



LIQUOR LICENSE APPLICATION

1. Application. **Do not include** any OLCC fees with your application packet (the license fee will be collected at a later time). Application is being made for:

License Applied For:	CITY AND COUNTY USE ONLY
<input type="checkbox"/> Brewery 1 st Location	Date application received:
<input type="checkbox"/> Brewery 2 nd Location	Name of City or County:
<input type="checkbox"/> Brewery 3 rd Location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 1 st location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Brewery-Public House 2 nd location	By: _____
<input type="checkbox"/> Brewery-Public House 3 rd location	Date: _____
<input type="checkbox"/> Distillery	
<input checked="" type="checkbox"/> Full On-Premises, Commercial	
<input type="checkbox"/> Full On-Premises, Caterer	
<input type="checkbox"/> Full On-Premises, Passenger Carrier	
<input type="checkbox"/> Full On-Premises, Other Public Location	
<input type="checkbox"/> Full On-Premises, For Profit Private Club	
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	
<input type="checkbox"/> Grower Sales Privilege 1 st location	
<input type="checkbox"/> Grower Sales Privilege 2 nd location	
<input type="checkbox"/> Grower Sales Privilege 3 rd location	
<input type="checkbox"/> Limited On-Premises	
<input type="checkbox"/> Off-Premises	
<input type="checkbox"/> Off-Premises with Fuel Pumps	
<input type="checkbox"/> Warehouse	
<input type="checkbox"/> Wholesale Malt Beverage & Wine	
<input type="checkbox"/> Winery 1 st Location	
<input type="checkbox"/> Winery 2 nd Location	
<input type="checkbox"/> Winery 3 rd Location	

Rec'd by Portland
Liquor Licenses
JUN 11 2019
PD \$75 clc
1384

OLCC USE ONLY
Date application received: 6/7/19
By: Jon Z.
Date application accepted as initially complete: 6/7/19
By: Jon Z.
License Action(s): C10

2. Identify the applicant(s) applying for the license(s). ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license(s):

Jeffery Munden JPM Enterprises, LLC Pamela Munden
 (Applicant #1) ~ JZ (Applicant #2)

 (Applicant #3) (Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY



LIQUOR LICENSE APPLICATION

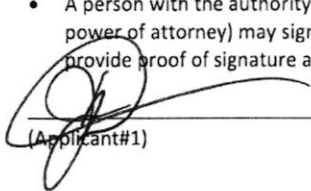
3. Applicant #1 Jeffrey Munden <i>JPM Enterprises, LLC</i>		Applicant #2 Pamela Munden	
Applicant #3 <i>~53</i>		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) Milo's City Cafe			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 1325 NE Broadway Street			
City Portland	County Multnomah	Zip Code 97232	
6. Does the business address currently have an OLCC liquor license? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
7. Does the business address currently have an OLCC marijuana license? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
8. Mailing Address/PO Box, Number, Street, Rural Route (where the OLCC will send your mail) 1135 Ash Street			
City Dayton	State Oregon	Zip Code 97114	
9. Phone Number of the Business Location 503.288-6456		Email Contact for this Application j.munden97@comcast.net	
Contact Person for this Application Jeff Munden		Phone Number 503.467-6932	
Mailing Address 1135 Ash Street	City Dayton	State Oregon	Zip Code 97114

I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is **prohibited** on the licensed premises.

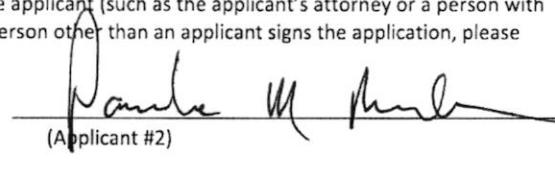
I attest that all answers on all forms, documents, and information provided to the OLCC are true and complete.

Applicant Signature(s)

- Each individual person listed as an applicant must sign the application.
- If an applicant is an entity, such as a corporation or LLC, at least one person who is authorized to sign for the entity must sign the application.
- A person with the authority to sign on behalf of the applicant (such as the applicant's attorney or a person with power of attorney) may sign the application. If a person other than an applicant signs the application, please provide proof of signature authority.



(Applicant #1)



(Applicant #2)

(Applicant #3)

(Applicant #4)

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



SOS-1475971-99

Please Print or Type

LLC Name: JPM Enterprises, LLC Year Filed: 2018

Trade Name (dba): Milo's City Cafe

Business Location Address: 1325 NE Broadway Street

City: Portland ZIP Code: 97232

List Members of LLC:

1. Jeffery Munden
(managing member)
2. Pamela Munden
(members)
- 3.
- 4.
- 5.
- 6.

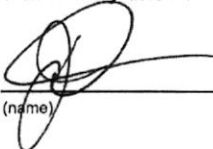
Percentage of Membership Interest:

50
50

(Note: If any LLC member is another legal entity, that entity must also complete an LLC, Limited Partnership or Corporation Questionnaire. If the LLC has officers, please list them on a separate sheet of paper with their titles.)

Server Education Designee: Jeffery Munden DOB: 12/26/1977

I understand that if my answers are not true and complete, the OLCC may deny my license application.

Signature:  (name) member (title) Date: 6/6/19



OREGON LIQUOR CO. ROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: JPM Enterprises, LLC
Jeffery Munden ~52 Phone: 503.288-6456
Trade Name (dba): Milos City Cafe
Business Location Address: 1325 NE Broadway Street
City: Portland ZIP Code: 97232

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 7:30a to 9:30p
Monday 6:30a to 9:30p
Tuesday 6:30a to 9:30p
Wednesday 6:30a to 9:30p
Thursday 6:30a to 9:30p
Friday 6:30a to 9:30p
Saturday 7:30a to 9:30p

Outdoor Area Hours:

Sunday N/A to N/A
Monday N/A to N/A
Tuesday N/A to N/A
Wednesday N/A to N/A
Thursday N/A to N/A
Friday N/A to N/A
Saturday N/A to N/A

The outdoor area is used for: N/A

- Food service Hours: _____ to _____
- Alcohol service Hours: _____ to _____
- Enclosed, how _____

The exterior area is adequately viewed and/or supervised by Service Permittees.

(Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: _____

ENTERTAINMENT

Check all that apply:

- Live Music
- Recorded Music
- DJ Music
- Dancing
- Nude Entertainers
- Karaoke
- Coin-operated Games
- Video Lottery Machines
- Social Gaming
- Pool Tables
- Other: _____

DAYS & HOURS OF LIVE OR DJ MUSIC

N/A
Sunday _____ to _____
Monday _____ to _____
Tuesday _____ to _____
Wednesday _____ to _____
Thursday _____ to _____
Friday _____ to _____
Saturday _____ to _____

SEATING COUNT

Restaurant: 70 Outdoor: N/A
Lounge: N/A Other (explain): N/A
Banquet: N/A Total Seating: 70

OLCC USE ONLY

Investigator Verified Seating: ____ (Y) ____ (N)
Investigator Initials: _____
Date: _____

I understand if my answers are not true and complete, the OLCC may deny my license application.

Applicant Signature: [Signature] Date: 6/6/19

1-800-452-OLCC (6522)
www.oregon.gov/olcc

(rev. 12/07)