times the public health EOC is activated a year and the number of times the county EOC is activated if public health is involved.
23. Review, update, and train the mobilization and demobilization plans focusing on vaccination clinics and MCM PODS.
24. PHRC (or local designee) will attend all Face2Face meetings as scheduled.
25. Develop and disseminate at least two (2) culturally appropriate situational awareness and education messages for each language spoken in the jurisdiction based on demographic data, one (1) by December 31, 2023.
26. Develop and disseminate at least two (2) culturally appropriate situational awareness and education messages for each language spoken in the jurisdiction based on demographic data.
27. Provide HIPAA training evidence annually to ensure access to identified emPOWER data.
28. Compose, update, and maintain all mandatory policies, including but not limited to:
 - a) nepotism policy
 - b) travel policy
 - c) discrimination policy
 - d) drug-free workplace policy
 - e) conflict of interest policy
 - f) whistleblower policy

Training requirements are due no later than June 30, 2025

It is highly recommended that these activities be completed early in the Agreement period.

1. Before registering for courses at the Emergency Management Institute (EMI) (Emmitsburg), Center for Domestic Preparedness (CDP) (Anniston), approval must be obtained through the PHPR Training Coordinator.
2. Attend the E/L0103 Planning: Emergency Operations course.
3. Participate in emPOWER training when offered.
4. Ensure all Public Health PIOs or spokespersons complete recurring public information training not to exceed every five (5) years.
5. Complete training for the development and management of volunteers.
6. Complete HHS and ASPR Access and Functional Needs Web-Based Training.
7. Attend PHPR planning, training, awareness calls, and webinars.
8. Complete required training as identified throughout the budget period.
9. Address and track areas identified for improvement.

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SHERIDAN COUNTY

Unique Entity ID H2JQJKZU65E8	CAGE / NCAGE 5H0N4	Purpose of Registration Federal Assistance Awards Only
Registration Status Active Registration	Expiration Date Jan 21, 2025	
Physical Address 224 S Main ST STE B3 Sheridan, Wyoming 82801-4833 United States	Mailing Address 224 S Main ST STE B3 Sheridan, Wyoming 82801-4833 United States	

Business Information

Doing Business as (blank)	Division Name (blank)	Division Number (blank)
Congressional District Wyoming 00	State / Country of Incorporation (blank) / (blank)	URL (blank)

Registration Dates

Activation Date Jan 25, 2024	Submission Date Jan 22, 2024	Initial Registration Date May 26, 2009
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Entity Dates

Entity Start Date Jan 1, 1904	Fiscal Year End Close Date Jun 30
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Immediate Owner

CAGE (blank)	Legal Business Name (blank)
------------------------	---------------------------------------

Highest Level Owner

CAGE (blank)	Legal Business Name (blank)
------------------------	---------------------------------------

Executive Compensation

Registrants in the System for Award Management (SAM) respond to the Executive Compensation questions in accordance with Section 6202 of P.L. 110-252, amending the Federal Funding Accountability and Transparency Act (P.L. 109-282). This information is not displayed in SAM. It is sent to USAspending.gov for display in association with an eligible award. Maintaining an active registration in SAM demonstrates the registrant responded to the questions.

Proceedings Questions

Registrants in the System for Award Management (SAM.gov) respond to proceedings questions in accordance with FAR 52.209-7, FAR 52.209-9; or 2. C.F.R. 200 Appendix XII. Their responses are displayed in the responsibility/qualification section of SAM.gov. Maintaining an active registration in SAM.gov demonstrates the registrant responded to the proceedings questions.

Exclusion Summary

Active Exclusions Records?

No

SAM Search/Authorization

I authorize my entity's non-sensitive information to be displayed in SAM public search results:

Yes

Entity Types

Business Types

Entity Structure U.S. Government Entity	Entity Type US Local Government	Organization Factors (blank)
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Socio-Economic Types

Check the registrant's Reps & Certs, if present, under FAR 52.212-3 or FAR 52.219-1 to determine if the entity is an SBA-certified HUBZone small business concern. Additional small business information may be found in the SBA's Dynamic Small Business Search if the entity completed the SBA supplemental pages during registration.

Government Types

U.S. Local Government

County

Financial Information

Accepts Credit Card Payments
Yes

Debt Subject To Offset
No

EFT Indicator
0000

CAGE Code
5H0N4

Points of Contact

Electronic Business

2
CAMERON DUFF, Administrative Director

224 S Main Street
STE B-1
Sheridan, Wyoming 82801
United States

Skye Evers

224 S. Main
Sheridan, Wyoming 82801
United States

Government Business

2
CAMERON DUFF, Administrative Director

224 S Main Street
STE B-1
Sheridan, Wyoming 82801
United States

Skye Evers

224 S Main
Sheridan, Wyoming 82801
United States

Service Classifications

NAICS Codes

Primary

NAICS Codes

NAICS Title

Disaster Response

This entity does not appear in the disaster response registry.

LOCAL GOVERNMENT LIABILITY POOL

6844 Yellowtail Rd. Cheyenne, WY 82009
Cheyenne area: 307-638-1911 Fax: 307-638-6211
Website: lglpwyoming.org E-mail: lglp@lglp.net

MEMORANDUM OF LIABILITY COVERAGE

DECLARATION PAGE

MEMBER AGENCY: Sheridan County

ADDRESS: 224 S. Main Street, Ste. B-1
Sheridan, WY 82401

MEMBER DEDUCTIBLE: \$5,000 per occurrence

COVERAGE LIMIT: For covered claims under the Wyoming Governmental Claims Act:

- \$250,000 - per claimant per occurrence and
\$500,000 - per occurrence for all claimants, except
- For claims under W.S. 1-39-110(b), \$1,000,000 –
per occurrence for all claimants as limited by W.S.
1-42-202(b)(iv)

For covered claims under federal law & for out-of-state claims:

- \$1,500,000 - per occurrence for all claimants

Maximum annual aggregate for all claims

- \$5,000,000 – annual aggregate

COVERAGE PERIOD: July 1, 2023-June 30, 2024

Contract #: 238815

Entry Date: 3/29/2024 1:41:50 PM

Department: Wyoming Department of Health, Public Health Division

**WYOMING ATTORNEY
GENERAL'S OFFICE**

Agency Contact: Krause, Derrick

APR 26 2024

Phone: 307-777-8624

Megan Pope

Other Agency Contact: Sheryl Roub

APPROVED AS TO FORM

600 series

Client Comments: This is from template 237254. 15 of 23.

Contractor/Vendor Name: Sheridan County

Contract Title: Sheridan County BASE

Contract Type: General Services - Federal Funds

Contract Amount: 93000.0000

Contract Effective Date:

Contract Expiration Date: 6/30/2025 12:00:00 AM

Status: AG Approved as to Form

RETURN VIA: Ink Signature - Pick-up

Assigned Attorney: Megan Pope



Public Health Preparedness and Response
Public Health Division
122 West 25th Street, Suite E102
Cheyenne, WY 82002
(307) 777-8624
866-571-0944 • www.health.wyo.gov



Stefan Johansson
Director

Mark Gordon
Governor

DIRECTOR GRANT AGREEMENT MEMORANDUM

Date: March 31, 2024

To: Stefan Johansson, Director
Wyoming Department of Health

From: Sheryl Roub, CPM, MCSE, CPIM, Manager
Public Health Preparedness and Response Unit

Subject: Grant Award Agreement

Funding Sources (Phases): PHEPBASE; County Total \$2,279,000.00; CRI; \$210,000.00
Tribal Nations Total \$160,000.00

Ref: SR-2024-005

Priority: Normal.

Purpose: The Department of Health, Public Health Division, Public Health Preparedness and Response (PHPR) Unit is requesting to enter into grant agreements with tribal and local public health departments to provide funding for public health preparedness activities for all 23 counties and two tribal nations.

Justification: PHPR provides federal funding to county and tribal public health departments to support the local implementation of the Centers for Disease Control and Prevention (CDC) Public Health Emergency Preparedness and Response Capabilities in October 2018.

Attachment A, Public Health Preparedness and Response Statement of Work, details the deliverables that counties and tribal nations must accomplish and address to receive federal funding. The counties and tribal nations primarily utilize the funding for salary, travel, supplies, training, and exercises. Each contract is the same except Natrona and Laramie County contracts, which have additional requirements because they are designated as Cities Readiness Initiative locations by the CDC.

If these Agreements are not approved, the counties and tribal nations will not be able to continue funding the public health response coordinator position, have funding for public health exercises

and training, and be prepared to address public health emergencies. Without this funding, continued public health emergency preparedness activities would be severely limited. County and tribal public health capacity to accomplish the CDC capabilities is a requirement for continued funding. Without the funding to county and tribal public health, they could not maintain or meet the CDC requirements. CDC would likely decrease funding for the state.

Exceptions: Changed Contract Term to Performance Period.

Attachments: Contract
Attachment A
WDH-45
CDC Public Health Emergency Preparedness and Response Capabilities
SAFECOM Guidance on Emergency Communications Grants- Fiscal Year 2023

c: Dirk Dijkstal, JD, Chief, Health Readiness and Response Section
Stephanie Pyle, MBA, Senior Administrator, Public Health Division

Wyoming Department of Health Fiscal Services
Contract (600 Series) Required Submission Form

FOR CONTRACT WITH: Wyoming Counties & Tribes

Attach in this order: (1) Director's Memo (2) Fiscal Documents (3) Original Contract
 (3) All Attachments (4) Grant Application (if applicable)

Division:	PHD	Program:	PHEP	Fiscal manager & Phone #	Ramage	Fiscal Approval. Mgr
Grant(s):	Yes <u>X</u> No <u> </u>	Grant Period(s):		Contract Term:		Date:
Current BFY	Source of Funds	Phase	Current Budget	Encumbrances + Expenditures to Date	Funding Contract for	Unobligated Funds
25	FF	PHEP	\$ 5,000,000.00	\$ -	\$ 2,489,000.00	\$2,511,000.00
						\$ -
						\$ -
						\$ -
Totals			\$ 5,000,000.00	\$ -	\$ 2,489,000.00	\$2,511,000.00

Attached is the following type of 600 Series Contract:

- ☐ Local Government
☐ Federal Government
☐ Private Institutions and Organizations
☐ Grant Award Agreement/Grant
☐ ARRA/ACA Funding
☐ Other _____

***ALL FEDERALLY FUNDED CONTRACTS MUST CONTAIN REQUIRED
 FEDERAL PROVISIONS***

Attachment A-1 Revised Public Health Preparedness and Response Statement of Work

General Description

The parties to the Agreement are the Wyoming Department of Health (WDH), Public Health Division (PHD) (Agency) and Sheridan County (Subrecipient). This Statement of Work (SOW) pertains to and is managed by the Public Health Preparedness and Response Unit (PHPR). This document is an SOW to identify and describe deliverables and payment structures for developing public health emergency preparedness and response capability in the jurisdiction by implementing the Centers for Disease Control and Prevention Public Health Preparedness Capabilities. Deliverables have been developed from the Centers for Disease Control and Prevention (CDC) *Public Health Emergency Preparedness and Response Capabilities – October 2018* document that is incorporated into the Agreement by this reference.

The requirements articulated in this SOW represent known preparedness requirements articulated by CDC and PHPR. The Agency retains the right to change the deliverables as outlined below upon execution of an Agreement amendment under Section 8.A of the Agreement, based on any additional requirements or information from the CDC. Other requirements or changes will be articulated to the Subrecipient as soon as PHPR receives this information. Failure to meet these requirements and show progress in all requirements may affect future funding for the Agency and, in turn, preparedness and response funding for the Subrecipient. Deliverables must be completed by the due date; payments will only be made once all deliverables for the prior quarter are met. PHPR staff is available to facilitate planning activities and provide technical assistance.

The Subrecipient's Public Health Response Coordinator (PHRC) is typically responsible for addressing the below deliverables. However, the Subrecipient is accountable for meeting these requirements whether or not the Subrecipient has identified a PHRC.

Payment

- A. The source of funds for this Agreement is via a Cooperative Agreement from the Centers for Disease Control and Prevention (CDC) Assistance Listing Number (ALN) No. 93.069, in the amount of ninety-three thousand dollars (\$93,000.00).
- B. The Agency agrees to pay the Subrecipient for the services described in this SOW. For the Period of Performance, total payment under this Agreement shall not exceed ninety-three thousand dollars (\$93,000.00) for funding public health preparedness activities.
- C. Subrecipient must match ten percent (10%) of total federal funding awarded to the Subrecipient. Match may be provided directly or through donations from public or private entities and may be in cash or in kind, fairly evaluated, including equipment or services. Amounts provided by the federal government or services assisted or subsidized to any significant extent by the federal government may not be included in determining the amount of such non-federal contributions.
- D. Restrictions on funding are:

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- a) Subrecipient may not use funds for research.
- b) Subrecipient may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- c) Generally, Subrecipient may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- d) Reimbursement of pre-award costs generally is not allowed, unless the CDC provides written approval to the recipient.

E. General restrictions:

- a) Subrecipient may supplement but not supplant existing state or federal funds for activities described in the budget.
- b) Payment or reimbursement of backfilling costs for staff is not allowed.
- c) None of the funds awarded to these programs may be used to pay the salary of an individual at a rate in excess of Executive Level II or \$189,600 per year.
- d) Funds may not be used to purchase or support (feed) animals for labs, including mice.
- e) Funds may not be used to purchase a house or other living quarters for those under quarantine. Rental may be allowed with approval from the CDC Office of Grants Services (OGS).
- f) Subrecipient may (with prior approval) use funds for overtime for individuals directly associated (listed in personnel costs) with the award with prior approval from CDC OGS.

F. Lobbying

- a) Other than for normal and recognized executive-legislative relationships, Public Health Emergency Preparedness (PHEP) funds may not be used for:
 - i. Publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body.
 - ii. The salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.
 - iii. See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC Subrecipient (http://www.cdc.gov/grants/documents/Anti-Lobbying_Restrictions_for_CDC_Grantees_July_2012.pdf).

G. Construction and Major Renovations

- a) Subrecipient may not use funds for construction or major renovations. Generally, Subrecipient may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly justified in the budget.

H. Passenger Road Vehicles

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- a) Funds cannot be used to purchase over-the road passenger vehicles.
- b) Funds cannot be used to purchase vehicles to be used as means of transportation for carrying people or goods, such as passenger cars or trucks and electrical or gas-driven motorized carts.
- c) Subrecipient can (with prior approval) use funds to lease vehicles to be used as means of transportation for carrying people or goods, e.g., passenger cars or trucks and electrical or gas-driven motorized carts during times of need.
- d) Additionally, PHEP grant funds can (with prior approval) be used to make transportation agreements with commercial carriers for the movement of materials, supplies, and equipment. There should be a written process for initiating transportation agreements (e.g., contracts, memoranda of understanding, formal written agreements, and/or other letters of agreement). Transportation agreements should include, at a minimum:
 - i. Type of vendor
 - ii. Number and type of vehicles, including vehicle load capacity and configuration
 - iii. Number and type of drivers, including certification of drivers
 - iv. Number and type of support personnel
 - v. Vendor's response time
 - vi. Vendor's ability to maintain cold chain, if necessary, to the incident
 - vii. This relationship may be demonstrated by a signed transportation agreement or documentation of a transportation planning meeting with the designated vendor. All documentation should be available to the CDC project officer for review if requested.

I. Transportation of Medical Materiel

- a) Funds can (with prior approval) be used to procure leased or rental vehicles for the movement of materials, supplies, and equipment.
- b) Subrecipient can (with prior approval) use funds to purchase material-handling equipment (MHE) such as industrial or warehouse-use trucks to move materials, such as forklifts, lift trucks, turret trucks, etc. Vehicles must be of a type not licensed to travel on public roads.
- c) Subrecipient may purchase basic (non-motorized) trailers with prior approval from the CDC.

J. Procurement of Food and Clothing

- a) Funds may not be used to purchase clothing such as jeans, cargo pants, polo shirts, jumpsuits, sweatshirts, coats, or T-shirts. Purchase of vests to be worn during exercises or responses may be allowed.
- b) Funds may not be used to purchase food.

K. Vaccines and Antibiotics

- a) Subrecipient may, with prior CDC approval, use funds to purchase caches of antibiotics for use by public health responders and their households to ensure the

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health and safety of the public health workforce during an emergency response, or an exercise to test response plans. Funds may not be used to supplant other funding intended to achieve this objective.

- b) Subrecipient may, with prior CDC approval, use funds to purchase caches of vaccines for public health responders and their households to ensure the health and safety of the public health workforce.
- c) Subrecipient may, with prior CDC approval, use funds to purchase caches of vaccines or ancillary supplies for select critical workforce groups to ensure their health and safety during an exercise to validate response plans.
- d) Subrecipient must document in their submitted exercise plans the use of vaccines for select critical workforce personnel before CDC will approve the vaccine purchase.
- e) Subrecipient may not use PHEP funds to supplant other funding intended to achieve these objectives. Subrecipient of PHEP-funded vaccines (within the context of the exercise) may include:
 - i. Persons who meet the criteria in the CDC-Advisory Committee on Immunization Practices (CDC/ACIP) recommendations www.cdc.gov/vaccines/acip/index.html for who should receive vaccine;
 - ii. Persons who are not eligible to receive the vaccine through other entitlement programs such as Medicare, Medicaid, or the Vaccines for Children (VFC) program.
 - 1. VFC-eligible children or Medicare beneficiaries may participate in the exercise; however, they should be vaccinated with vaccine purchased from the appropriate funding source.
- f) PHEP funds may not be used to purchase vaccines for seasonal influenza mass vaccination clinics or other routine vaccinations covered by ACIP schedules. PHEP funds may not be used to purchase influenza vaccines for the general public.

Subrecipient may not use funds for clinical care except as allowed by law. For the purposes of this Notice of Funding Opportunity (NOFO), clinical care is defined as "directly managing the medical care and treatment of individual patients." PHEP-funded staff may administer Medical Countermeasures (MCM) such as antibiotics or vaccines as a public health intervention in the context of an emergency response or an exercise to test response plans. CDC does not consider this clinical care since it is not specific to one.

L. Laboratory Supplies

- a) Instruments, reagents and supplies for the following are not generally purchased with PHEP funding:
 - i. Instruments, reagents and supplies for testing seasonal influenza;
 - ii. Instruments, reagents and supplies for testing rabies;
 - 1. Instruments, reagents and supplies for routine food testing (surveillance);
 - iii. Instruments, reagents, and supplies for testing vaccine-preventable diseases (e.g., measles, mumps, etc.)
 - iv. Instruments, reagents, and supplies for routine testing of vector-borne illnesses (both clinical and vector surveillance);

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- v. Routine drug screening of laboratory staff; and
- vi. Influenza vaccines (for the general public).

Because Subrecipient receives substantial assistance from CDC through other programs, the Subrecipient should ensure these line items are funded under the appropriate program.

- M.** All expenditures must support and relate to this SOW.
- N.** Subrecipient cannot use funds for bonuses or incentives.
- O.** Subrecipient shall provide a full-time PHRC with 100% time and effort allowable, reasonable, and allocable to the PHEP Cooperative Agreement.
- P.** PHRC will be reimbursed at the rate approved by the PHPR Manager in the Subrecipient's budget for 2024 – 2025.
- Q.** During a federal or state-declared emergency, Subrecipient will distribute Personal Protective Equipment (PPE), dispensing medical countermeasures, or vaccines in a manner that will be determined by the Agency at delivery time.

Timeline and Deliverables

The following table shows specific tasks, milestones, completion dates, and estimated payments. The Deliverables Guidance Matrix for July 1, 2024, through June 30, 2025, will be distributed to the Subrecipient before July 1, 2024. All required deliverable documentation must be submitted to the PHPR established folders on the Contract Reporting Tool (CRT), including invoices for reimbursement, Public Health Nursing Informatics (PHNI) report, and quarterly match summary. Agency will provide a naming convention for posting required documentation to receive credit for the deliverables.

Recurring deliverables to be completed once in Quarter 1 and Quarter 2:

Domain 1: Strengthen Community Resilience (Capabilities 1 and 2)

1. Support assessment of at-risk populations, including validating data, surveying the jurisdiction community, or fully participating in a state-led at-risk workgroup.
2. Include those with Access and Functional Needs (AFN) and groups who work on their behalf, including the Healthcare Coalition (HCC), in preparedness planning, training, exercises, and responses to public health emergencies.
3. Collaborate with local partners and stakeholders, including those representing AFN populations, to identify how communications will be conducted before, during, and following an incident or event.

Domain 2: Strengthen Incident Management (Capability 3)

1. New PHRCs, Public Health Nurse Managers (PHNM), and Health Department Directors (HDD) will attend CRT and fiscal training within thirty (30) days of hire.

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2. Submit the quarterly match summary by completing the match spreadsheet on the CRT. Submit supporting documentation from the PHNI system if PHPR time is tracked or another method if the Subrecipient does not use PHNI to track PHPR support and upload to CRT. Due dates are Q1 due October 31, 2024; Q2 due January 31, 2025; Q3 due April 30, 2025; and Q4 due July 31, 2025.
3. Subrecipient shall submit invoices and supporting fiscal documentation by the end of the month following expenses incurred in sufficient detail to ensure that payments may be made in conformance with this Agreement. If the jurisdiction does not comply with the required deliverables, invoices may not be paid until deliverables are complete.
4. Attend monthly joint PHRC and PHPR calls. If the PHRC cannot attend, another jurisdiction member must attend or review the recording within five days.
5. PHNMs and HDDs or designees are to meet with PHRC quarterly to review progress, review deliverables, and complete the progress report. Submit a progress report to the CRT after PHNM or HDD review and approval.
6. Archive all plans and critical documentation for the CRT in a folder established by PHPR for the continuity of operations.
7. Upload quarterly drill data collection sheets to the CRT.

Domain 3: Strengthen Information Management (Capabilities 4 and 6)

1. Review, update, and validate all alerting and notification groups and members, including public health staff in the incident command system and MCM partners each quarter.
2. Review, update, and maintain lists of local physicians, hospital personnel, nurses, and other partners in collaboration with PHPR for inclusion in Wyoming Alert and Response Network (WARN) public health alerts.
3. Review and update public health after-hours contact information quarterly.
4. Respond monthly to statewide (WyoLink) radio drills.
5. Update the list of current spokespersons, local media contacts, and public information officers quarterly or as it changes.

Domain 4: Strengthen Countermeasures and Mitigation (Capabilities 8, 9, 11, and 14)

1. Manage and maintain a stockpile of PPE and respirators for their respective jurisdiction that meets or exceeds the current Public Health Nursing (PHN) Personal Protective Equipment (PPE) Guide or stocking levels identified during the COVID-19 response.

Description	Months	Cost	Date
Quarter 1 requirements are due no later than September 30, 2024.	Three (3)	The estimated costs for all deliverables are one quarter (1/4) of the Agreement total.	Upon submission of monthly invoices

Domain 1: Strengthen Community Resilience (Capabilities 1 and 2)

1. Utilize the Threat and Hazard Identification and Risk Assessment (THIRA) identified gaps in all hazard planning.

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2. Review, maintain, and update current demographic data and post a list of languages spoken in the Subrecipient jurisdiction on the CRT.

Domain 2: Strengthen Incident Management (Capability 3)

1. Complete CRT training before September 30, 2024, as a requirement for PHRCs, PHNMs, and HDDs or designees.
2. Review, maintain, and update the Administrative Preparedness Plan or similar document that describes fiscal and administrative authorities and practices.

Quarter 2 requirements are due no later than December 31, 2024.	Three (3)	The estimated costs for all deliverables are one quarter (1/4) of the Agreement total.	Upon submission of monthly invoices
Domain 1: Strengthen Community Resilience (Capabilities 1 and 2) 1. Engage with Emergency Management to identify partners or stakeholders who represent and assist those who may be transportation disadvantaged.			
Domain 3: Strengthen Information Management (Capabilities 4 and 6) 1. Develop and maintain a documented process for the cycle of maintenance and testing of primary and secondary communication platforms every six (6) months.			
Domain 4: Strengthen Countermeasures and Mitigation (Capabilities 8, 9, 11, and 14) 1. Conduct MCM dispensing (antivirals) or vaccination activities to improve planning, readiness, and staff training levels. 2. Establish and update PPE, MCM, and equipment inventory in EMSupply.			
Domain 5: Strengthen Surge Management (Capabilities 5, 7, 10, and 15) 1. Identify three (3) public health staff, emergency operations center, or emergency management staff to have access to the EMResource. One (1) of the three (3) public health staff identified will be the PHNM or HDD.			
Domain 6: Biosurveillance (Capabilities 12 and 13) 1. Review the Agency's WDH 24/7/365 Emergency Notification Line training webinar before November 1, 2024.			

Annual requirements due no later than June 30, 2025

It is highly recommended that these activities be completed early in the Agreement period.

1. Review and update all jurisdictional public health plans with an MCM or vaccine distribution and dispensing component using the latest PHPR guidance. The following jurisdiction plans will be reviewed and updated accordingly:
 - a) Medical Countermeasures Plan
 - i. Ensure the process of identifying types and numbers of volunteers required for Point of Dispensing (POD).

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- ii. Develop, review, update, or maintain a Volunteer Management Plan or a Concept of Operations (CONOPS).
 - iii. Develop, review, maintain, or update Job Action Sheets for all public health public health incident management team positions (POD, VAC) volunteer positions based on the POD VAC plan.
 - b) Emergency Operations Plan (public health)
 - c) Emergency Support Function (ESF) #8
 - d) Pandemic Influenza Response Plan
 - e) Communications Plan
 - f) Crisis and Emergency Risk Communications Plan
 - g) Non-Pharmaceutical Interventions Plan
 - h) Continuity of Operations Plan
 - i) Security Plan (related to PODS, Local Distribution Site (LDS) and Regional Distribution Sites (RDS))
2. Update the public health Continuity of Operations Plan (COOP) plan or incorporate COOP activities into other plans to support community recovery following an event or incident.
 3. Conduct the following drills: Site Activation, Facility Set-Up of a Local Distribution Site (LDS), POD, or Dispensing Vaccination Clinic (DVC) site, and complete an After Action Report (AAR) and Improvement Plan.
 4. Participate in no less than two (2) Essential Elements of Information (EEI) drills to ensure the ability to share and exchange information with key partners rapidly. One (1) drill before December 31, 2024, and the other before June 20, 2025.
 5. Annually maintain PHPR-owned PortaCount equipment by appropriately storing, transporting, and ensuring that TSI Incorporated completes annual calibration and necessary repairs.
 6. Include Public Information Officers (PIO), spokespersons, and HCCs in all situational awareness, information sharing, training, drills, and exercises.
 7. Participate in performance measurement data collection activities.
 8. Complete two (2) volunteer assembly drills with other drills or exercises. One (1) must be for a POD/VAC using the VMS and the other using the backup VMS.
 9. Coordinate a minimum of two planning meetings, the first before December 31, 2024, and the other before June 30, 2025, with whole community partners as identified in the PHPR capabilities to include mental/behavioral health providers for sharing plans, soliciting needs, and obtaining feedback.
 10. Engage with HCC partners and other public health partners regarding public health roles to ensure understanding and agreement of those roles during medical surge.
 11. Subrecipient will respond to two (2) after-hours 24x7 number call-down drills—one (1) before December 31, 2024, and the second before June 30, 2025. Contact must be made with PHRC, PHN staff, or other 24x7 designated point of contact within 60 minutes of initial contact.
 12. Conduct three (3) immediate no-notice Staff Notification and Assembly Drills (SNA), assembling the six (6) key incident command roles within 60 minutes. The three (3)

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- types of assembly drills that must be conducted are physical, virtual, and a combination of both physical and virtual.
13. Conduct annual access functional needs exercises with partners.
 14. Post-draft AAR and Improvement Plans (IP) to the CRT within 120 days after every Table Top Exercise (TTX), Functional Exercise (FE), Full-Scale Exercise (FSE), incident, or event involving a public health response.
 15. Participate in jurisdictional Integrated Preparedness Planning Workshop (IPPW) with emergency management. If not conducted by emergency management, then the Subrecipient will conduct an ESF 8 IPPW.
 16. Provide additional supporting documentation upon request for verification of deliverables.
 17. As requested, update PPE, MCM inventory, and equipment in EMSupply.
 18. Participate in virtual or onsite Subrecipient monitoring site visits—complete Subrecipient monitoring requirements by established deadlines.
 - a) Onsite: nine (9) onsite local jurisdictions are Park, Big Horn, Hot Springs, Washakie, Sheridan, Johnson, Campbell, Crook, and Weston counties. If onsite visits are not possible, jurisdictions will complete a virtual monitoring visit with the compliance coordinator.
 - b) Virtual Site Visit: fourteen (14) local jurisdictions are Albany, Carbon, Converse, Fremont, Goshen, Laramie, Lincoln, Natrona, Niobrara, Park, Platte, Sublette, Sweetwater, Teton, Uinta, and Washakie counties. The Compliance Coordinator will schedule compliance visits for a virtual site visit.
 19. Review operations and security needs at the following:
 - a) Local Distribution Site (LDS)
 - b) Regional Distribution Site (RDS)
 - c) PODS
 20. All PHRCs, PHNMs, or HDDs hired during the Agreement period will attend WARN training within thirty (30) days of hire.
 21. Continue development of jurisdictional public health incident management command capability through training, drills, and exercises to better equip the team for activating, operating, and managing a public health emergency that includes pandemic influenza, anthrax response, POD, DVC, operations, sheltering, and AFN Populations.
 22. Track and report the number of times the public health Emergency Operations Center (EOC) is activated a year and the number of times the county EOC is activated if public health is involved.
 23. Review, update, and train the mobilization and demobilization plans focusing on vaccination clinics and MCM PODS.
 24. PHRC (or local designee) will attend all Face2Face meetings as scheduled.
 25. Develop and disseminate at least two (2) culturally appropriate situational awareness and education messages for each language spoken in the jurisdiction based on demographic data, one (1) by December 31, 2025.

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26. Develop and disseminate at least two (2) culturally appropriate situational awareness and education messages for each language spoken in the jurisdiction based on demographic data.
27. Provide Health Insurance Portability and Accountability Act (HIPAA) training evidence annually to ensure access to identified emPOWER data.
28. Submit the following mandatory policies (county policies acceptable), including but not limited to:
 - a) nepotism policy
 - b) travel policy
 - c) discrimination policy
 - d) drug-free workplace policy
 - e) conflict of interest policy
 - f) whistleblower policy

Cities Readiness Initiative (CRI) requirements are due no later than June 30, 2025

1. Adhere to CRI-specific requirements provided by PPHR.
2. Conduct a Dispensing Throughput Drill (DTD). This drill requirement can be met with a dispensing FSE, an incident, or an event that dispensed MCMs.
3. Submit all required CRI forms and supporting documentation.

Description	Months	Cost	Date
Quarter 3 requirements are due no later than March 31, 2025.	Three (3)	The estimated costs for all deliverables are one quarter (1/4) of the Agreement total.	Upon submission of monthly invoices

All Hazards Approach (Response Readiness Framework (RRF) Prioritize a risk-based approach)

1. The Subrecipient will participate in the HCC Hazard Vulnerability Assessment (HVA)
2. The Subrecipient will utilize the THIRA to identify gaps in all hazard planning, training, and exercises.
3. The Subrecipient will update Improvement Plans throughout the budget period.
4. The Subrecipient will review, update, and submit approved copies of the following plans using the current PPHR guidance:
 - a) Emergency Operations Plan (EOP)
 - b) Communications
 - c) ESF #8
 - d) Continuity of Operations Plan (COOP)
 - e) Volunteer Management Plan
5. The Subrecipient will participate in monthly statewide (WyoLink) radio drills.

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6. The Subrecipient will document compliance with SAFECOM Guidance and ensure that the documentation complies with SAFECOM's seven priorities and three goals.
7. The Subrecipient will manage and maintain a stockpile of PPE and respirators for their respective jurisdiction that meets or exceeds the current Public Health Nursing Personal Protective Equipment Guide or stocking levels identified during the COVID-19 response.
8. Provide evidence (via AARs, plans, etc.) showing capacity and capability to distribute materials, including PPE and MCM for a public health response.
9. The Subrecipient will ensure storage and distribution centers follow SNS Version 11 or current guidelines and warehouse best practices.
10. The Subrecipient will conduct dispensing or vaccination activities to improve planning, readiness, and staffing levels.
11. The Subrecipient will sustain the respiratory protection program and conduct fit testing for all staff members who are required to wear respirators during the course of their duties.
12. The Subrecipient will track and report the number of times the public health EOC is activated a year and the number of times the county EOC is activated if public health is involved.
13. The Subrecipient will post the draft AAR and Improvement Plans (IP) to the CRT within 90 days after every TTX, FE, FSE, incident, or event involving a public health response.
 - a) Responses to public health incidents may be submitted for consideration to meet exercise requirements; PHPR will consider these requests on a case-by-case basis.
14. The Subrecipient will update all Budget Period 1 (BP1) Improvement Plans in the Improvement Plan Tracking Sheet.
15. The Subrecipient will conduct and participate in all drills and exercises required by the Exercise Framework.

Partnerships (RRF Enhance partnerships)

1. The Subrecipient will attend PHPR planning, training, awareness calls, and webinars.
2. The Subrecipient will engage with Healthcare Coalition partners and other public health partners regarding public health roles to ensure understanding and agreement of those roles during a medical surge.
3. The Subrecipient will include AFN partners, including the Healthcare Coalition (HCC), in public health preparedness planning, training, exercises, and responses.
4. The Subrecipient will begin developing a health and medical planning partners meeting that will be conducted at least once per quarter.

Local Support (RRF Expand local support)

1. The Subrecipient will attend monthly joint PHRC, PHPR, and partner calls. If the PHRC cannot attend, another jurisdiction member must attend or review the recording within five days.
2. The Subrecipient will participate in the Local Emergency Planning Committees (LEPC) meetings.

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3. The Subrecipient will coordinate the annual calibration and maintenance of PortaCount equipment.
4. The Subrecipient will review and upload Roemer warranty and certification documentation. If it is close to expiry, work with PPHP staff to schedule warranty work.

Administrative and Budget Preparedness (RRF Improve administrative and budget preparedness systems)

1. The Subrecipient will submit the quarterly match summary by completing the match spreadsheet on the CRT. The Subrecipient will submit supporting documentation from the PHNI system if PPHP time is tracked or another method if the Subrecipient does not use PHNI to track PPHP support and upload to CRT. Due dates are Q3, due April 30, 2025, and Q4, due July 31, 2025.
2. The Subrecipient will submit invoices and supporting fiscal documentation by the end of the month following expenses incurred in sufficient detail to ensure that payments may be made in conformance with this Agreement. If the jurisdiction does not comply with the required deliverables, invoices may not be paid until deliverables are complete.
3. The Subrecipient will submit asset inventory no later than January 31, 2025, and provide updated inventory reports for single items costing five hundred dollars (\$500) or more.
4. The Subrecipient will submit a quarterly progress report completed by both the PHRC and their manager.
5. The Subrecipient will provide additional supporting documentation upon request for verification of deliverables.

Workforce (RRF Build workforce capacity)

1. New PHRCs, PHNMs, and HDDs will attend CRT and fiscal training within thirty (30) days of hire.
2. The Subrecipient will maintain a ready responder workforce across the entire health department.
 - a) The Subrecipient will continue the development of jurisdictional public health incident management command capability through training, drills, and exercises to better equip the team for activating, operating, and managing a public health emergency that includes pandemic influenza, anthrax response, POD, DVC, operations, and sheltering.
 - b) The Subrecipient will designate key response roles or their equivalent in response plans. At a minimum, include:
 - i. Incident Commander
 - ii. Administration and Finance Coordinator
 - iii. Logistics Coordinator
 - iv. Operations Coordinator
 - v. Planning Coordinator
 - vi. Public Information Officer
 - vii. Safety Officer
 - viii. Data Liaison

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- c) The Subrecipient will designate responsibility within the incident command structure to address plans for responders and the public, given the scope of the response, that considers these functions:
 - i. Health equity
 - ii. Responder and workforce safety
 - d) Responder mental and behavioral health
- 3. The Subrecipient will participate in essential preparedness meetings or training sessions in person or virtually when available.
- 4. The Subrecipient must participate in annual training, drills, and exercises to bolster their response and resilience competencies and demonstrate operational readiness.

Data Modernization (RRF Modernize data collection and systems)

- 1. The Subrecipient will participate in performance measurement data collection activities upon request.
- 2. The Subrecipient will verify active access to EMResource for the PHRC and other jurisdictional designees for information exchange between public health and the medical sector, including operational status, staffing levels, bed status, medical services status, and patient census.
- 3. The Subrecipient will update quarterly data collection sheets in the CRT.

Risk Communications (RRF Strengthen risk communications activities)

- 1. The Subrecipient will collaborate with partners that represent populations with access and functional needs to develop culturally, linguistically, and accessible appropriate risk messages for AFN populations.
- 2. The Subrecipient will review and update public health after-hours contact information.
- 3. The Subrecipient will review, update, and validate all WARN alerting and notification groups and members, including:
 - a) Public health staff in the incident command system
 - b) Partners
 - c) Nurses
 - d) Other planning and response partners
- 4. The Subrecipient will update the list of current spokespersons, local media contacts, and public information officers quarterly or as it changes.
- 5. The Subrecipient will include PIO and HCCs in all situational awareness, information sharing, training, and exercises.
- 6. The Subrecipient will use daily activities, scheduled events, exercises, or incident responses to validate Crisis and Emergency Risk Communication (CERC) plans and principles. These activities may simulate actions that would be taken during an emergency to ensure risk communication proficiency.

Health Equity (RRF Incorporate health equity practices)

- 1. In collaboration with community partners, the Subrecipient will address the 2023-2024 BP5 AFN exercise action items.
- 2. The Subrecipient will continue planning, training, exercising, and other collaboration efforts to establish the necessary infrastructure so that disproportionately affected

Attachment A-1 Revised Public Health Preparedness and Response Statement of Work

populations with AFN within the jurisdiction are prepared to appropriately respond to threats with public health consequences.

3. The Subrecipient will work with local partners, emergency management, and stakeholders, including those representing AFN populations, to plan communications strategies and identify, coordinate, and establish transportation networks for people in need before, during, and after an incident or event.
4. The Subrecipient will support AFN populations in preparing for, responding to, and recovering from public health emergencies.

Recovery (RRF Prioritize community recovery efforts)

1. The Subrecipient will identify community partners who aid in recovery.
2. The Subrecipient will develop a reference list of community partners and their potential roles and resources and post it to the CRT.

Description	Months	Cost	Date
Quarter 4 requirements are due no later than June 30, 2025	Three (3)	The estimated costs for all deliverables are one quarter (1/4) of the Agreement total.	Upon submission of monthly invoices

All Hazards Approach (RRF Prioritize a risk-based approach)

1. The Subrecipient will maintain, review, and update the roster of key roles within the jurisdictional public health incident management structure (general and command staff roles).
2. The Subrecipient will utilize the THIRA to identify gaps in all hazard planning, training, and exercises.
3. The Subrecipient will review, update, and submit approved copies of the following plans using current PHPR guidance:
 - a) Medical Countermeasures (MCM)
 - b) Nonpharmaceutical Interventions (NPI)
 - c) POD Security
 - d) Crisis and Emergency Risk Communications (CERC)
 - e) Pandemic Influenza
4. The Subrecipient will respond monthly to statewide WyoLink radio drills.
5. The Subrecipient will update PPE and equipment inventory in the PHPR-required software suite.
6. The Subrecipient will track and report the number of times the public health EOC is activated a year and the number of times the county EOC is activated if public health is involved.
7. The Subrecipient will post the draft AAR and IP to the CRT within 90 days after every TTX, FE, FSE, incident, or event involving a public health response.

Attachment A-1 Revised Public Health Preparedness and Response Statement of Work

- a) Responses to public health incidents may be submitted for consideration to meet exercise requirements; PHPR will consider these requests on a case-by-case basis.
8. The Subrecipient will update all Budget Period 1 (BP1) Improvement Plans in the Improvement Plan Tracking Sheet.
9. The Subrecipient will conduct and participate in all drills and exercises required by the Exercise Framework.

Partnerships (RRF Enhance partnerships)

1. The Subrecipient will engage with HCC partners and other public health partners regarding public health roles to ensure understanding and agreement of those roles during a medical surge.
2. The Subrecipient will attend PHPR planning, training, awareness calls, and webinars.
3. Conduct quarterly health and medical partner meetings. Post sign-in sheet, agenda, and meeting notes to the CRT.

Local Support (RRF Expand local support)

1. The Subrecipient will attend monthly joint PHRC, PHPR, and partner calls. If the PHRC cannot attend, another jurisdiction member must attend or review the recording within five days.
2. The Subrecipient will participate in emergency management recovery and mitigation committees and Local Emergency Planning Committees (LEPC) meetings.

Administrative and Budget Preparedness (RRF Improve administrative and budget preparedness systems)

1. The Subrecipient will submit the quarterly match summary by completing the match spreadsheet on the CRT. Submit supporting documentation from the PHNI system if PHPR time is tracked or another method if the Subrecipient does not use PHNI to track PHPR support and upload to CRT. Due dates are Q3, due April 30, 2025, and Q4, due July 31, 2025.
2. The Subrecipient will submit invoices and supporting fiscal documentation by the end of the month following expenses incurred in sufficient detail to ensure that payments may be made in conformance with this Agreement. If the jurisdiction does not comply with the required deliverables, invoices may not be paid until deliverables are complete.
3. In preparation for the Budget Period 2 (BP2) Administrative and Fiscal Preparedness exercise, the Subrecipient will review, maintain, update, and train the Administrative Preparedness Plan or similar document that describes fiscal and administrative authorities and practices.
4. The Subrecipient will submit a quarterly progress report completed by both the PHRC and their manager.
5. The Subrecipient will provide additional supporting documentation upon request for verification of deliverables.

Workforce (RRF Build workforce capacity)

Attachment A-1 Revised Public Health Preparedness and Response Statement of Work

1. New PHRCs, PHNMs, and HDDs will attend CRT and fiscal training within thirty (30) days of hire.
2. The Subrecipient will attend all Face2Face meetings as scheduled.
3. The Subrecipient will continue developing jurisdictional public health incident management command capability through training, drills, and exercises to better equip the team for activating, operating, and managing a public health emergency that includes pandemic influenza, anthrax response, POD, DVC, operations, sheltering, and AFN populations.
4. The Subrecipient will participate in essential preparedness meetings or training sessions in person or virtually when available.
5. PHEP-funded health department staff must participate in annual training, drills, and exercises to bolster their response and resilience competencies and demonstrate operational readiness.
6. The Subrecipient will continue to maintain a ready responder workforce across the entire health department.

Data Modernization (RRF Modernize data collection and systems)

1. The Subrecipient will participate in performance measurement data collection activities.
2. The Subrecipient will provide additional supporting documentation upon request for verification of deliverables.
3. The Subrecipient will maintain procedures for information exchange between public health and the medical sector, including operational status, staffing levels, bed status, medical services status, and patient census, using EMResource.
4. The Subrecipient will identify three (3) public health staff, emergency operations center, or emergency management staff to have access to the EMResource. One (1) of the three (3) public health staff identified will be the PHNM or HDD.
5. The Subrecipient will update quarterly data collection sheets in the CRT.

Risk Communications (RRF Strengthen risk communications activities)

1. The Subrecipient will collaborate with partners that represent prioritized populations to develop culturally, linguistically, and accessible appropriate risk messages for AFN populations.
2. Based on demographic data, the Subrecipient will develop and disseminate culturally appropriate situational awareness and education messages for each language spoken in the jurisdiction.
3. The Subrecipient will review and update public health after-hours contact information.
4. The Subrecipient will review, update, and validate all WARN alerting and notification groups and members, including:
 - a) Public health staff in the incident command system
 - b) Partners
 - c) Nurses
 - d) Other planning and response partners
5. The Subrecipient will update the list of current spokespersons, local media contacts, and public information officers quarterly or as it changes.

Attachment A-1 Revised Public Health Preparedness and Response Statement of Work

6. The Subrecipient will incorporate lessons learned from exercises and responses into CERC and information dissemination plans.
7. The Subrecipient will include PIO, spokespersons, and HCCs in all situational awareness, information sharing, training, drills, and exercises.
8. Using daily activities, scheduled events, exercises, or incident responses the Subrecipient will validate CERC plans and principles to ensure risk communication and staff activities simulate actions that will be taken during an emergency.

Health Equity (RRF Incorporate health equity practices)

1. The Subrecipient will continue planning, training, exercising, and other collaboration efforts to establish the necessary infrastructure so that disproportionately affected AFN populations within the jurisdiction are prepared to appropriately endure and recover from threats with public health consequences.
2. The Subrecipient will work with local partners, emergency management, and stakeholders, including those representing AFN populations, to plan communications strategies and identify, coordinate, and establish transportation networks for people in need before, during, and after an incident or event.
3. The Subrecipient will support disproportionately affected populations and those with accessibility and functional needs that affect their ability to prepare for, respond to, and recover from public health emergencies.

Public Health Laboratory Capacity (RRF Advance capacity and capability of public health laboratories)

1. The Subrecipient will review the WDH 24/7/365 Emergency Notification Line training webinar before June 30, 2025.

Recovery (RRF Prioritize community recovery efforts)

1. The Subrecipient will continue to develop and update a roster of community partners and their potential roles and resources and post to the CRT.

Training requirements are due no later than June 30, 2025
It is highly recommended that these activities be completed early in the Agreement period, as scheduled, or when they become available.

All Hazards Approach (RRF Prioritize a risk-based approach)

1. The Subrecipient will complete the E/L0103 Planning: Emergency Operations Course and post the course completion certificate to the CRT.

Local Support (RRF Expand local support)

1. The Subrecipient will complete IS-406: Operating a Shelter before June 30, 2025.

Workforce (RRF Build workforce capacity)

1. The Subrecipient will complete training to ensure baseline competency and integration with preparedness requirements. These courses are meant to build upon each other.

Attachment A-1 Revised Public Health Preparedness and Response Statement of Work

- a) Baseline training:
 - i. Incident Command System (ICS) 100: Introduction to ICS
 - ii. ICS 700: An Introduction to the National Incident Management System (NIMS)
 - iii. ICS 706: NIMS Intrastate Mutual Aid
 - iv. ICS 800: National Response Framework, An Introduction
 - v. IS-120.C: An Introduction to Exercise
 - vi. IS-2900.A: National Disaster Recovery Framework (NDRF) Overview
 - vii. L0146 Homeland Security Exercise and Evaluation Program Emergency Management Assistance Compact (EMAC) Pre-Event Preparation for Resource Providers
- b) Health Department supervisory positions:
 - i. ICS 200: Basic ICS for Initial Response
 - ii. Independent Study (IS)-2200: Basic Emergency Operations Center Functions.
- c) Staff with designated response roles:
 - i. ICS 300: Intermediate ICS for Expanding Incidents (In Person)
 - ii. EMAC Just-in-Time Training for Deploying Personnel.
 - iii. Crisis and Emergency Risk Communication (CERC)
 - iv. Senior staff who support the management of large/complex responses
 - v. ICS 400: Advanced ICS (In Person)

Risk Communications (RRF Strengthen risk communications activities)

1. The Subrecipient will ensure that all Public Health PIOs or spokespersons complete at least one public information training course each year.
2. If available, PIOs should complete at least one communication training session focusing on AFN.

Health Equity (RRF Incorporate health equity practices)

1. The Subrecipient will complete IS-368.A: Including People With Disabilities in Disaster Operations before June 30, 2025.

Recovery (RRF Prioritize community recovery efforts)

1. The Subrecipient will complete IS-2900.A: National Disaster Recovery Framework (NDRF) Overview.

Drill and Exercise requirements are due no later than June 30, 2025

All Hazards Approach (RRF Prioritize a risk-based approach)

1. The Subrecipient will conduct the following alerting, notification, and assembly drills:
 - a) Staff notification and in-person assembly of all dispensing/vaccination core management teams.
 - b) Staff notification and assembly (may be in person, virtual, or hybrid) of primary partners.

Attachment A-1 Revised Public Health Preparedness and Response Statement of Work

Risk Communications (RRF Strengthen risk communications activities)

1. The Subrecipient will respond to an after-hours 24x7 number call-down drill to be conducted before June 30, 2025. Within 60 minutes of initial contact, contact must be made with PHRC, PHN staff, or another 24x7 designated point of contact.
2. The Subrecipient will participate in EEI drills throughout the budget cycle.
3. The Subrecipient will participate in all PHPR-initiated risk communication drills, exercises, and exercise injects throughout the budget cycle.

Cities Readiness Initiative (CRI) requirements are due no later than June 30, 2025

All Hazards Approach (RRF Prioritize a risk-based approach)

1. The Subrecipient must maintain the capacity and capability to manage, distribute, dispense, and administer MCMs during a public health emergency.
2. The Subrecipient will ensure readiness for a large-scale biological event that requires rapid distribution, dispensing, and administration.

Partnerships (RRF Enhance partnerships)

1. The Subrecipient will partner with PHPR to conduct media monitoring and communication surveillance activities:
 - a) Develop or update approaches for regular media outreach, including social media and traditional news outlets.
 - b) Identify opportunities to build trust and address misinformation and disinformation during responses.

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Contract #: 247079

Entry Date:3/3/2025 4:03:01 PM \

Department: Wyoming Department of Health, Public Health
Division

Agency Contact: Krause, Derrick

Phone: 307-777-8624

Other Agency Contact: Sheryl Roub

WYOMING ATTORNEY
GENERAL'S OFFICE

MAR 18 2025

Chandler Pauling
Assistant Attorney General

Client Comments: 1025- Sheridan County Amendment 1

Contractor/Vendor Name: Sheridan County

Contract Title: Sheridan County BASE
Amendment

Contract Type: Amendment

Contract Amount: 93000.0000

Contract Effective Date: 1/1/2025 12:00:00 AM

Contract Expiration Date: 6/30/2025 12:00:00 AM

Status: Attorney Review Complete

RETURN VIA: Ink Signature - Pick-up

Assigned Attorney: Chandler Pauling

**AMENDMENT ONE TO THE GRANT AGREEMENT BETWEEN
WYOMING DEPARTMENT OF HEALTH, PUBLIC HEALTH DIVISION AND
SHERIDAN COUNTY**

1. **Parties.** This Amendment is made and entered into by and between the Wyoming Department of Health, Public Health Division (Agency), whose address is: 122 West 25th Street, 3rd Floor West, Cheyenne, Wyoming 82002 and Sheridan County (Subrecipient), whose address is: 297 South Main Street, Sheridan, Wyoming 82801. This Agreement concerns the Public Health Preparedness and Response Unit.
2. **Purpose of Amendment.** This Amendment shall constitute the first amendment to the Grant Agreement between the Agency and the Subrecipient. The purpose of this Amendment is to: replace Attachment A, Public Health Preparedness and Response Statement of Work, with Attachment A-1, Revised Public Health Preparedness and Response Statement of Work.

The original Grant Agreement, dated May 31, 2024, required the Subrecipient to develop public health emergency preparedness and response capability in the jurisdiction through the implementation of the Centers for Disease Control and Prevention Public Health Preparedness Capabilities, for a total Grant Agreement amount of ninety-three thousand dollars (\$93,000.00) with an expiration date of June 30, 2025.

3. **Term of the Amendment.** This Amendment shall commence on January 1, 2025, or upon the date the last required signature is affixed hereto, whichever is later (Effective Date), and shall remain in full force and effect through the term of the Grant Agreement, as amended, unless terminated at an earlier date pursuant to the provisions of the Grant Agreement, or pursuant to federal or state statute, rule, or regulation.

4. **Amended Responsibilities of the Subrecipient.**

Responsibilities of the Subrecipient are hereby amended as follows:

- A. As of the Effective Date of this Amendment, Attachment A, Public Health Preparedness and Response Statement of Work, which was attached to the original Contract, is superseded and replaced by Attachment A-1, Revised Public Health Preparedness and Response Statement of Work, which is attached to this Amendment and incorporated into the original Contract by this reference. All references to "Attachment A" in the original Contract, and in any amendments thereto, are amended to read: "Attachment A-1".

5. **Amended Responsibilities of the Agency.**

Responsibilities of the Agency have not changed.

6. **Special Provisions.**

- A. **Same Terms and Conditions.** With the exception of items explicitly delineated in this Amendment, all terms and conditions of the original Grant Agreement, and any previous amendments, between the Agency and the Subrecipient, including but not limited to sovereign immunity, shall remain unchanged and in full force and effect.
- B. **Counterparts.** This Amendment may be executed in counterparts. Each counterpart, when executed and delivered, shall be deemed an original and all counterparts together shall constitute one and the same Amendment. Delivery by the Subrecipient of an originally signed counterpart of this Amendment by facsimile or PDF shall be followed up immediately by delivery of the originally signed counterpart to the Agency.

7. **General Provisions.**

- A. **Entirety of Contract.** The original Grant Agreement, consisting of nine (9) pages; Attachment A, Public Health Preparedness and Response Statement of Work, consisting of thirteen (13) pages; this Amendment One, consisting of three (3) pages; Attachment A-1 Revised Public Health Preparedness and Response Statement of Work, consisting of nineteen (19) pages; and the Federal Contract Provisions, represent the entire and integrated Grant Agreement between the parties and supersede all prior negotiations, representations, and agreements, whether written or oral. In the event of a conflict or inconsistency between the language of this Grant Agreement and the language of any attachment or document incorporated by reference, the language of this Grant Agreement shall control.

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8. **Signatures.** The parties to this Amendment, through their duly authorized representatives, have executed this Amendment on the dates set out below, and certify that they have read, understood, and agreed to the terms and conditions of this Amendment.

This Amendment is not binding on either party until approved by A&I Procurement and the Governor of the State of Wyoming or his designee, if required by Wyo. Stat. § 9-2-3204(b)(iv).

AGENCY:

Wyoming Department of Health, Public Health Division

Stefan Johansson, Director
Wyoming Department of Health

Date

Stephanie Sandoval, MHSA, MBA
Senior Administrator, Public Health Division

Date

SUBRECIPIENT:

Sheridan County

Chairman, Sheridan County Board of Commissioners

Date

SHERIDAN COUNTY ATTORNEY: APPROVAL AS TO FORM

Sheridan County Attorney

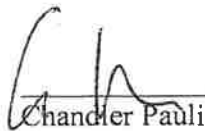
Date

COUNTY CLERK'S ATTESTATION:

Sheridan County Clerk

Date

ATTORNEY GENERAL'S OFFICE: APPROVAL AS TO FORM

 # 247079
Chandler Pauling, Assistant Attorney General

03.18.25
Date