





# LIQUOR LICENSE APPLICATION

3. Applicant #1 <i>Tamara C. Kempinski</i>	Applicant #2 <i>MUP &amp; TAX LLC.</i>
Applicant #3	Applicant #4

4. Trade Name of the Business (Name Customers Will See)  
*Club Tease*

5. Business Address (Number and Street Address of the Location that will have the liquor license)  
*4523 NE. 60th Ave.*

City <i>Portland</i>	County <i>Multnomah</i>	Zip Code <i>97218</i>
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6. Does the business address currently have an OLCC liquor license?  YES  NO

7. Does the business address currently have an OLCC marijuana license?  YES  NO

8. Mailing Address/PO Box, Number, Street, Rural Route (where the OLCC will send your mail)  
*4523 NE. 60th Ave.*

City <i>Portland</i>	State <i>OR</i>	Zip Code <i>97218</i>
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9. Phone Number of the Business Location <i>503-283-9111</i>	Email Contact for this Application <i>tammy.kempinski80@gmail.com</i>
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Contact Person for this Application <i>Tamara C. Kempinski</i>	Phone Number <i>360-521-4479</i>
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Mailing Address <i>7719 NE 125th Ave.</i>	City <i>Vancouver</i>	State <i>WA</i>	Zip Code <i>98682</i>
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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.

*Tamara C. Kempinski*  
(Applicant #1)

*Tammy Kempinski*  
(Applicant #2)

(Applicant #3)

(Applicant #4)

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



SOS: 1564947-92

Please Print or Type

LLC Name: MVP & TAX LLC Year Filed: 2019

Trade Name (dba): Club Tease

Business Location Address: 4523 NE 60th Ave

City: Portland ZIP Code: 97218

List Members of LLC:

Percentage of Membership Interest:

- |   |            |
|---|------------|
| 1. <u>Tamara C. Kempinski</u><br><small>(managing member)</small> | <u>98%</u> |
| 2. <u>Alyssa J. Kempinski</u><br><small>(members)</small>         | <u>1%</u>  |
| 3. <u>Xavier T. Pitre</u>   | <u>1%</u>  |
| 4. _____  | _____      |
| 5. _____  | _____      |
| 6. _____  | _____      |

(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: Tamara C. Kempinski DOB: 01-12-1980

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

Signature: Tamara C. Kempinski (name) managing member (title) Date: 7-8-19