

# WINNEBAGO COUNTY LIQUOR LICENSE EMPLOYEE LIST

BUSINESS NAME: _____
BUSINESS ADDRESS: _____
EMPLOYEE'S LIST AS OF _____, _____

Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Length of Residence in Winnebago County \_\_\_\_\_

Position \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

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