Applicant	License Application ()		
Name of Appli	cant: Iowa CVS Pharmacy, L.L.C.			
Name of Business (DBA): CVS/pharmacy #10452				
Address of Premises: 2420 Lincoln Way, #104				
City <u>Ames</u>	County: Story		Zip : <u>50014</u>	
Business	<u>(401) 765-1500</u>			
Mailing	One CVS drive			
City Woonsock	et State <u>RI</u>		Zip: <u>02895</u>	

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Contact Person

Name Cathy Tardie			
Phone: (401) 770-3355	Email	Cathy.Tardie@cvshealth.com	

Classification Class E Liquor License (LE)

Term: 12 months

Effective Date: <u>11/08/2015</u>

Expiration Date:

Privileges:

<u>Class B Wine Permit</u> <u>Class C Beer Permit (Carryout Beer)</u> <u>Class E Liquor License (LE)</u> <u>Sunday Sales</u>

Status of Business

BusinessType: Limited Liability Company						
Corporate ID Number: 00-00-0097 Federal Employer ID 20-4281257						
Ownership						
Thomas Moffatt						
First Name:	<u>Thomas</u>		Last Name:	<u>Moffatt</u>		
City:	<u>Kingston</u>		State:	Rhode Island	Zip:	<u>02881</u>
Position:	President					
% of Ownership	: <u>0.00%</u>		U.S. Citizen: Yes			
Carol DeNale						
First Name:	<u>Carol</u>		Last Name:	<u>DeNale</u>		
City:	Watertow	<u>n</u>	State:	Massachusetts	Zip:	<u>02472</u>
Position:	Senior Vic	<u>Ce</u> /Treasurer				
% of Ownership		/ I roaciiror	U.S. Citizen: Yes			
Melanie Luker						
First Name:	<u>Melanie</u>		Last Name:	<u>Luker</u>		

City:	<u>Cranston</u>	State:	Rhode Island	Zip: <u>02920</u>	
Position:	<u>Secretary</u>				
% of Ownership: <u>0.00%</u>		U.S. Citizen: Yes			
Linda Cimbron					
First Name:	<u>Linda</u>	Last Name:	<u>Cimbron</u>		
City:	Warren	State:	Rhode Island	Zip: <u>02885</u>	
Position:	Assistant Secretary				
% of Ownership: <u>0.00%</u>		U.S. Citizen: Yes			
Jeffrey Clark					
First Name:	<u>Jeffrey</u>	Last Name:	<u>Clark</u>		
City:	<u>Hingham</u>	State:	Massachusetts	Zip: <u>02043</u>	
Position:	Assistant Treasurer				
% of Ownership: <u>0.00%</u>		U.S. Citizen: Yes			
Jason Desrochers					
First Name:	<u>Jason</u>	Last Name:	Desrochers		
City:	Alfred	State:	<u>Maine</u>	Zip: <u>04002</u>	
Position:	Assistant Treasurer				
% of Ownership: <u>0.00%</u>		U.S. Citizen: Yes			

Insurance Company Information

Insurance Company:	Liberty Mutual Insurance Company			
Policy Effective Date:	07/29/2015	Policy Expiration	<u>01/01/1900</u>	
Bond Effective	<u>2</u>	Dram Cancel Date:		
Outdoor Service Effective		Outdoor Service Expiration		
Temp Transfer Effective		Temp Transfer Expiration Date:		