

**Applicant License Application ( LE0003019 )**

<b>Name of Applicant:</b> <u>CASEY'S MARKETING</u>		
<b>Name of Business (DBA):</b> <u>CASEY'S GENERAL STORE #2905</u>		
<b>Address of Premises:</b> <u>3612 STANGE RD</u>		
<b>City</b> <u>Ames</u>	<b>County:</b> <u>Story</u>	<b>Zip:</b> <u>50010</u>
<b>Business</b>	<u>(515) 233-4089</u>	
<b>Mailing</b>	<u>PO BOX 3001</u>	
<b>City</b> <u>ANKENY</u>	<b>State</b> <u>IA</u>	<b>Zip:</b> <u>50021</u>

**Contact Person**

<b>Name</b> <u>JESSICA.FISHER@CASEYS.COM</u>	
<b>Phone:</b> <u>(515) 446-6404</u>	<b>Email</b> <u>JESSICA.FISHER@CASEYS.COM</u>

**Classification** Class E Liquor License (LE)

**Term:**12 months

**Effective Date:** 04/01/2018

**Expiration Date:** 03/31/2019

**Privileges:**

Class B Wine Permit

Class E Liquor License (LE)

**Status of Business**

<b>BusinessType:</b> <u>Publicly Traded Corporation</u>	
<b>Corporate ID Number:</b> <u>XXXXXXXXXX</u>	<b>Federal Employer ID</b> <u>XXXXXXXXXX</u>

**Ownership**

**42-0935283 CASEY'S GENERAL STORE INC**

**First Name:** 42-0935283 **Last Name:** CASEY'S GENERAL STORE, INC.  
**City:** ANKENY **State:** Iowa **Zip:** 50021  
**Position:** OWNER  
**% of Ownership:** 100.00% **U.S. Citizen:** Yes

**Michael Richardson**

**First Name:** Michael **Last Name:** Richardson  
**City:** PLEASANT HILL **State:** Iowa **Zip:** 50327  
**Position:** PRESIDENT  
**% of Ownership:** 0.00% **U.S. Citizen:** Yes

**JOHN SOUPENE**

**First Name:** JOHN **Last Name:** SOUPENE  
**City:** ANKENY **State:** Iowa **Zip:** 50023  
**Position:** VICE-PRESIDENT

**% of Ownership:** 0.00%

**U.S. Citizen:** Yes

**JULIA JACKOWSKI**

**First Name:** JULIA

**Last Name:** JACKOWSKI

**City:** URBANDALE

**State:** Iowa

**Zip:** 50322

**Position:** SECRETARY

**% of Ownership:** 0.00%

**U.S. Citizen:** Yes

**JAMES PISTILLO**

**First Name:** JAMES

**Last Name:** PISTILLO

**City:** URBANDALE

**State:** Iowa

**Zip:** 50323

**Position:** TREASURER

**% of Ownership:** 0.00%

**U.S. Citizen:** Yes

**Insurance Company Information**

<b>Insurance Company:</b> <u>Merchants Bonding Company</u>	
<b>Policy Effective Date:</b> <u>04/01/2018</u>	<b>Policy Expiration</b> <u>01/01/1900</u>
<b>Bond Effective</b> <u>2</u>	<b>Dram Cancel Date:</b>
<b>Outdoor Service Effective</b>	<b>Outdoor Service Expiration</b>
<b>Temp Transfer Effective</b>	<b>Temp Transfer Expiration Date:</b>