A meeting of the City of Evansville Public Safety will be held at the location, on the date, and at the time stated below. Notice is further given that members of the Finance and Labor, Municipal Services, Plan Commission and Economic Development Committee may be in attendance. Requests for persons with disabilities who need assistance to participate in this meeting should be made by calling City Hall at (608)-882-2266 with as much notice as possible.

Public Safety Committee

Regular Meeting Wednesday, October 1, 2025, 6:00 p.m. City Hall, 31 S. Madison Street, Evansville, WI AGENDA

AMENDED

- 1. Call to Order.
- 2. Roll Call.
- **3.** Motion to approve the Agenda.
- 4. Motion to approve September 3, 2025, Public Safety regular meeting Minutes.
- 5. Citizen appearances other than agenda items listed.
- 6. Old Business.
 - **A.** Bryn Thompson approval for Operator's License from Provisional.
- 7. New Business.
 - **A.** Discussion with possible motion to approve the <u>Operator's License Application(s)</u> for: (non-recommended by Evansville Police Department).
 - 1) Azure Mae Klein (Sent letter and left message)
 - B. Motion to approve the Operator's License Application(s) for: (recommended by Evansville Police Department).
 - 1) Brady Jon Strangstalien
 - 2) Nicholas R. Gregerson
 - 3) Lane Robert Lederman
 - 4) Paul David Liesse
 - 5) Jessica Marie Bridges (Came in and fixed DOB)
 - 6) Kloie Jayce Huffman-Heins
 - C. Discussion with possible motion to approve the <u>Temporary Class "B" Retailer License Application for the sale of Fermented Malt Beverage for:</u>
 - 1) Evansville Community Theater Emma's Table, 104 W. Main Street, Evansville, WI 53536, Agent Lyman Fuson, for the following dates.
 - a. Thursday, November 13, 2025 6:00 p.m. 10:00 p.m.
 - b. Friday, November 14, 2025 6:00 p.m. -10:00 p.m.
 - c. Saturday, November 15, 2025 6:00 p.m. 10:00 p.m.

- **D.** Motion to recommend to Common Council the <u>Temporary Class B Beer Application for</u>: (background check recommendation provided by Chief Jones, unless otherwise noted)
 - 1) Monster Mash Market (Evansville Area Chamber of Commerce), 25 W Main St, Evansville, WI 53536, Agent Shawn Dunphy, for Saturday October 18, 2025, from 3:00 p.m. to 8:00 p.m. with the following premises:
 - a. Shifting Gears Bike Shop, 13 W Main St, Evansville, WI 53536 Paul Liesse
 - b. Exp Realty, 17 W Main St, Evansville, WI 53536 Bridget Creighton
 - c. Evansville Craft Market, 26 W Main St, Evansville, WI 53536 Theresa Petterson
 - d. Salon KB, 11 E Main St, Evansville, WI 53536 Kacy Bott
- E. Discussion with possible motion to recommend to Common Council the <u>Class "B"/Class B" Temporary Extension of Premises Application for</u>: (background check recommendation provided by Chief Jones, unless otherwise noted)
 - 1) Evansville Chamber of Commerce: 25 W. Main Street, Evansville, WI 53536 from 3:00 p.m. to 8:00 p.m. on October 18, 2025. From Madison Street to Maple Street.
- F. Discussion with possible motion to recommend to Common Council the <u>Class "B"/Class B" Temporary Extension of Premises Application for</u>: (background check recommendation provided by Chief Jones, unless otherwise noted)
 - 1) Slice Golf: 1 E. Main Street, Evansville, WI 53536 from 3:00 p.m. to 8:00 p.m. on October 18, 2025. From Madison Street to Maple Street.
- G. Motion to Recommend to Common Council the 2026 Joint Powers Agreement
- **H.** Discussion and Motion to Recommend to Common Council the Intergovernmental Emergency Medical Services Contact with Towns of Union, Porter, Magnolia, and Brooklyn
- **8.** Evansville Police Department Report.
- 9. Evansville Emergency Medical Services Report.
- **10.** Meeting Reminder: Wednesday, November 5, 2025, at 6:00 p.m. Future Meeting Dates: December 3, 2025
- 11. Adjourn.

Erika Stuart, Chairperson

Public Safety Committee

Regular Meeting Wednesday, September 3, 2025, 6:00 p.m. City Hall, 31 S. Madison Street, Evansville, WI

MINUTES

1. Call to Order Stuart called the meeting to order at 6:00 p.m.

2. Roll Call

<u>Members</u>	Present/Absent	Others Present
Alderperson Erika Stuart, Chair	P	Chris Jones, Chief
Alderperson Chuck Boyce	P	Lt Ian Reilly
Alderperson Joe Geoffrion	P	Carolyn Kleisch, EMS Chief
		Chris Wells, DOT
		Chris Hazard, DOT
		Judge, Thomas Alisankus
		Aaron Johnson, Detective
		Trevor Tway, Sergeant
		Shawn Dunphy, Chamber of Commerce
		Karen Tway, Citizen
		Slick & Shannon Plath, Citizen
		Ry Thompson, Citizen

- 3. Motion to approve the Agenda by Boyce, Seconded by Geoffrion, Motion Carried 3-0
- 4. Motion to Approve August 6, 2025, Public Safety Regular Meeting Minutes and the August 12, 2025, Public Safety Special Meeting Minutes by Stuart, Seconded by Geoffrion, Motion Carried 3-0
- 5. Citizen appearances other than agenda items listed N/A
- **6.** Old Business *N/A*
- 7. New Business.
 - A. Swearing in of Police Detective Sergeant Aaron Johnson. Judge Thomas Alisankus sworn in Detective Aaron Johnson.
 - B. Swearing in of Police Patrol Sergeant Trevor Tway. Judge Thomas Alisankus sworn in Patrol sergeant Trevor Tway.
 - C. Discussion Regarding Water Street & Main Street Intersection with DOT Chris Wells from the Deportment of Transportation explained what the warrants would be to facilitate putting in a Stop Sign at Water Street & Main Street. Main Street would need 300 vehicles in both directions for 8 hours a day and Water Street would need 200 units (vehicles, pedestrians & bicycles) 8 hours a day or there would need to be 5 or more accidents within a 12-month period or site issue. If the City was interested in this

they would need to do an engineering study and count vehicles and compare documentation. Chris stated as of right now with the information he has doesn't see a need for the study as of now.

- D. **Motion to approve the <u>Long-Term Street Closure Application for:</u> (background check recommendations provided by Chief Jones, unless otherwise noted)**
 - 1) Evansville Chamber of Commerce & Tourism, Monster Mash Market, 25 W. Main Street, Evansville WI 53536.
 - From First Street to Madison Street, Madison Street to Maple Street, on Saturday October 18, 2025, from 2:00 p.m. to 9:00 p.m.

by Boyce, Seconded by Geoffrion, Motion Carried 3-0

- 8. Evansville Police Department Report Officer Hanson has completed his field training and is currently assigned to 2nd shift. EVPD officers conducted the annual Taser Recertification. Chief Jones & Lt. Reilly met with the Administration team of the Evansville Community School District to discuss the upcoming school year. Vandalism throughout the city where property & vehicles were damaged, there has been an arrest. Officer Hanson handled an incident with a 13-year-old armed with a knife and taken to Juvenile Intake.
- 9. Evansville Emergency Medical Services Report EMS had a refresher with Mercy's MD-1. Chief Kleisch, was meeting with KSW about the garage door and getting final approvals. EMS has hired another Advanced EMT to join the service and Ashley has started A-EMT class this month, and Keri & Ben Start in September for Paramedic Class.
- 10. Meeting Reminder: Wednesday, October 1, 2025, at 6:00pm

Future Meeting Dates: November 5, 2025 & December 3, 2025

11. Adjourn Boyce adjourned the meeting at 6:58 p.m.

Jolene Klitzman, Deputy Clerk





www.evansvillewi.gov 31 S Madison St PO Box 529 Evansville, WI 53536 (608) 882-2266

June 2, 2025

Bryn Thompson

Evansville WI 53536

Dear Bryn:

This letter is a notification of the Police Department's non-recommendation for issuance of your Operator/Bartender License possibly due to misstatements and/or omissions on your application.

Final action will be taken by the Public Safety Committee at their next meeting on Wednesday, August 6, 2025, at 6:00 p.m. This meeting is open to the public and I would encourage you to attend so that you can respond to questions regarding violations on your application before they make a final decision to grant or deny your license.

If you have any questions, please feel free to contact me at 608-882-2266.

Sincerely,

Jolene Klitzman Deputy Clerk

cc:

Leah Hurtley, City Clerk

Erika Stuart, Public Safety Chairperson

Chris Jones, Police Chief



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.00	Renewal Or	perator's	License:	\$35.00	Provision	al License:	\$15.00
	PLICATION FEE WILL NOT			Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner			
A Police check will be completed. Please read careful cannot reapply for a 6 month period from date of den							
information. If you are unsure about how to respond							
and conviction record from the police depart					Wisconsin Circuit	Court Access	website at:
https://www.wicourts.gov/casesearch.htm (CCAP n	nay not provide comprehensi	-	1				
1. LEGAL NAME: Bryn	Lillian	7	hompso	n	DATE OF BIRTH	-,	
First	Middle		Last				
ADDRESS:					PHONE:	_	
CITY: EVENSVILLE	STATE: W		ZIP: 535	536	GENDER: Ma	ale (Fe	male
				te: Wiscons	Sla		
Driver's License No.:			issuing Sta	ite: VV13(011)	2111		
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?	12years		Former Na	ime(s):		,	
Prior Street Address if Above Address is Less Than 5	Years State Zip From To	City		State	Zip	From	То
	ARREST AND	CONVICTI	ON PECOP				
	(Anywhere within t						
2. Have you ever been charged and/or convicted of a	a felony?				Ye	s	No
3. Have you ever been charged and/or convicted of	misdemeanor?				Ye	s	No
4. Within the past ten (10) years, have you been arre		ns to appear	in court for	, or forfeited a bo	nd for any of the fo	llowing:	
a) Any underage alcohol violation?					Ye		No
b) Operating a motor vehicle while intoxicated?					Ye		No
c) Selling or furnishing alcoholic beverages to under					Ye		No
d) Permitting underage person on licensed premises e) Allowing persons on licensed premises after closic					Ye		No
f) Any alcohol related violation other than a, b, c, d,					Ye		No
g) Sale of legal or illegal drugs to include prescription		of any illegal	drugs to inc	lude prescription			
medications not prescribed to you?					Ye	s	No
h) Fighting, disorderly conduct, assault, or battery?					Ye		No
Resisting arrest, interfering with a police officer or Any crime or ordinance violation not listed above		ickate2			Ye		(No)
5. For each YES response above, you must identify a			ets if neces	sary or continue o			(NO)
TYPE OF ARREST, SUMMONS, VIOLATIO				MONTH/YEAR		ITY	STATE
				x 2024	Lacri	1556	WI
Underage Alcohol Violation	1		CCIO	N CNC I	Cheri	1330	VVL
			Attack on	rificate of comple	stion for Paragraphi	la Alcahal Carr	
Within the last two (2) years, did you have and/o		ving:			tion for Responsible t for a retail alcohol	Name and Address of the Owner, where the Owner, which is the Owne	ers Course
Successfully completed a Responsible Alco					tor of retail alcohol		
6. CERTIFICATION: I do hereby swear, under penalt		erson who r	nade and si				ense and that all
statements herein are complete, true and correct. I f	urther understand a full back	ground inve	stigation ma	y be conducted by	the Evansville Police	ce Department	prior to consider-
ation of this application. Additionally, I understand the do further agree to comply with all laws, resolutions,	nat this application may be de	enied if it con	ntains any fa	Isification-and tha	t I will not be able to	o reapply for a	6 month period. I
do further agree to comply with all laws, resolutions,	ordinances, and regulations,	rederal, Stat	e or local al	recting the sale of	Termenteu mait ber	verages and int	oxicating ilquors.
Signature:		Em	nail:	,			
Printed Name: Brun Thompson		Da	te: 5/2	21/25	U		
Printed Name: 10141 1 10mps or		0.0		71,00			
	FOR MUNICIPALIT	Y USE ONLY	BELOW THI	S LINE	Paid To:		
Police Department Recommendation and Comments			lic Safety Co proved:	ommittee: Deni	C. b	Date	
VAL - Less than 1 yr	6.44(c)(2)(a	J API	noveu	Delli		Date	
			et 11	010 6		D-4	
				Office Signature		Date	
Recommend: Non-Re	commended:	Rece	eipt #		Receipt: 1.	.158860	35.00
					THOMPSON.		
1 1/2 //	C 1 - 21 -	-					
0	6/02/65						
Dalica Chaff's Signature	Date						

City of Evansville



www.evansvillewi.gov 31 S Madison St PO Box 529 Evansville, WI 53536 (608) 882-2266

September

Azure Mae Klein

Evansville, WI 53536

Dear Azure:

This letter is a notification of the Police Department's non-recommendation for issuance of your Operator/Bartender License possibly due to misstatements and/or omissions on your application.

Final action will be taken by the Public Safety Committee at their next meeting on Wednesday, October 1, 2025, at 6:00 p.m. This meeting is open to the public and I would encourage you to attend so that you can respond to questions regarding violations on your application before they make a final decision to grant or deny your license.

If you have any questions, please feel free to contact me at 608-882-2266.

Sincerely,

Jolene Klitzman Deputy Clerk

cc:

Leah Hurtley, City Clerk

leve Klityman

Erika Stuart, Public Safety Chairperson

Chris Jones, Police Chief



CITY OF EVANSVILLE CITY CLERK'S OFFICE

NOTE: APPLICATION FEE WILL NOT BE RE	or's License: \$3		Provisional	LICCHISC.	20.00	
A Police check will be completed. Please read carefully and answer honestly. Falsification						
cannot reapply for a 6 month period from date of denial. If you have any doubt as to whe	ther to include the fact	s of a specific incid	dent it is recomme	ended that you	disclose the	
information. If you are unsure about how to respond to any questions on this form, chec	with the City Clerk for	clarification. You	can obtain inform	ation regardin	g your arrest	
and conviction record from the police department and/or the court with			onsin Circuit Co	ourt Access	website at:	
https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensive list	of all arrests/conviction	ns).				
1. LEGAL NAME: HZUCE Male	Alein	DAT	TE OF BIRTH:			
First Middle	Last	UA UA	IE OF BIKTH.	11000		
	Cast		^ -			
ADDRESS:		PHO	ONE:	-010	1401	
CITY: ELIONAUILLE STATE: GI	ZIP: 53	536 GE	NDER: Male	Fem	ale	
The Court of the C	Zir.	Joe No	O C	Vein.	die	
Driver's License No.:	Issuing State:	WISCO	prisin			
10 110000						
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?	Former Name(s):				
Prior Street Address if Above Address is Less Than 5 Years State Zip Faom To	City S	ate	Zip	From	То	
				-		
ARREST AND CON	VICTION DECORD	Name and Address of the Owner, where	and the same of th	Page and Company on		
(Anywhere within the Un						
	ned States of America		T		C	
2. Have you ever been cited and/or convicted of a felony?			Yes		(No)	
3. Have you ever been cited and/or convicted of a misdemeanor?			Yes		NO)	
4. Within the past ten (10) years, have you been arrested for, received a summons to a	opear in court for, or f	orfeited a bond fo	r any of the follow	wing:		
a) Any underage alcohol violation?			Qres.		NO	
b) Operating a motor vehicle while intoxicated?			Yes		No	
c) Selling or furnishing alcoholic beverages to underage person?			Yes		No	
			Yes		No	
d) Permitting underage person on licensed premises?						
e) Allowing persons on licensed premises after closing?			Yes		No	
f) Any alcohol related violation other than a, b, c, d, and e?			Yes		No	
g) Sale of legal or illegal drugs to include prescription medications or possession of any	llegal drugs to include	prescription				
medications not prescribed to you?			Yes		No)	
h) Fighting, disorderly conduct, assault, or battery?			Yes		No	
i) Resisting arrest, interfering with a police officer or obstructing an officer?			Yes		No	
j) Any crime or ordinance violation not listed above other than traffic or parking tickets			Yes		NO	
5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.						
5. For each tes response above, you must identify all violations below. Attach addition	at sneets if necessary		oack or this appr	lication.		
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE		TH/YEAR	CITY	lication.	STATE	
				lication.	STATE	
				lication.	STATE	
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				ication.	STATE	
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MON	TH/YEAR	CITY			
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE Within the last two (2) years, did you have and/or complete one of the following:	Attach certifica	TH/YEAR	CITY for Responsible A	Icohol Servers		
Within the last two (2) years, did you have and/or complete one of the following: Successfully completed a Responsible Alcohol Servers Course	Attach certifica	tte of completion	CITY for Responsible A a retail alcohol lice	ulcohol Servers		
Within the last two (2) years, did you have and/or complete one of the following: Successfully completed a Responsible Alcohol Servers Course Held an Operator's License issued in Wisconsin	Attach certifica	ste of completion alcohol agent for a	for Responsible A a retail alcohol lice f retail alcohol lice	ilcohol Servers ense ense	: Course	
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Within the last two (2) years, did you have and/or complete one of the following: Successfully completed a Responsible Alcohol Servers Course Held an Operator's License issued in Wisconsin 6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person statements herein are complete, true and correct. I further understand a full background ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature: Printed Name: AZURE WEN FOR MUNICIPALITY USE Police Department Recommendation and Comments:	Attach certifice An An The Who made and signed Investigation may be it contains any falsific I, state or local affectin Email: Date: 4974 ONLY BELOW THIS LIN Public Safety Commi	ate of completion alcohol agent for a se sole proprietor of the foregoing appronducted by the ation-and that I will get the sale of ferming the sale of ferming the sale of services. Denied:	for Responsible A a retail alcohol lice f retail alcohol lice file of retail alcohol file of retai	Date	se, and that all for to consider- month period. I ccating liquors.	



CITY OF EVANSVILLE CITY CLERK'S OFFICE

7B-1

New Operator's License: \$35.00 Renewal O	perator's	License:	\$35.00	Provisiona	al License: \$	15.00
NOTE: APPLICATION FEE WILL NOT	BE REFUN	DED IF DENII	ED OR WITHDRA	WN.		
A Police check will be completed. Please read carefully and answer honestly. Fals cannot reapply for a 6 month period from date of denial. If you have any doubt as information. If you are unsure about how to respond to any questions on this formand conviction record from the police department and/or the court https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensing the court of the co	to whether to n, check with with which	the City Clerk you intera	facts of a specific in for clarification. Ye cted, or the W	ncident it is recomr ou can obtain infor	mended that you mation regarding	disclose the g your arrest
1. LEGAL NAME: FORMY TON	0:	anasta lif		DATE OF BIRTH:		
First Middle	- 116	Last		DATE OF BIRTH.		
ADDRESS:				PHONE:		
6. 11.		F2.	57		,	
CITY: ZUGNSVILLE, STATE: WI		Lir.	11-	GENDER: Mai	e X Fem	ale
Driver's License No.:		Issuing State	: 00 1			
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? (months		Former Nan	ne(s):			
Prior Street Address if Above Address is Less Than 5 Years State Zip From To	City		State	Zip	From	То
	Euwill	o i	VI	53536	2022	2025
1 Card	C MINOVIII	0	101	77576	100	2005
ARREST AND (Anywhere within		the second secon	ica).	lage deal.		
2. Have you ever been cited and/or convicted of a felony?				Yes		No.
3. Have you ever been cited and/or convicted of a misdemeanor?				Yes		No
4. Within the past ten (10) years, have you been arrested for, received a summor	ns to appear	in court for, o	or forfeited a bond	for any of the foll	lowing:	
a) Any underage alcohol violation?		,		Yes		(No)
b) Operating a motor vehicle while intoxicated?				Yes		No
c) Selling or furnishing alcoholic beverages to underage person?				Yes		Ø9
d) Permitting underage person on licensed premises?				Yes		43
e) Allowing persons on licensed premises after closing?				Yes		6 66
f) Any alcohol related violation other than a, b, c, d, and e?				Yes		Ø9
g) Sale of legal or illegal drugs to include prescription medications or possession of	of any illegal	drugs to inclu	de prescription			
medications not prescribed to you?				Yes		No
h) Fighting, disorderly conduct, assault, or battery?				Yes		E
i) Resisting arrest, interfering with a police officer or obstructing an officer?				Yes		No
j) Any crime or ordinance violation not listed above other than traffic or parking t	tickets?			Yes		MO
5. For each YES response above, you must identify all violations below. Attach a	dditional she	ets if necessa	ry or continue on	the back of this ap	plication.	
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE		M	ONTH/YEAR	CIT	Y	STATE
Within the last two (2) years, did you have and/or complete one of the follow	wing:	Attach certi	ficate of completion	on for Responsible	Alcohol Servers	Course
Successfully completed a Responsible Alcohol Servers Course			An alcohol agent f	or a retail alcohol l	icense	
Held an Operator's License issued in Wisconsin			The sole proprieto	r of retail alcohol l	icense	
6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the p statements herein are complete, true and correct. I further understand a full back ation of this application. Additionally, I understand that this application may be do do further agree to comply with all laws resolutions, ordinances, and regulations, Signature:	eground investigation in the seried if it confederal, state	tigation may tains any falsi e or local affe	be conducted by the ification-and that I cting the sale of fe	ne Evansville Police will not be able to	Department pri reapply for a 6 r	or to consider- month period. I
Printed Name: Brady Strangstalie Date: 8-29-25						
FOR MUNICIPALIT	Y USE ONLY	BELOW THIS	LINE			
Police Department Recommendation and Comments:		lic Safety Com	nmittee:	Paid To: : City of Evans	Date	
			Demieu	100		
		Clerk's Of	ffice Signature		Date	
Approved: Denied:	Rece	ipt#		D	COORE	70 PT - 175 PT
1 09/04/202	5			Receipt: 1.15 STRANGSTALIE Aug 29, 2025	N, BRADY	35.00
Police Chief's Signature Date						



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.00 Renewal Op				Provision	nal License:	\$15.00
NOTE: APPLICATION FEE WILL NOT	Carried Control of the Control of th	the same of the sa			idi Eleciise.	713.00
A Police check will be completed. Please read carefully and answer honestly. Falsi cannot reapply for a 6 month period from date of denial. If you have any doubt as to information. If you are unsure about how to respond to any questions on this form,	ification and/o o whether to ir , check with the	r misrepr nclude the e City Cle	resentation may be gree facts of a specific income for clarification. You	ounds for deni ident it is recon a can obtain info	nmended that y ormation regard	ou disclose the
and conviction record from the police department and/or the court w https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensiv				consin Circuit	Court Acces	s website at:
1. LEGAL NAME: Nicholas		reger		TE OF BIRTH	1	
First Middle		Last	ior Di	ATE OF BIRTH:	4	
ADDRESS:			Pi	IONE: (
		~	2020	IONE.	-	
CITY: EVAN SVILLE STATE: WH	Z	IP: 7 5	3 3 6 G	ENDER: M	ale Fe	emale
Driver's License No.:	Is	suing Sta	te: WI			
C Van	15					
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?		ormer Na		7:-		
Prior Street Address if Above Address is Less Than 5 Years State Zip From To	City	_	State	Zip	From	То
ARREST AND	CONVICTION	RECOR	D			
(Anywhere within the	he United State	es of Ame	erica).			
2. Have you ever been charged and/or convicted of a felony?	Tes			Ye	es	(No)
3. Have you ever been charged and/or convicted of a misdemeanor?		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(Ye	25	No
4. Within the past ten (10) years, have you been arrested for, received a summons	s to appear in	court for	or forfeited a bond f	or any of the fo	ollowing:	
a) Any underage alcohol violation?				Ye	es	No
b) Operating a motor vehicle while intoxicated?				Ye		No
c) Selling or furnishing alcoholic beverages to underage person?				Ye		(No)
d) Permitting underage person on licensed premises? e) Allowing persons on licensed premises after closing?				Ye		No
f) Any alcohol related violation other than a, b, c, d, and e?				Ye		No
g) Sale of legal or illegal drugs to include prescription medications or possession of	f any illegal dru	gs to inc	ude prescription			
medications not prescribed to you?				Ye	es	(No)
h) Fighting, disorderly conduct, assault, or battery?				Ye		No
i) Resisting arrest, interfering with a police officer or obstructing an officer? j) Any crime or ordinance violation not listed above other than traffic or parking tic.	ckats?			Ye		No
5. For each YES response above, you must identify all violations below. Attach add	COMPANION SHOWS SHOW THE	if neces	sary or continue on th	The second secon		- U.S
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE			MONTH/YEAR		ITY	STATE
PECVIESS Driving		- (28/2010		151,112	WI
Te-Vich Gilling			1012010	() 00	BULKE	W_
					-	
und de la companya de			of an alasta	6 - D 1b	1- 11-15	
Within the last two (2) years, did you have and/or complete one of the following	ing:	Cttach cer	An alcohol agent for			ers Course
Successfully completed a Responsible Alcohol Servers Course			The sole proprietor			
Held an Operator's License issued in Wisconsin 6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the per	rean who mad	le and sid				ance and that all
statements herein are complete, true and correct. I further understand a full backgr						
ation of this application. Additionally, I understand that this application may be der						
do further agree to comply with all laws, resolutions, ordinances, and regulations, for	ederal, state o	r local aff	ecting the sale of ferr	nented mait be	verages and int	oxicating liquors.
Signature:	Email				74.	om
Printed Name: NE holas Gre 401501	Dete	4/1	1/2075			
Printed Name: 14 4 401 9 19 467 401	Date:	-1'	17			_
FOR MUNICIPALITY	USE ONLY BE	LOW THIS	LINE			
Police Department Recommendation and Comments:	Public	Safety Co	mmittee:	Paid 10:	menti tita	
	Approv	/ed:	Denied:	City of Eva	Date:	
1		Clerk's	Office Signature		Date	
- 0 X	Receipt	#		Dansiet 1	150700	50.00
Recommended:				Receipt: 1.		20,00
				GREGERSON, Sep 5, 2025		
1 1 1 09/15/7027	1			эер э, госо	STON TH	
Police Chief's Signature Date						



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.00	Renewal					Provisio	onal License: \$	15.00
	LICATION FEE WILL NO							
A Police check will be completed. Please read carefully								
cannot reapply for a 6 month period from date of denia								
information. If you are unsure about how to respond to and conviction record from the police departm								
https://www.wicourts.gov/casesearch.htm (CCAP ma					cite wiscon	isiii circu	it court Access	website at.
	1		1			05 010711	<i>F</i>	
1. LEGAL NAME: Lane	Robert	Le	Last	an	DATE	OF BIRTH	. (_	
11 1 10	windale		Cast		21101			
			T		PHO	VE:		
CITY: Evansville	STATE: WIF		ZIP: 5	3536	GENE	ER:	Male Fem	ale
				1.	_			
Driver's License No.:	MINE TO THE TOTAL PROPERTY OF THE TOTAL PROP		Issuing St	ate: Wi				
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?	1 xr		Former N	ame(s):				
Prior Street Address if Above Address is Less Than 5 Ye	ears State Zip From To	City		State		Zip	From	То
1		G	11.	WI	535	3/	C-1 13	Sept 24
31		Evans V	162	N F	7 37	00	Sept 13	SEPT 27
		ND CONVICTI						
	(Anywhere withi	in the United S	tates of Am	erica).				
2. Have you ever been charged and/or convicted of a f	elony?						Yes	No
3. Have you ever been charged and/or convicted of a r	nisdemeanor?					,	Yes	No
4. Within the past ten (10) years, have you been arrest	ed for, received a summ	nons to appear	in court fo	r, or forfeited	a bond for a	ny of the	following:	
a) Any underage alcohol violation?							Yes	○No
b) Operating a motor vehicle while intoxicated?						,	Yes	No
c) Selling or furnishing alcoholic beverages to underag	e person?					,	Yes	No
d) Permitting underage person on licensed premises?						,	res	No
e) Allowing persons on licensed premises after closing							res	No
f) Any alcohol related violation other than a, b, c, d, an		f 11		1 1		,	Yes	No
g) Sale of legal or illegal drugs to include prescription r medications not prescribed to you?	nedications or possession	n of any illegal	arugs to in	clude prescript	tion	,	100	
h) Fighting, disorderly conduct, assault, or battery?							fes fes	No
i) Resisting arrest, interfering with a police officer or o	hstructing an officer?						res	No
j) Any crime or ordinance violation not listed above ot		g tickets?					fes	No
5. For each YES response above, you must identify all			eets if neces	ssary or contin	ue on the b			
TYPE OF ARREST, SUMMONS, VIOLATION	and the second s			MONTH/YEAR			CITY	STATE
								3.7.1.2
			-					
			-					
Within the last two (2) years, did you have and/or	complete one of the foll	lowing:	Attach ce				ble Alcohol Servers	Course
Successfully completed a Responsible Alcoho	ol Servers Course				agent for a r			
Held an Operator's License issued in Wiscons					oprietor of r			
6. CERTIFICATION: I do hereby swear, under penalty of	of perjury, that I am the	person who r	made and s	igned the fore	going applic	ation for	an operator's licens	se, and that all
statements herein are complete, true and correct. I furn								
ation of this application. Additionally, I understand that do further agree to comply with all laws, resolutions, or								
								county inquois
Signature:		En	nail:			100	100	
Printed Name: Lane Lederman		Da	9	-16-25	5			
Timed Hame.		00		10 00				
	FOR MUNICIPAL	LITY USE ONLY	BELOW TH	IS LINE				
Police Department Recommendation and Comments:		Pub	olic Safety C	ommittee:	13	70 10:		
			proved:		Denied:	ity or tv	Date:	
			Clerk's	Office Signatu	ıre		Date	
V		0		office signatu			Date	
Recommend: Non-Reco	mmended:	Keci	eipt #		Re	ceipt: 1	.159839	35.00
						AHE LEDE	RMAN	
11/////	2011				Se	p 16. 20	125 2:30 P*	
1111	14/19/10)	25						
Police Chief's Signature	Date							



7B-4

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St. PO Box 529, Evansville, WI 53536 New Operator's License: \$35.00 Renewal Operator's License: \$35.00 Provisional License: \$15.00 NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN. A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensive list of all arrests/convictions). 1. LEGAL NAME: Paul David Liesse DATE OF BIRTH: Middle First ADDRESS: 119 Garfield Ave PHONE: crry. Evansville STATE: WI ZIP: 53536 GENDER: Issuing State: WI Driver's License No.: HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 11 years Former Name(s): n/a Prior Street Address if Above Address is Less Than 5 Years State Zip From To Zip From To ARREST AND CONVICTION RECORD (Anywhere within the United States of America) 2. Have you ever been charged and/or convicted of a felony? 3. Have you ever been charged and/or convicted of a misdemeanor? 4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following a) Any underage alcohol violation? b) Operating a motor vehicle while intoxicated? ~ Yes c) Selling or furnishing alcoholic beverages to underage person? No ~ d) Permitting underage person on licensed premises? e) Allowing persons on licensed premises after closing? Yes No Yes f) Any alcohol related violation other than a, b, c, d, and e? g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription Yes medications not prescribed to you? Yes No h) Fighting, disorderly conduct, assault, or battery? i) Resisting arrest, interfering with a police officer or obstructing an officer? Yes j) Any crime or ordinance violation not listed above other than traffic or parking tickets? Yes No 5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application. STATE TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE 16 Attach certificate of completion for Responsible Alcohol Servers Course Within the last two (2) years, did you have and/or complete one of the following: An alcohol agent for a retail alcohol license Successfully completed a Responsible Alcohol Servers Course The sole proprietor of retail alcohol license Held an Operator's License issued in Wisconsin 6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification-and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, apd regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors. Printed Name: Paul Liesse Date: 9-16-25 FOR MUNICIPALITY USE ONLY BELOW THIS LINE Police Department Recommendation and Comments: City of Evansville **Public Safety Committee:** Denied: Approved: Clerk's Office Signature Non-Recommended: Sep 17, 2025 11:12 AM



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$	35.00 Renewal C	perator's	Licens	e: \$35.00		Provision	al License: \$	\$15.00
	OTE: APPLICATION FEE WILL NO	T BE REFUNI	DED IF C	ENIED OR WIT				
A Police check will be completed. Please recannot reapply for a 6 month period from dainformation. If you are unsure about how to and conviction record from the police https://www.wicourts.gov/casesearch.htm	te of denial. If you have any doubt as respond to any questions on this for department and/or the court	s to whether to m, check with with which	the City you	the facts of a spo Clerk for clarifica Interacted, or t	ecific incide tion. You ca	nt it is recom n obtain info	mended that you rmation regardin	disclose the g your arrest
1. LEGAL NAME: JOSICA	Marie	0	ride	ges	DATE	OF BIRTH:		
ADDRESS:	Middle		Last	0	PHON	NE:		
CITY: Evansville	STATE: W		ZIP: 5	3536	GENE	DER: Ma	le Fem	ale
Driver's License No.:			Issuing	State: Wi				
HOW LONG HAVE YOU LIVED AT ABOVE AD	DRESS? 2.5 years		Former	Name(s):				
Prior Street Address if Above Address is Less	s Than 5 Years State Zip From To	City		State		Zip	From	То
		Evans	ville	Wi	53	536	2019	2023
		D CONVICTION						
2. Have you ever been charged and/or conv	(Anywhere within	the United Si	tates of A	imerica).		Yes		(No)
Have you ever been charged and/or conv Have you ever been charged and/or conv						Yes		No
4. Within the past ten (10) years, have you b		ons to annear	in court	for or forfeited	a bond for a			140
a) Any underage alcohol violation?	seen arrested for, received a samme	ons to appear	iii court	ior, or ioricited	a bona for t	Yes		(No
b) Operating a motor vehicle while intoxica	ted?					Yes		(No)
c) Selling or furnishing alcoholic beverages						Yes		NO.
d) Permitting underage person on licensed						Yes		No
 e) Allowing persons on licensed premises at f) Any alcohol related violation other than a 						Yes		No No
g) Sale of legal or illegal drugs to include pro		of any illegal	drugs to	include prescript	ion	163		INO
medications not prescribed to you?		,				Yes		(No)
h) Fighting, disorderly conduct, assault, or b						Yes	_	No
i) Resisting arrest, interfering with a police						Yes		(No
j) Any crime or ordinance violation not liste	THE RESIDENCE OF THE PARTY OF T	TO DESCRIPTION OF THE PARTY OF				Yes	The state of the s	(No)
 For each YES response above, you must in TYPE OF ARREST, SUMMONS, N 		additional sne	ets ii nei	MONTH/YEAR		CI		STATE
			T	1 2 0 2	`\			L
Disorderly Condu			JU	14 202	. 1	Evans	ulu	001
Within the last two (2) years, did you ha	ve and/or complete one of the folio	owing:	Attach	certificate of co	mpletion fo	r Responsible	Alcohol Server	Course
Successfully completed a Respons				An alcohol a	agent for a r	etail alcohol	license	
Held an Operator's License issued				The sole pro	oprietor of r	etail alcohol	license	
6. CERTIFICATION: I do hereby swear, under statements herein are complete, true and contains of this application. Additionally, I under do further agree to comply with all laws, resulting the state of the same	orrect. I further understand a full bac rstand that this application may be o olutions, ordinances, and regulations	kground investigation	stigation stains and e or loca	may be conducte y falsification-and I affecting the sa	d by the Ev	ansville Polic not be able to ited malt bev	e Department pro reapply for a 6	ior to consider- month period. I
	FOR MUNICIPAL	ITY USE ONLY	BELOW	THIS LINE				
Police Department Recommendation and Co	mments:	Pub	lic Safety	Committee:		310 10:		
Recommend cont	ingent on con	rect App	roved:_		Denied:	ity of Evan	Date:	
Dos on appl-	ention-01/02/9	3		k's Office Signati	ire		Date	
· ·		Pass	ipt #	. J Office Signati			Date	
Recommend:	Non-Recommended:		npt #			eceipts 1. JESSICA BR ep 19, 202		35,30
Police Chief's Signature	0//29/2013							

7B-6



APPLICATION FOR OPERATOR'S LICENSE

CITY OF EVANSVILLE CITY CLERK'S OFFICE

1. S. Madison St. P.O. Box 529, Evansville, WI 53536

313. Madison 31, PO Box	527	, Evansville, WI 3	3330			
New Operator's License: \$35.00 Renewal Operat	or's	License: \$35.00	Provision	al License:	\$15.00	
NOTE: APPLICATION FEE WILL NOT BE RE	FUND	ED IF DENIED OR WITHDR	AWN.			
A Police check will be completed. Please read carefully and answer honestly. Falsification	on and	or misrepresentation may be	grounds for denia	of license/pe	rmit. Applic	cant
cannot reapply for a 6 month period from date of denial. If you have any doubt as to when	ther to	include the facts of a specific	incident it is recom	mended that y	ou disclose	the
information. If you are unsure about how to respond to any questions on this form, check						
and conviction record from the police department and/or the court with			Wisconsin Circuit	Court Acces	s website	at:
https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensive list of	of all a	rrests/convictions).				
1. LEGAL NAME: KIDIE Jayce MUH	Fm	Last Heins	DATE OF BIRTH:			
Middle)		Last			1	
ADDRESS: 11 3 TUV N 31			PHONE:	- 611	U) L	7
		57607			\	/
CITY: A Dany STATE: W		ZIP: 5350 Z	GENDER: Ma	le Fe	male /	U
Driver's License No.:		Issuing State: W\				
Dilver's License No		issuing state.				
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 18 LECAYS		Former Name(s):				
Prior Street Address if Above Address is Less Than 5 Years State Zip From To	City	State	Zip	From	1	Го
ARREST AND CONV						
(Anywhere within the Uni	ited St	ates of America).				TC.
2. Have you ever been charged and/or convicted of a felony?			Yes		No	X
3. Have you ever been charged and/or convicted of a misdemeanor?			Yes		No	X
4. Within the past ten (10) years, have you been arrested for, received a summons to ap	ppear	in court for, or forfeited a bor	nd for any of the fol	lowing:		
a) Any underage alcohol violation?			Yes	2.0	No	
b) Operating a motor vehicle while intoxicated?			Yes		No	X
c) Selling or furnishing alcoholic beverages to underage person?			Yes	5	No	X
d) Permitting underage person on licensed premises?			Yes		No	×
e) Allowing persons on licensed premises after closing?			Yes		No	X
f) Any alcohol related violation other than a, b, c, d, and e?			Yes		No	X
g) Sale of legal or illegal drugs to include prescription medications or possession of any il	llegal	drugs to include prescription	Va		No	\checkmark
medications not prescribed to you?			Yes		No No	X
h) Fighting, disorderly conduct, assault, or battery? i) Resisting arrest, interfering with a police officer or obstructing an officer?			Yes		No	v
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?)		Yes		No	V
5. For each YES response above, you must identify all violations below. Attach additions		ets if necessary or continue o		The second secon		
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE		MONTH/YEAR	CI	10.5	STATE	
				,		
underage drinking		06 2022	Rock (WI	
v -			offordville-not			
				Sure		
Within the last two (2) years, did you have and/or complete one of the following:		Attach certificate of comple	tion for Responsible	e Alcohol Serv	ers Course	
Successfully completed a Responsible Alcohol Servers Course		An alcohol agent	for a retail alcohol	license		
Held an Operator's License issued in Wisconsin		The sole proprie	tor of retail alcohol	license		
6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person v	who m	ade and signed the foregoing	application for an	operator's lic	ense, and th	hat all
statements herein are complete, true and correct. I further understand a full background	inves	tigation may be conducted by	the Evansville Polic	e Department	prior to con	sider-
ation of this application. Additionally, I understand that this application may be denied if	it con	tains any falsification-and that	I will not be able to	reapply for a	6 month pe	eriod. I
do further agree to comply with all laws, resolutions, ordinances, and regulations, federa	il, state	or local affecting the sale of	rermented mait bev	erages and int	oxicating lic	uors.
Signature: Karl Milli Milli	Em	ail:				-0
Visia II CAPP a Maison		012212	125 J	7		
Printed Name: Klose Huttman - Heins	Dat	e:	025		_	
FOR MUNICIPALITY USE	ONLY	BELOW THIS LINE				
Police Department Recommendation and Comments:		ic Safety Committee:	Lain ins			
	100000000000000000000000000000000000000	roved: Denie	ed: City of Evans	Date:		
	-					
V		Clerk's Office Signature		Date		-
Recommend: Non-Recommended:	Rece	ipt#	Receipt: 1.15	59878	35.00	
Recommende: Non-Recommended:	+		CREIGHTON RE	EALTY LLC		
			Sep 23, 2025	7:43 AM		
18:16						
Police Chiefe Signature						
Police Chief's Signature Date						



Temporary Class "B" / "Class B" Retailer's License Application CITY OF EVANSVILLE CLERK'S OFFICE

7C-1

Application Fee: \$10.00 per Licensed Premise				APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN					
	Number of Lic	ensed Prem	nise(s): 1		x \$10.00 = \$		Total Due		
Licen	se Type: (Check one)	x	Beer Onl	v 🕸	Wine Only				
Even	t Name: It's a Wonderf	ul Life, Evar	nsville Com	nmunity The	atre production				
Even	t Date: 11/13-15				Event Time: 6:00-10:0	00 pm			
Nam	e of Person in Charge o	of Event: Lyr	nn Gilitzer				· 2		
				Organiz	ation				
	Bona fide Club		C	Church		X	Lodge/Society		
	Chamber of Commer Civic or Trade Organ	-	1	air Assoc/A	gricultural Society		Veteran's Organiz	ation	1
Orga	nization Name: Evansv	ille Commu	nity Theat	re					
Addr	ess: 102 W. Main, Evan	sville							
Date	Organized: 1/5/2002	If C	orporation	n, Date of In	corporation:				
If org	anization is not required	to hold a Wis	sconsin Selle	er's Permit Pu	rsuant to SS 77.54(7m),	Nis. Sta	ats., Check here		
		Nai	mes and ac	ddresses of a	all Organization Officer	rs:			
Presi	dent/Primary Officer: Lyr	man Fuson			Evansville WI 53536				
Vice P	resident: Gillitzer						Evansville, WI 53536		
		Name			Address		City/State/Zip		
1	etary: reen Wiloh			7 1 -			Evansvill	e,	WI
Trans		me			Address		City/State/Zip	,	11
ireas	surer: Clare Nerby	Name		•	Address		City/State/Zip	-	w /
Loca	ation of Premises were B	eer and/or V	Vine will be	served, cons	umed, or stored and are	as whe	ere Alcohol Beverage F	Recor	ds will
Addr	ess/Location Description	: Emma's Tal	ble. 102 We	st Main, Evan	sville				
	remises occupy all or par								
If par	rt of building, fully descri	be all premis	ses covered	under this a	plication, which floor(s)	& roo	m(s) licenses is to cove	er:	
The	sale of beer and wine will and areas adjacent.								ma's
	aration: An officer of the								
	correct to the best of his/ ication for a license may b					s mate	rially false information	in ar	1
7	T. P.		- (1.	I.	0/24	-123	_		



Temporary Class "B"/ "Class B" Retailer's License AFFIRMATION OF UNDERSTANDING FOR EVENT MANAGER

CITY OF EVANSVILLE CLERK'S OFFICE

The second secon	
EVENT DATE:11/13/2025, 11/14/2025, 11/15/2025	EVENTTIME:Zpm 6-10 pm
NAME:Lynn Gillitzer	DATE OF BIRTH:
ADDRESS:	
EMAIL:	PHONE:
laws and requirements which you are governed by and with we The City Clerk's Office will provide you a copy of this ordinance application must be fully completed, and submitted to the City the required fees. ATTESTATION AND ACKNOWLEDGEMENT OF RESPONSIBLE PARTIESTATION AND ACKNOWLEDGEMENT OF RESPONSIBLE PARTIES IN THE SUBJECT OF SUBJEC	e and the State publication if you desire a copy. This y Clerk's Office at 31 S Madison St, Evansville WI 53536, with RTY In the last two (2) years have been/or completed one of the course ansville
FOR MUNICIPALITY USE	ONLY BELOW THIS LINE
Police Chief Recommer	ndation and Comments:
Recommend Non-Recommend	Recommend with conditions
, i.	
	1
111:57	09/26/2025
Police Chie	Ps Signature Date
Date Filed with Clerk: 9-25-25	Date License Issued:
Public Safety: 10-1-25	Clerk's Signature: Paid In:
	City of Evansville
Notes & Receipt Information:	
	Receipt: 1.159898 10.00 LYMAN FUSON - ECTP Sep 25, 2025 10:20 AM



Temporary Class "B"/ "Class B" Retailer's License Application CITY OF EVANSVILLE CLERK'S OFFICE

Application Fee: \$10.00 per Licensed Premise APPLICA		ATION FEE WILL NOT	F BE REFUND	ED IF DENIED OR WITHDRAWN	
Number of Licensed Pren	nise(s):	5	× \$10.00 = \$	50	90 Total Due
License Type: (Check one)	Beer Only	/	Wine Only	>	<
Event Name: Fall Fee	st ·	d	Monster	Mas	Market
Event Date: 1018	25		Event Time:	3pm-	- Epm
Name of Person in Charge of Event:	Sh			19	
	· —	Orga	nization	-	
Bona fide Club	Ch	nurch			Lodge/Society
Chamber of Commerce/ similar Civic or Trade Organization	Fa	ir Assoc	/Agricultural Societ	у	Veteran's Organization
Organization Name: Ewans	sulle		Cramber	of C	ommerce
Address: 25 W A	Lai	'n	St S:	eenso.	16
Date Organized: 1971 If C	orporation	, Date o	Incorporation:	<u></u>	
If organization is not required to hold a Wis	consin Seller	's Permi	Pursuant to SS 77.54	(7m), Wis. Sta	ts., Check here
			of all Organization C		
President/Primary Officer: Name	Ba	ine	, 14w	Main	Evanor lle
Vice President: Paul (esse		13 W.	Mai	
	mire	.2	539 G	lija	City/State/Zip
Treasurer: Name Name	unso	<u> </u>	2 9 Address Address	ρίπ	City/State/Zip City/State/Zip
Location of Premises were Beer and/or W	ine will be s			d areas where	e Alcohol Beverage Records will
Address/Location Description: 25	5 W.	M	Wh.		
Do premises occupy all or part of building?	P	11t		-	
If part of building, fully describe all premise			application, which fl	por(s) & room	(s) licenses is to cover:
part-	DL N	21/	10000		
	,				3
			V-1/104		1
Declaration: An officer of the organization, and correct to the best of his/her knowledge application for a license may be required to	and belief.	Any pers	on who knowingly pro	ormation prov ovides materia	vided in this application is true ally false information in an
aBarrle 9/12	100		Evo	movill	e Clouter
(Officer Signature/Date	, ,			(Name of O	rganization)



Temporary Class "B"/ "Class B" Retailer's License AFFIRMATION OF UNDERSTANDING FOR EVENT MANAGER

CITY OF EVANSVILLE CLERK'S OFFICE

EVENT DATE: 0/8/25	EVENT TIME: 3:00 - 8:00 P.M.
NAME: Shawn Dunphy.	DATE OF BIRTH:
ADDRESS: 2 FILLT YUTTON CO. &	ransville WI 53536
EMAIL:	PHONE:
Chapter 6 of the Evansville Code and the WI Publication 309 (Relaws and requirements which you are governed by and with work The City Clerk's Office will provide you a copy of this ordinance application must be fully completed, and submitted to the City the required fees.	hich you are responsible for knowing and must comply with. and the State publication if you desire a copy. This
ATTESTATION AND ACKNOWLEDGEMENT OF RESPONSIBLE PA	RTY
 I, the undersigned being duly sworn on oath, affirm that within following: Successfully completed a responsible Alcohol Servers of 	
 Held a Wisconsin Operator's License for the City of Eva 	insville
 An Alcohol Agent for a Retail Alcohol License 	
 The Sole Proprietor of Retail Alcohol License. 	
	have asked for copies of such laws. 9 19 25 Inager/Person in Pharge of event Date
FOR MUNICIPALITY USE O	
Police Chief Recommend	lation and Comments:
Recommend Non-Recommend	Recommend with conditions
Email	
Police Chief's	s Signature Date
Date Filed with Clerk: 9-19-2025	Date License Issued:
Public Safety: D - 1 - 2025	Clerk's Signature:
Notes & Receipt Information:	

Additional Licensee Information If additional room is needed for more businesses please attach additional pages.					
	Description of Premises:				
Shitting Gears Bike Shop	Ketail Shop				
Business Address:					
13 W. Main St.					
Business Dwner LIPSSE	Signature:				
Business Name:	Description of Premises:				
EXP Realty	Rea Hy Office				
Business Address:					
17 W. Main St.					
Business Owner: Creighton	Signature: Bressttan				
Business Name:	Description of Premises:				
Evansville Craft Market	Retail Shop				
Business Address:					
26 W. Main St.					
Business Owner: Theresa Petters on	Signature: Muse Ville				
D. sir see North	Description of Premises:				
Salon KB	Retrial /Salon				
Business Address:	0 1				
11 E. Main St	P Pour				
Business Owner: BOH	Sighature:				
Business Name:	Description of Premises:				
Gransville Chamber of Con	of 1				
Business Address:	Office				
25 W. Main St					
Business Owner: Shawn Dunphy	Signature: Shan Dufus				
Business Name:	Description of Premises:				
Business Address:					
Business Owner:	Signature:				
Business Name:	Description of Premises:				
Business Address:					
Business Owner:	Signature:				

FW: Class B & Extension of Premise Applications

9/29/25 10:22 AM

From: "Jolene Klitzman" < j.klitzman@evansvillewi.gov>

To: Jolene Klitzman <klitzman4@litewire.net>

From: Christopher Jones <c.jones@evansvillewi.gov>

Sent: Monday, September 29, 2025 10:19 AM

To: Jolene Klitzman <j.klitzman@evansvillewi.gov>; Quinn Bennett <q.bennett@evansvillewi.gov>

Subject: Re: Class B & Extension of Premise Applications

This looks ok to me.

Professionally,



From: Jolene Klitzman

Sent: Monday, September 22, 2025 2:16 PM

To: Christopher Jones <c.jones@evansvillewi.gov>; Dale Roberts <d.roberts@evansvillewi.gov>; Scott Kriebs <s.kriebs@evansvillewi.gov>

Cc: Leah Hurtley < <u>l.hurtley@evansvillewi.gov</u>> **Subject:** Class B & Extension of Premise Applications

Hi All,

Please see the attached application for:

Evansville Chamber of Commerce Temporary Class "B"/"Class B" Retailer's License Application.

Evansville Chamber of Commerce Extension of Premise Application.

Slice Golf Extension of Premise Application.

These are for the Monster Mash Market on October 18, 2025, from 3 p.m. to 8 p.m. The street closure has already been approved by Public Saftey on September 3, 2025.

Jolene Klitzman

Deputy Clerk, City of Evansville 31 S. Madison St./PO Box 529 Evansville, WI 53536

Phone: 608-882-2266 Option 2

Upcoming Elections:

*April 7, 2026 - Spring Elections

*August 11, 2026 – Partisian Primary

*November 3, 2026 - General Election

<u>www.myvote.wi.gov</u> – Register to Vote, Request an absentee ballot, and more.

Alert to City of Evansville Elected Officials and Members of City Committees, Boards, Commissions: In order to comply with the Open Meetings Act requirements, please limit any reply to only the sender of this electronic communication.



Temporary Extension of Premise & Sidewalk Café Application

CITY OF EVANSVILLE CITY CLERK'S OFFICE 31 S. Madison St, PO Box 529, Evansville, WI 53536

(Application must be submitted at least 15 days prior to event)

Application Fee: \$50.00

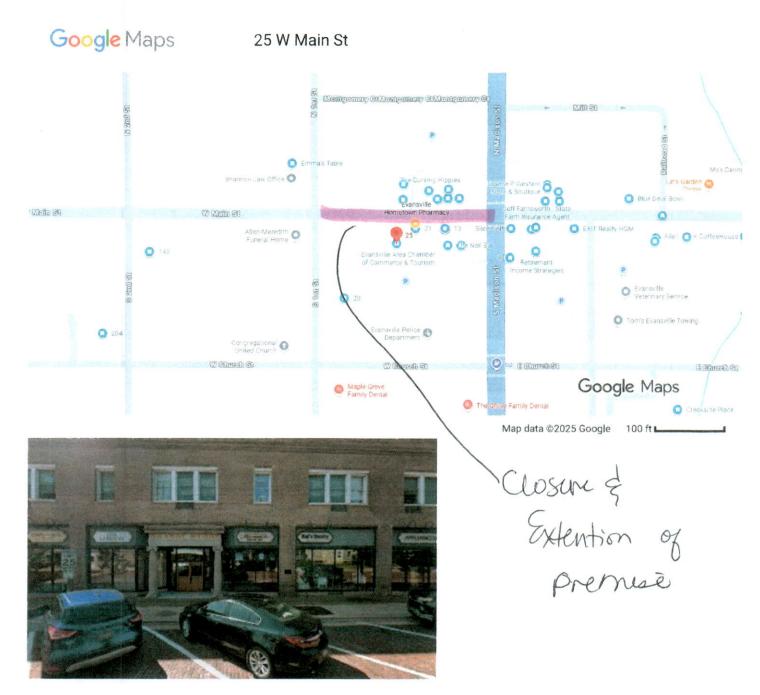
APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN

7E

This license can only be issued to a current licensed establishments. Requested area(s) must be adjacent with the current licensed premise.

· · · · · · · · · · · · · · · · · · ·
Must be the same as existing license) EVUIS VILLE Area Chamber of Commerce
Organized Occasion Name:
(if applicable) Fall Fast (Formerly Ladies Night Out)
Requested Date(s): $10/18/25$ Time(s) of Operation: $3.00pm - 8.00pm$
Business Address: 25 W. Main St. Evansville UI
Name of Agent: Shawn Dunphy
(Must be the same as existing license, otherwise a new appointment of agent form must be completed)
Phone Number: 608-882-5131 Email Address: evansuillechamber @ gnajleon
Name of Person in Charge of Occasion: Shawn Dunphy
Phone Number:
Premise Details
Specific description of the site for which the temporary extension is sought, including the dimension of the area and where beer/liquor/wine is to be served and consumed:
Fall Fest Event and Monster Mash Market will be held on the
Street (1st St Madison St. c " " ") - West Mais St
in front of Chamber office. Requesting attendees be able to drink bererages How will the licensed premise area be restricted and screened from underage persons:
· · · · · · · · · · · · · · · · · · ·
Greet barricaded off- attendees will have a bracelet to
identify 21+ age. Under 21 will have different Color
wrist-bands ID checks done at Check-in of event@ Creeksede.
Will the event encroach upon any public property or public right- of way? Yes No
(If you answered Yes above, a street closure permit may be needed)
Street Closure permit approved for event at Public Safety
Sept. meeting.
Names and Addresses of all Organization Officers:
President: Abben Barres untak 14 W. Malis St. Errans vile WI
Vice President: Paul Lesse Georg B W. Mays St Evansville WI
Secretary: Name Raminez andrews 539 Elitah of Evansville wi
Treasurer: Denvie Johnson 2 E. Main St. City/State/Zip wille wit
Name Coluni de Address City/State/Zip

Location of Premise were Beer/Liquor or Wine will be	served, consumed, or stored and areas where Alcohol Beverage Records will be stored:
Address/Location Description: 25 W. Ma	uis St
Do premise occupy all or part of building?	
	der this application, which floor(s) & room(s) licenses is to cover:
7 1St St. to Mad	150M St.
tront	Orange Bldg.
0	
Declaration: An officer of the organization, declares und correct to the best of his/her knowledge and belief. Any license may be required to forfeit not more than \$1,000.	er penalties of law that the information provided in this application is true and person who knowingly provides materially false information in an application for a
Oberns 9/18/29	5 Evansville Chamber of Communa
(Officer Signature/Date)	(Name of Organization)
FOR MUNI	CIPALITY USE ONLY BELOW THIS LINE
Public Works Recommend	Reason for Non-Recommend/conditions
Manager: Non-recommend Recommend with conditions	
Chief of Recommend X	Reason for Non-recommend/conditions_
Police: Non-recommend	Email
Recommend with conditions	
Community Recommend Development: Non-recommend Recommend with conditions	Reason for Non-recommend/conditions
City Clerk: Recommend	Reason for Non-recommend/conditions
Non-recommend	See Clerk's Memo
Recommend with conditions	
Date Filed with Clerk: 6-9-19-25	Public Safety: Approved/Denied Date: 15-1-2025
Date License Issued:	Council: Approved/Denied Date:
Type of license currently held:	To an Dordary
	B Beer/tiquor Class C Wine Brewery
Class A beet/Liquoi	b beer/ and beer and
Notes & Receipt Information:	
Trotes & Receipt mornation	
# B	



25 W Main St





Fest Saturday, October 18th 3:00 p.m. - 8:00 p.m.



SCAN ME!

Tickets On Sale NOW



Start at Creekside Place 102 Maple St.



Plus! The return of the 5 Ladies Mural Reception 1:30 pm at Grange Store Building

SHOPPING-MAKERS MARKET FEAT. 40+ VENDORS-FOOD-MUSIC
CARRIAGE RIDES

Event Sponsored by:

18 OCT 2025 3PM-8PM





FW: Class B & Extension of Premise Applications

9/29/25 10:22 AM

From: "Jolene Klitzman" < j.klitzman@evansvillewi.gov>

To: Jolene Klitzman <klitzman4@litewire.net>

From: Christopher Jones <c.jones@evansvillewi.gov> Sent: Monday, September 29, 2025 10:19 AM

To: Jolene Klitzman <j.klitzman@evansvillewi.gov>; Quinn Bennett <q.bennett@evansvillewi.gov>

Subject: Re: Class B & Extension of Premise Applications

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Professionally,



From: Jolene Klitzman

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Cc: Leah Hurtley < !.hurtley@evansvillewi.gov Subject: Class B & Extension of Premise Applications

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Jolene Klitzman

Deputy Clerk, City of Evansville 31 S. Madison St./PO Box 529 Evansville, WI 53536

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Temporary Extension of Premise & Sidewalk Café Application

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

(Application must be submitted at least 15 days prior to event)

Application Fee: \$50.00

APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN

7F

This license can only be issued to a current licensed establishments. Requested area(s) must be adjacent with the current licensed premise.

Business Name: (Must be the same as existing license)	
(Must be the same as existing license) $0/100000000000000000000000000000000000$	
Organized Occasion Name:	
(if applicable)	1
(if applicable) MINSHY MUSH MURKE	
Requested Date(s): 10-18-25	Time(s) of Operation: $2-9$
Business Address: E Main St EVansvill	le WI 53530
Name of Agent: () arah (alp)	•
3	
(Must be the same as existing license, otherwise a new appointm	nent of agent form must be completed)
	^ · · · · ·
Phone Number:	Email Address:
Mrula 11.10	(
Name of Person in Charge of Occasion: Sorah Kilp	<u> </u>
•	-
Phone Number:	Email Address:
Prei	mise Details
	tension is sought, including the dimension of the area and where
beer/liquor/wine is to be served and consumed:	tronsion to boughtly meading the difficultion of the died did where
C(1)	and the same of th
alling up that the strongs the strongs	to The De people to to the Your
alcohol during the fall fest. Wi	ill have harricads up. Madison St b
OR COTION GROWING MILITAR	
	Mare It.
How will the licensed premise area be restricted and scree	and from underage persons:
Duriculas will be up in Want of	Shile. Wist hands for people 21 and up.
•	
	3
Will the event encroach upon any public property or publi	
of way?	Yes No ,
(If you answered Yes above, a street closure permit may be need	ed)
(Mumber 15 upolying for Street closure	<i>,</i>
Committee is appropriate to the control of the cont	
Names and Addresse	s of all Organization Officers:
President: JUNIA CIPS	1 Emainst Evansinu W1 53536
Name	Address City/State/Zip
Vice President: My Dry In	11 PU
Name	Address City/State/Zip
Secretary:	
Name	Address City/State/Zip
Treasurer:	City/State/21p
Name ·	Address City/State/Zip

Location of Premise were Beer/Liquor or Wine will be	served, consumed, o stored:	r stored and areas wh	ere Alcohol Beverage Reco	rds will be
Address/Location Description:	Josel Melo	an to Maple	St.	
Do premise occupy all or part of building?		4		
If part of building, fully describe all premise covered un	der this application,	which floor(s) & room	(s) licenses is to cover:	
extenor of Sire emparaing				
XA/OITO				
From Madison St.	to Maple S!	r.		
110/11 1 333				14
Declaration: An officer of the organization, declares und correct to the best of his/her knowledge and belief. Any license may be required to forfeit not more than \$1,000	person who knowing	nat the information pro ly provides materially	ovided in this application is t false information in an appl	rue and ication for a
Inlul 9-17-25		Slive Golf		
(Officer Signature/Date)		(Name o	of Organization)	
FOR MUN	ICIPALITY USE ONLY E	ELOW THIS LINE		
D. H. Walla Danamand	Reason for Non-Re	commend/conditions_	September 1985 The September 198	# 17 E # 17 E # 17 E
Public Works Recommend Manager: Non-recommend	Reason for Non-Re	commenta contactions_		
Recommend with conditions				
Chief of Recommend X				
Police: Non-recommend	ema	av		
Recommend with conditions				
Community Recommend	Reason for Non-rea	commend/conditions_		
Development: Non-recommend				
Recommend with conditions	December Non ro	commend/conditions_		
City Clerk: Recommend	Reason for Non-rei	Merks M	emp	
Non-recommend Recommend with conditions		CICIAS		
Recommend with conditions				
Date Filed with Clerk: 9-17-25	Public Safety: A	proved/Denied D	ate:	
Date License Issued:	Council: Approv	ed/Denied Date:		
Type of license currently held:				
	s B Beer/Liquor	Class C Wind	e Brewery	
Class A Deel/ Elquoi	3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			
Notes & Receipt Information:				
1000				
<u> </u>				
			Paid To:	
1 72			City of Evansville	
			traction to the second to the second to	
			Later than your special and that they was self-took only they give some than they have not the took only the col-	1 14 10 10 10 10 10 10 10 10 10 10 10 10 10
			Receipt: 1.159849 SLICE GOLF	50.00
			Sep 17, 2025 11:04 AM	

FW: Class B & Extension of Premise Applications

9/29/25 10:22 AM

From: "Jolene Klitzman" < j.klitzman@evansvillewi.gov>

To: Jolene Klitzman <klitzman4@litewire.net>

From: Christopher Jones <c.jones@evansvillewi.gov>

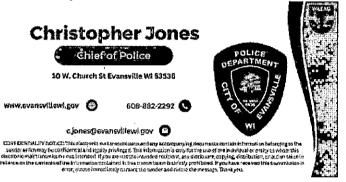
Sent: Monday, September 29, 2025 10:19 AM

To: Jolene Klitzman <j.klitzman@evansvillewi.gov>; Quinn Bennett <q.bennett@evansvillewi.gov>

Subject: Re: Class B & Extension of Premise Applications

This looks ok to me.

Professionally,



From: Jolene Klitzman

Sent: Monday, September 22, 2025 2:16 PM

To: Christopher Jones <c.jones@evansvillewi.gov>; Dale Roberts <d.roberts@evansvillewi.gov>; Scott Kriebs <s.kriebs@evansvillewi.gov>

Cc: Leah Hurtley < !.hurtley@evansvillewi.gov Subject: Class B & Extension of Premise Applications

Hi All.

Please see the attached application for:

Evansville Chamber of Commerce Temporary Class "B"/"Class B" Retailer's License Application.

Evansville Chamber of Commerce Extension of Premise Application.

Slice Golf Extension of Premise Application.

These are for the Monster Mash Market on October 18, 2025, from 3 p.m. to 8 p.m. The street closure has already been approved by Public Saftey on September 3, 2025.

Jolene Klitzman

Deputy Clerk, City of Evansville 31 S. Madison St./PO Box 529 Evansville, WI 53536

Phone: 608-882-2266 Option 2 Upcoming Elections:

*April 7, 2026 - Spring Elections

*August 11, 2026 – Partisian Primary

*November 3, 2026 - General Election

www.myvote.wi.gov - Register to Vote, Request an absentee ballot, and more.

Alert to City of Evansville Elected Officials and Members of City Committees, Boards, Commisions: In order to comply with the Open Meetings Act requirements, please limit any reply to only the sender of this electronic communication.

JOINT POWERS AGREEMENT 256.35(9) Wis. Stats

ROCK COUNTY AND CITY OF EVANSVILLE

Rock County (County) and City of Evansville (Municipality) have combined with other

municipalities to establish a sophisticated telecommunications system which automatically

connects a person dialing the first "911" to a public safety answering point (PSAP) provides

the PSAP with the caller's location and number identification.

Wis. Stats. 256.35(9) requires that County and Municipality annually enter into this Joint

Powers Agreement as follows:

1) This agreement is applicable on a daily basis.

2) If an emergency service vehicle is dispatched in response to a request through the

Rock County System, which the Municipality is a part of, such vehicle shall render

its services to the persons needing the services regardless of whether the vehicle

is operating outside the vehicle's normal jurisdictional boundaries. The intent of

this paragraph is to meet the legal requirements of the Wisconsin State Statutes.

It is not to assign calls to emergency service departments outside of their defined

service areas on a regular basis. Only unusual circumstances will require such

assignment.

3) Municipality directs the Rock County PSAP Center receiving a call for service in

the Municipality's jurisdiction to dispatch the call in the following manner.

Primary:

Police:

County Main Repeater 155.985 (TX), 159.090 (RX)

Fire:

RF Main 153.950 (RX), 155.715 (TX)

RF Paging 154.310 (RX), PL Tone 79.7

EMS:

Same as Fire

	Secondary:	Police:	County TAC	Repeater 154.950 (TX), 158.730 (RX)
		Fire:	RF Central 1	I50.815 (TX), 155.430 (RX)
4)	All calls of an adm	EMS: inistrative n	Same as Ab ature shall be	oove e referred to Municipality's published
	telephone number	as follows:		
	Administrat	ive:	Police:	882-2292
			Fire:	882-9934
			EMS:	882-2269
5)	The Rock County F	PSAP will ma	aintain a reco	rd of the receipt of all 911 calls,
	emergency and no	n-emergend	cy, and a reco	rd of the dispatch. Municipality must
	keep records of the	e receipt of t	he dispatch a	and disposition.
6)	Rock County will fi	ile a copy of	this Agreem	ent with the Wisconsin Department of
	Justice as required	d by sec. 256	3.35(9), Wis. S	Stats.
				Joint Powers Agreement and the Agreement effective January 1, 2026.
XRo	ock County Administrat	or	Date	
X	ty of Evansville, Mayor		Date	
X	ty of Evansville, City C	 Clerk	Date	
	, , , ,			

EVANSVILLE EMERGENCY MEDICAL SERVICES

INTERGOVERNMENTAL EMERGENCY MEDICAL SERVICES CONTRACT

SERVICE PROVIDER: City of Evansville, through its Emergency Medical Service

(Referred to as "Provider")

SERVICE RECIPIENTS: Listed Sections of Towns of Union, Porter, Magnolia and

Brooklyn

(Referred to as "Recipients")

TERM OF CONTRACT: January 1, 2026 through December 31, 2026.

WHEREAS, the City of Evansville, through its Emergency Medical Service, owns and maintains an ambulance and related equipment and supplies; and recruits, trains, and staffs emergency medical personnel; and

WHEREAS, towns adjoining the City of Evansville have a need for emergency medical services that the City of Evansville can provide; and

WHEREAS, pursuant to Sec. 66.0301(2), Wis. Stats., municipalities may contract with each other for the furnishing of services; and

WHEREAS, the City of Evansville as Provider and the towns as Recipients desire to provide and receive services under the terms and conditions set forth in this contract.

NOW, THEREFORE, the City of Evansville and the Towns agree as follows:

1. PROVISION OF EMERGENCY MEDICAL SERVICES

Provider shall provide emergency medical services on a 24 hour per day/ 365 day per year basis in those sections or portions of sections of each town as follows:

- A) Town of Union, Rock County, Wisconsin All Sections except Sections 4 through 7, inclusive, and the north one-half of Section 8;
- B) Town of Porter, Rock County, Wisconsin Sections 4 through 9, 16 through 21, 28 through 33 and the west one-half of Section 34, all inclusive;
- C) Town of Magnolia, Rock County, Wisconsin Sections 1 through 12, 14 through 18, and 20 through 22, all inclusive; and
- D) Town of Brooklyn, Green County, Wisconsin The south one-half of Sections 25 and 26, the southeast quarter of Section 27, the east one-half of Section 34 and all of Sections 35 and 36.

2. RENDERING OF SERVICES

The Provider shall endeavor to provide emergency medical services, to the best of its ability given the particular circumstances, to all persons in need of such service within the listed sections of the recipients, whether or not the person is a resident of the Town. It shall be within the discretion of the Provider, its agents and employees, to determine on a case by case basis whether or not a situation constitutes an emergency, whether or not such emergency medical services shall be administered and the extent to which emergency medical services shall be rendered. The Provider shall also have the right to determine the destination and manner or transport of a person serviced, if transport is deemed necessary.

3. RESPONSE

Within reason and exercising proper and appropriate discretion, Provider agrees to respond to requests for emergency medical services within the listed sections of the Recipients whether such request comes from Recipient employees, officers or agents, by any law enforcement agency or any other person.

4. COST OF SERVICES

The cost for emergency medical services payable by Recipients to Provider shall be twenty-eight dollars and seventy-three cents (\$28.73) per resident in the listed sections of each town, billed annually. Resident population will be the most current Department of Administration population estimate, typically reported in October, or other current estimate the Provider deems more accurate by door-to-door survey, utility bills, 911 services, and/or building permits (Attachment A).

5. BILLING OF SERVICES

- A) A person receiving "basic life support" (BLS) emergency medical services will be charged a base rate of \$1,300.00, plus mileage and oxygen/spinal immobilization if rendered, if a Recipient resident covered under Section 1. A person receiving "advanced life support" (ALS) emergency medical services will be charged a base rate of \$1,400.00, plus mileage and oxygen/spinal immobilization if rendered, if a Recipient resident covered under Section 1.
- B) A person receiving BLS emergency medical services will be charged a base rate of \$1,300.00, plus mileage and oxygen/spinal immobilization if rendered, if a City of Evansville resident. A person receiving ALS emergency medical services will be charged a base rate of \$1,400.00, plus mileage and oxygen/spinal immobilization if rendered, if a City of Evansville resident.
- C) A person receiving BLS emergency medical services will be charged a base rate of \$1,300, plus mileage and oxygen/spinal immobilization if rendered, if not a city of Evansville or Recipient resident covered under Section 1 of this contract. A person receiving ALS emergency medical services will be charged a base rate of \$1,400, plus mileage and oxygen/spinal immobilization if rendered, if not a city of Evansville or Recipient resident covered under Section 1 of this contract.
- D) A call fee of \$500 will be charged to the person responded to for emergency medical services if services of Provider are not rendered, required or refused upon arrival. A standby fee of \$500 will be charged for all responses for which standby assistance is requested.
- E) The Provider will bill for services promptly with the information obtained at the time of service, which will contain information as to the date, the name and address of the person serviced, responsible party, and insurance, if any and if known.
- F) Provider will assume responsibility for collection of patient bills and will absorb potential adjustments and write-offs.

6. RECORDS MAINTENANCE

Provider shall keep reasonable itemized and detailed work records covering name and address of the person receiving service, other parties involved, date, time and location of service rendered, and the cost of the service performed under this contract.

7. EMPLOYEE STATUS

All persons employed by or volunteering services to the Provider in the performance of the services and functions pursuant to the contract shall be the officer, employee or volunteer of the Provider only and shall have no claim to any employment benefits, including but not limited to, pensions, civil service or other rights from the Recipients.

8. LIABILITY

Provider shall carry insurance protecting against claims of malpractice or negligence for the acts and omissions of the officers, agents, employees or volunteers of Provider under the contract. Each Recipient shall indemnify and hold harmless the provider, and shall carry insurance protecting against claims for malpractice or negligence for the acts or omissions of any of its officers, agents, employees or volunteers under the contract. Each shall provide any other party to the contract with a certificate of insurance upon request.

9. TERM OF CONTRACT

The term shall be for one year as noted in the caption of this contract.

10. TERMINATION AMENDMENT AND RENEWAL.

Any party to this contract may terminate its participation in the contract upon 60 days written notice to all other parties. If any Recipient terminates the contract they are obligated to pay the entire annual contract amount. If the City terminates the contract pursuant to this paragraph, the City would refund payments made by the Recipients on a pro-rata basis. The contract does not automatically renew by inaction of Provider or any Recipient. Written agreement of Provider and any Recipient is required on the terms of any amendment or renewal.

11. NON-EXCLUSIVE CONTRACT

This contract is not exclusive and Provider may provide emergency medical services to others than parties to this contract; and each Recipient may use any other emergency medical services supplier in addition to Provider.

Dated this day of October, 2025.		
Mayor, City of Evansville	Clerk, City of Evansville	
Chair, Town of Union	Chair, Town of Porter	
Chair, Town of Brooklyn	Chair, Town of Magnolia	

Evansville Police Department

Public Safety Report

Training:

- Officer Ritter has completed Phase I of the academy and is on to Phase II. Chief Jones and Lt. Reilly attended his exposure to OC and Taser at Blackhawk Tech.
- EVPD Officers conducted the annual Firearms Recertification.
- Lt. Reilly worked with Sgts. Tway and Johnson getting them set up for their new roles.
- Officer Z attended Peer Support Training hosted by the lowa County Sheriff's Office.

Community Outreach:

- Chief Jones, Lt. Reilly and officers attended the 3rd Annual Corwan Neuenschwander Community Corn Roast on Sunday September 7th.
- Detective Sergeant Johnson has been assigned to be the PD representative at the monthly Safety Committee meetings with the School District.
- **Calls for service:** As of 8am 09/26/25 September 2024: **1077** September 2025: **777**

Police Commission/Staffing:

• The Police Commission did not meet in September.

Accreditation:

Chief Jones, Lt. Reilly and Quinn have been reviewing accreditation files.

Notable calls:

- Officer Schmidt made an arrest for first offense Operating While Intoxicated. Suspect was also cited for Open intoxicants.
- Officer Hanson and Det. Sgt. Johnson were dispatched to W. Holt Rd. to assist with a reported Gunshot Wound. Upon arrival, the Officers located the male who was beyond lifesaving measures. Both assisted Rock County with the investigation as needed.
- Officers Nankee and Schwark investigated a threat made by a student about "shooting up" the school. Officers met the individual outside of the building, confirmed he did not have any weapons and insured the safety of all students still in the building. School staff and the officers worked together to then perform a threat assessment and later found that criteria were not met for terroristic threats. The school then handled the matter further.
- Officer Delgado was dispatched to the Evansville Manor for a death investigation. Officer Delgado ultimately determined through her investigation that an elderly male resident had committed suicide by means of hanging himself from one of the gazebos outside.
- Officers Nankee and Schmidt were dispatched to a domestic disturbance in progress.
 Upon arrival, Officers were able to stabilize the scene. Through their investigation, they were able to build probable cause to arrest the female half for Disorderly Conduct/DV and Battery/DV.
- Det. Sgt. Johnson was dispatched to McDonalds for a report of an unwanted subject who was possibly intoxicated. Det. Sgt. Johnson arrived on scene and met with the suspect outside by his vehicle. During his initial investigation, Det. Sgt. Johnson had



October 1st, 2025 Evans

Evansville Police Department

Public Safety Report

probable cause to arrest the suspect for OWI. Det. Sgt. Johnson gave multiple commands and the male began to walk away from him. Det. Sgt. Johnson initiated physical contact with the male and the male began to physically resist. Det. Sgt. Johnson was eventually able to get him into custody with the help of a citizen bystander. The male was later charged with 4th Offense OWI, Resist/Obstruct, and a probation violation. It should be noted that the male was on probation for armed robbery and flee/elude officer.

Officer Hanson was dispatched to a Vehicle vs. House traffic crash on Hwy 104. The
driver failed to stop at 104/Cty Tk C. The driver was extracted from the vehicle and
airlifted to a local hospital. The investigation was then turned over to Green County.

Admin update:

- Coverall Cleaning did their initial clean at the PD and did an amazing job.
- The conference room has been redesigned to better serve as a dual-purpose training and conference area.
- EPD won a Preliminary Breath Testing (PBT) device through a Highway Safety Grant from the Wisconsin Department of Transportation Chemical Test section.

CAD Incidents By Type

Agency: EVPD

Incident Type Description	# of Inicdents	Incident Type Code
911 ABANDONED OR HANGUP OR OPEN LINE	16	911
ABANDONED VEHICLE	1	AVR
ACCIDENT WITH INJURY	1	TAPI
ALARM	4	ALARM
ALCOHOL VIOLATION	1	ALC
ANIMAL COMPLAINT	12	ANM
ASSIST CITIZEN	16	ACIT
ASSIST FIRE OR EMS	11	FAST
ASSIST OTHER JURISDICTION	24	OJUR
BATTERY	1	BAT
BUSINESS CHECK	42	BCK
CHILD OFFENSE	2	CHILD
CIVIL DISPUTE	3	CD
DISORDERLY CONDUCT	3	DC
DISTURBANCE	2	DIST
DRUG OFFENSE	1	DRUG
FAMILY PROBLEM	7	FAM
FOLLOWUP	39	FOL
FOOT PATROL	11	FOOT
HARASSMENT	3	HAR
HAZARDOUS CONDITION	1	HAZC
KID PROBLEM	3	KID
LOUD NOISE	3	LOUD
OPEN DOOR/WINDOW	1	OPEN
OPERATING WHILE INTOXICATED	1	OWI
DUT WITH SUBJECT	3	OWS
PARKING COMPLAINT	25	PARK
PHONE MESSAGE FOR OFFICER	2	PHONE
PROPERTY	1	PROPERTY
SCHOOL PATROL	43	SCHOOL
SECURITY CHECK	344	SECK
SEX OFFENSE	1	SEX
SPECIAL ASSIGNMENT	10	SPAS

Page 1 of 2

This report excludes calls with the following dispostions: ATL, CAN, DUP, INFO, REPO, TEST, TOTO, TEST

Number of CAD Complaints During Period	777	
WELFARE CHECK	8	WELF
WARRANT SERVICE	1	WAR
VEHICLE UNLOCK	3	UNLK
UNWANTED PERSON	2	NOWN
TRESPASSING	1	TRES
TRAFFIC STOP	97	Т
TRAFFIC COMPLAINT	6	TC
TRAFFIC ACCIDENT	5	TA
THREAT	3	THREAT
THEFT	3	THFT
SUSPICIOUS	6	SUSP
SUICIDE	1	SUICIDE
STALLED VEHICLE	3	STALLD

City of Evansville EMS 11 W. Church St. Evansville, WI 53536 (608) 882-2269 Chief Carolyn Kleisch Public Safety Meeting Oct 1st, 2025

1. Calls for Service:

- a. 43 Calls during the month of July 2025 (641-41/642-2)
- b. 61 Calls during the month of July 2024. (641-57/642-4)
- c. To date call volume 2025-517
- d. To date call volume 2024-530

Updates:

- 1- Refresher with Mercy's MD-1 Dr Barney followed by monthly EMS meeting
- 2- Carolyn working with Jason and Julie on Budget for 2026
- 3- EMS office AC unit replaced
- 4- Waiting for the start date from KSW for garage door, hoping for work to start soon.
- 5- Carolyn and Jason met with Shawn Foster for overview of 2026 Ambulance, Keri and Karla sat in on the meeting as well.
- 6- 642's DEF heater went bad, has been replaced
- 7- Classes are going well for those in class currently
- 8- Crew assisted Brooklyn with their Luke Bryan Farm Tour, we sent staff over with FD and also staffed the backup ambulance and responded as a "First in" when they transported out.
- 9- We have been helping the school district with teaching CPR to their coaches and other staff. Planning on more classes in Oct. for them as well as the Health Occ. students

Number of Runs: 43

Avg Unit Notified to Enroute in Minutes: 6.99

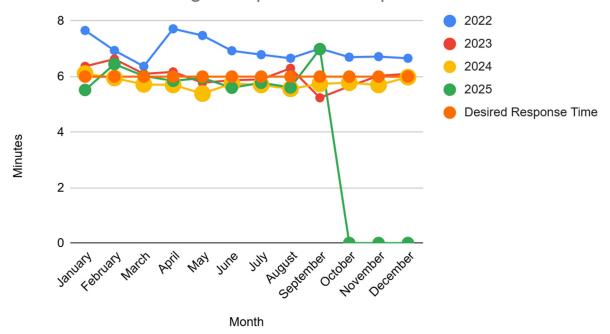
Avg Unit Enroute to Arrived at Scene in Minutes: 3.43

Avg Unit Arrived on Scene to Left Scene in Minutes: 31.43

Avg Unit Left Scene to Arrived at Destination in Minutes: 27.47

Avg Unit Arrived at Destination to Unit Back In Service in Minutes: 92.20

Average Response Times per Month



Falls	8	18.60%
Traffic/Transportation Incident/MVA	6	13.95%
Convulsions/Seizure	5	11.63%
Breathing Problem	5	11.63%
Chronic Illness/Medical Condition	4	9.30%
Chest Pain (Non-Traumatic)	3	6.98%
Motor Vehicle Crash	3	6.98%
Standby	2	4.65%
Sick Person	2	4.65%
Cardiac Arrest/Death	1	2.33%
Invalid Assist/Lifting Assist	1	2.33%
ACIN - Accidental Injury	1	2.33%
Choking	1	2.33%
Hanging	1	2.33%
	Total: 43	Total: 100.00%