

Wauwatosa, WI Government Affairs Committee Meeting Agenda - Final-revised

Tuesday, October 21, 2025
6:00 PM Common Council Chambers and Zoom: https://servetosa.zoom.us/j/86222394038,
Meeting ID: 862 2239 4038

Regular Meeting

HYBRID MEETING INFORMATION

Members of the public may observe and participate in the meeting in-person or via Zoom at the link above. To access the Zoom meeting via phone, call 1-312-626-6799 and enter the Meeting ID.

CALL TO ORDER

ROLL CALL

GOVERNMENT AFFAIRS COMMITTEE ITEMS

1.	Consideration of application for a new Class "B" Beer and Reserve "Class B" Liquor license by Nordstrom, Inc., d/b/a Nordstrom Marketplace Café, 2424 N. Mayfair Road, Veronica Jenquine - Agent, for the period ending June 30, 2026	<u>25-1667</u>
2.	Consideration of Common Council proclamation recognizing the extraordinary response of City of Wauwatosa employees to the August 2025 storm and flood	<u>25-1924</u>
3.	Consideration of Common Council proclamation recognizing Amanda Saso for her protection of the Little Red Store in the August 2025 storm and flood	<u>25-1972</u>
4.	Review and consideration of approval of the 2026 Common Council Meeting Calendar	<u>25-1292</u>
5.	Discussion and consideration of establishing polling place sites for the City of Wauwatosa	<u>25-1832</u>
6.	Discussion and consideration of Common Council compensation for 2026 and 2028	<u>24-1414</u>
7.	Consideration of proposal by Alderperson Arney relative to implementing a new Wauwatosa design element	<u>24-0967</u>

ADJOURNMENT

NOTICE TO PERSONS WITH A DISABILITY

Persons with a disability who need assistance to participate in this meeting should call the City Clerk's office at (414) 479-8917 or send an email to tclerk@wauwatosa.net, with as much advance notice as possible.



Wauwatosa, WI

7725 W. North Avenue Wauwatosa, WI 53213

Staff Report

File #: 25-1667 Agenda Date: 10/21/2025 Agenda #: 1.

Consideration of application for a new Class "B" Beer and Reserve "Class B" Liquor license by Nordstrom, Inc., d/b/a Nordstrom Marketplace Café, 2424 N. Mayfair Road, Veronica Jenquine - Agent, for the period ending June 30, 2026

Submitted by:

Zach Kessler, Interim City Clerk

Department:

City Clerk

A. Issue

Nordstrom, Inc., d/b/a Nordstrom Marketplace Café, has applied for a new retail Class "B" Beer and Reserve "Class B" Liquor license for the 2025-2026 license period for the premises located at 2424 N. Mayfair Road.

B. Background/Options

Nordstrom, Inc. intends to reopen the Nordstrom Marketplace Café located inside the Nordstrom retail store within Mayfair Mall. The restaurant will be located within the store and will serve food and alcoholic beverages for guests to consume throughout the property. Nordstrom intends to operate the restaurant from 11:00 AM to 5:00 PM, Sunday through Saturday. More information can be found in the application materials included in the agenda packet.

Background checks were conducted on the Agent, Veronica Jenquine, and six corporate officers of Nordstrom, Inc. No violations substantially related to licensing activities were found. The Agent meets all other qualifications of Wis. Stat. Ch. 125.

The City currently has three available Reserve "Class B" Liquor licenses.

C. Department Reviews

Police: No concerns. Fire: No issues. Health: No issues.

Development: No issues. Attorney: No issues.

Finance: No outstanding taxes or bills.

File #: 25-1667 Agenda Date: 10/21/2025 Agenda #: 1.

D. Recommendation

I recommend the Common Council grant a new Class "B" Beer and Reserve "Class B" Liquor license to Nordstrom, Inc., d/b/a Nordstrom Marketplace Café, for the period ending June 30, 2026, for the premises located at 2424 N. Mayfair Road, with Veronica Jenquine as the appointed agent.

Form AB-200

Alcohol Beverage License Application

	For	Municipa	Use	Only	
Municipa	hily				
License	Релі	bd			

AB-200			License Period					
License(s) Reques	sted: (up to two boxes may	be checked)			Fees			
Class "A" Beer .	\$ Z			s				
☐ "Class A" Liquor	\$ E	"Class B" Liquor	\$		nd Check Fee			
Class A" Liquor	(cider only) \$			Publicatio		s		
	(wine only) \$	•						
				Total Fee	B	\$		
Part A: Premise	s/Business Information	1		·				
1. Legal Business Na	me (individual name if sole prop	rielorship)						
Nordstrom,	Inc.							
2. Business Trade Na	ime or DBA							
Nordstrom	Marketplace Cafe							
3. FEIN		4. Wisc	consin Seller's Pe	rmit Number				
91-0515058								
5. Entity Type (check	· _	C Constant Cabilly Con-	🗆 🗆	415				
Sole Proprie		Limited Liability Comp	any 🛂 Co	orporation		ofit Organization		
	UII	7. Date of Organization			n DFI Registration	on Number		
9. Bramises Address								
	Mayfair Road			44 60.4	140 7/2 02-22			
10. City				11 State	12. Zip Code			
Wauwatosa 13. County		44 (0. 1.1.1.14)	7 - 10 10 10 10	MI	53226 15. Aldermani	n Denterat		
123		 Governing Municipality: [of: Wauwatosa 	City Town	∐ Village	15. Alueimani	COSTICE		
Milwaukee			*****	146.145	4 - 14 -			
(414) 203-	i	17. Premises Email		18. We	DSITE			
		restlic@nordstro					_	
are kept. Describ	ntion - Describe the building or b e all rooms within the building, in ises described in this application	ncluding living quarters. Autho	rized alcohol beve	erage activiti	es and storage o	and related record records may occ	rds cur	
Respectfully req patio space, wit	thed Plan of Operation & questing whole store perm th alcohol being sold fro I-party service provider	ission for alcohol cons m within the Nordstrom	umption, incl Marketplace C	uding with afe. All	in the full- alcohol purc	railed outdoor hased through	г	
20. Mailing Address (i	f different from premises addres	35)						
Attn: Res	staurant Licensing	g, 1600 7th Avenu	e, Suite	2500				
21. Cily				22. State	23. Zip Code			
Seattle				AW	98101			
Part B: Question	ns							
Has the business violating federal	s (sole proprietorship, partne or state laws or local ordinar	rship, limited liability comp nces? Exclude traffic offens	any, or corpora es unless relate	tion) been o	convicted of of beverages.	Yes 🗸 I	No	
If yes, list the de	lails of violation below, Attac	h additional sheets if neces	sary.					
Law/Ordinance Violati	ed	Location		T	rial Date		_	
N/A								
Penalty Imposed			Was sen	tence comp	oleted?	Yes I	No	
Law/Ordinance Violate	ed	Location		Т	rial Date			
Penalty Imposed	- · · · · · · · · · · · · · · · · · · ·		Was sen	tence comp	oleted?	Yes	No	
AB-200 (R. 1-25)		~ 1=			Mare	onsin Degarlment of Re		

Are charges for any offenses per beverages.	nding against the business? Ex	kclude traffic offenses	unless related to alc	ohol	Yes	✓ No
If yes, describe the nature and st	atus of pending charges using	the space below. At	ach additional sheets	as needed		
Is the applicant business or any individuals or entities a restricted	of its officers, directors, mem	bers, agent, employe an alcohol beverage	es, owners, or other producer or distribut	related	Yes	√ No
If yes, provide the name of the re						
Is the applicant business owned	by another business entity?			[7]	Yes	□ No
If yes, provide the name(s) and F	EIN(s) of the business entity of	wners below. Attach	additional sheets as i	needed.		
4a. Name of Business Entity	-	4b. Business Entity F				
Nordstrom Holdings,		33-243346		4.4		
Have the partners, agent, or sole this license period? Submit proof		nsible beverage serve	er training requiremen		Yes	☐ No
6. Is the applicant business indebte	d to any wholesaler beyond 19	days for beer or 30	days for liquor/wine?.	, ,	Yes	✓ No
7. Does the applicant business owe	past due municipal property t	axes, assessments,	or other fees?		Yes	✓ No
Part C: Individual Information						
List the name, tille, and phone number for Question 4: sole proprietor, all officers, di managers, and agent of a limited liability	firectors, and agent of a corporation	on or nonprofit organizat				
fnclude Form AB-100 for each person lis	ted below. Corporations and LLC	s must appoint an agen	t by including Form AB-	101.		
Last Name	First Name	Title		Phone		-
Jenquine	Veronica	Agent		(415)	794	-9904
Nordstrom	Erik	Direc	ctor & Co-CEO	(206)	373	-4025
Nordstrom	Peter	Co-CE	0	(206)	373	-4070
Steines	Ann	Corp	Secretary	(206)	373	-2141
Part D: Attestation	3/19/01/18					
One of the following must sign and a	, the contract of the contract					
	eneral partner of a partnership			member o		
READ CAREFULLY BEFORE SIGNING I am acting solely on behalf of the appli- rights and responsibilities conferred by according to the law, including but not it to any portion of a licensed premises of	cant business and not on behalf of the license(s), if granted, will not imited to, purchasing alcohol bev	of any other individual of be assigned to another rerages from state auth	or entity seeking the lice individual or entity. I a orized wholesalers. I un	nse. Further gree to opera derstand th	, I agre ate this at lack	e that the business of access
revocation of this license. I understand understand that I may be prosecuted for ingly provides materially false information	that any license issued contrary submitting false statements and	to Wis. Stat. Chapter 1 affidavits in connection	25 shall be void under with this application, an	penalty of st d that any p	ate lav	/ I further
Last Name	Firs	Name			M.L	
Steines	An	n				М
Title Chief Legal Officer, General Counsel (Corn Secretary Email			Phone		
Signatuo:	restlic	@nordstrom.co		(206)	373-	2141
	1	Dale	9.29.25			
Part E: For Cleak			41.63			
Date Application Was Filed With Clerk	License Number	Da	te License Granted	Date Lice	150 155	ned
Signature of Clerk/Deputy Clerk			Date Provisional L	icense Issue	ed (if a	oplicable)
8-200 (R 1-25)		2 -				
		-				

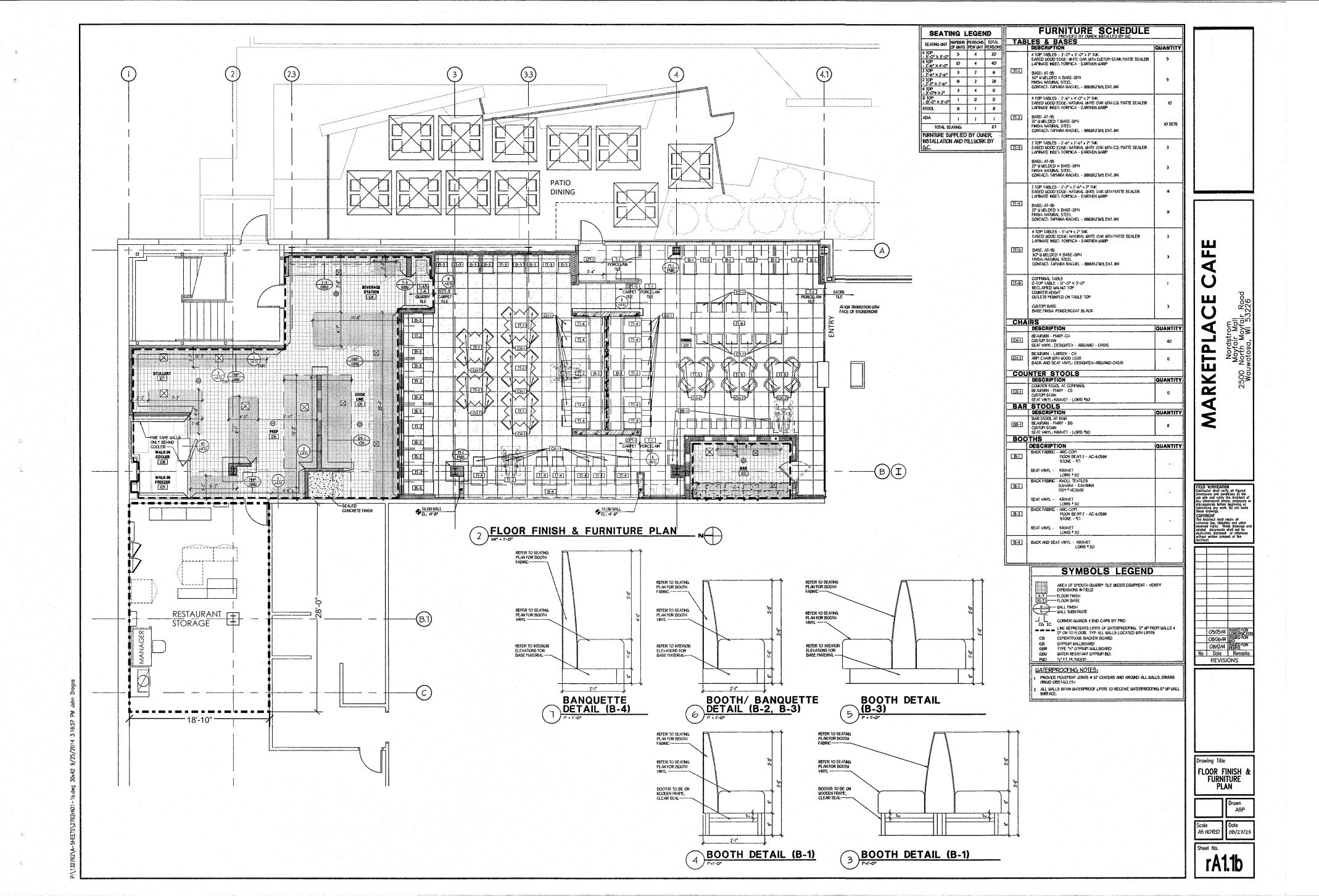
ab-2007.pdf 2 9/24/2025 11:13-92.AA

Are charges for any offenses per beverages.	inding against the business	s? Exclude traffic	offenses unle	ess related to alco	ohol . TY	es 📝 No
If yes, describe the nature and s	status of pending charges (using the space b	elow Attach	additional sheets	as needed	
Is the applicant business or any individuals or entities a restricte						es 🗸 No
If yes, provide the name of the						
4. Is the applicant business owned						es 🖺 No
If yes, provide the name(s) and 4a. Name of Business Entity	FEIN(s) of the business en		v. Attach addi	tional sheets as r	needed	
Nordstrom Holdings,	Inc		433467			
Have the partners, agent, or sok this license period? Submit proo	e proprietor satisfied the re	esponsible bevera	age server tra			es 🗍 No
6. Is the applicant business indebte					_	
7. Does the applicant business ow		•	-			- البني
Part C: Individual Information						
List the name, title, and phone number		ling the following po	sitions in the a	policant business o	r businesses lis	ited in Part B.
Question 4: sole proprietor, all officers, managers, and agent of a limited liabilit	directors, and agent of a corp ly company. Attach additional	oration or nonprofit sheets if necessary	organization, a	all partners of a part	tnership, and al	I members,
Include Form AB-100 for each person to Last Name	sted below. Corporations and First Name	d LLCs must appoir	t an agent by i	ncluding Form AB-1	Phone	
					1	22 6004
Mulligan	Rebecca		VP Rest	aurant Ops	(917) 7:	33-6094
Part D: Attestation					0.400	
One of the following must sign and	atlest to this application:					
	general partner of a partne	ership • on	e corporate o	fficer • one	member of a	n LLC
READ CAREFULLY BEFORE SIGNIN I am acting solely on behalf of the applinghts and responsibilities conferred by according to the law, including but not to any portion of a licensed premises of revocation of this license. I understand understand that I may be prosecuted for ingly provides materially false informat	licant business and not on be the license(s), if granted, wil limited to, purchasing alcoho furing inspection will be deem d that any license issued con or submilling false statements	shalf of any other in il not be assigned to be beverages from a ned a refusal to allo strary to Wis. Stat. 4 a and affidavits in co	dividual or ento another individual state authorized w inspection, the Chapter 125 stonnection with	ity seeking the lice dual or entity. I ag d wholesalers. I un Such refusal is a m hall be void under p this application, an	nse Further, I a gree to operate derstand that la isdemeanor an penalty of state d that any persi	agree that the this business ack of access d grounds for law, I further
Last Name		First Name			,	A,I.
Steines		Ann	11 CS-1500 C			М
litte hief Legal Officer, General Counsel (& Corp. Secretory				Phone	2 21 41
Signeture:	rest	lic@nordst:	Date		(206) 37	3-2141
9	Earn-		9	. 29.25		
Part E: For Clerk ase Only		20 100-000-000-000-000-000-000-000-000-00	12		In	
Date Application Was Fried With Clerk	License Number		Date Lic	ense Granted	Date License	Issued
Signature of Clerk/Deputy Clerk				Date Provisional L	icense Issued (il applicable)
B-200 (R 1-25)		-2-				

ab-200f_extra officers.pdf 1

BUSINESS PLAN OF OPERATION FOR NORDSTROM, INC. LOCATION AT 2424 NORTH MAYFAIR ROAD, WAUWATOSA, WISCONSIN

- 1. <u>Proposed Use</u>. Nordstrom, Inc. ("Nordstrom") is located at 2424 North Mayfair Road, (the "Property"), in the City of Wauwatosa, Wisconsin (the "City") and desires to reopen a restaurant named Nordstrom Marketplace Cafe ("Restaurant") within Nordstrom ("Department Store").
- 2. <u>Activities</u>. The Restaurant will be located within the store and will serve food and alcoholic beverages for guests to consume throughout the Property.
- 3. <u>Outside Activities/Storage</u>. Nordstrom does intend to conduct outside activities on the Property. These outside activities include the guests consuming food and beverages (alcoholic & non-alcoholic) in the outdoor seating area. This area is completely enclosed by a railing. There is no outdoor storage planned on the Property.
- 4. <u>Hours of Operation</u>. Nordstrom intends to operate the Restaurant from 11A-5P Sunday-Saturday.
- 5. <u>Number of Employees and Parking Provisions</u>. Nordstrom anticipates that approximately 15 employees will work at the Restaurant. With the recent hire of Veronica Jenquine as General Manager, Nordstrom is actively recruiting for all other front of house and back of house positions.
- 6. <u>Alcohol Invoices</u>. Nordstrom utilizes Fintech, a third-party service provider, for alcohol ordering, payment of invoices, and record retention, per regulatory requirements.

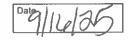


Mayfair - Store 282

Catego	ry Menu Item	T1 Price	2				
Starte	rs			Categ	ory	Menu Item	T1 Price
	Roma Tomato Basil Sou	p Cup	\$5.75	Wine			
	Rustic Cheddar Chive Bi	scuit	\$3.25		Ruffin	o Prosecco	\$13.00
	Heirloom Tomatoes & B	urrata	\$12.00		Kim C	rawford Sauvign	on Blanc
	Cilantro Lime Chicken Ta	acos	\$18.00				\$13.00
	Salt & Pepper Crush Fre	nch Frie	S		Mimi	Chardonnay	\$13.00
					Calafu	ıria Rose	\$15.00
\$8.00					Erath	Pinot Noir \$14.0	00
Salads					Mimi	Cabernet	\$14.00
	Wild Salmon Nicoise	\$24.00					
	Honey Dijon Cobb	\$15.00		Beer			
	Cilantro Lime	\$15.0	0		Beer #	‡1	\$5.50
	Ginger Sesame	\$15.0	0		Beer #	‡2	\$5.50
	Little Gem Caesar	\$15.00			Beer #	‡ 3	\$5.50
	Chicken Add-on \$6.00						
	Salmon Add-on (4oz)	\$10.00		Cockt	ails		
Sandw	iches				Kiss N	ly Cranberries	\$17.00
	Roasted Turkey & Avoca	ido Club			Cranb	erry Bliss \$17.0	00
		\$18	3.00		Nordy	Margarita Margarita	\$17.00
	Nordstrom Burger	\$18.75			Mosco	ow Mule	\$16.00
	French Dip	\$20.0	0		Espres	sso Martini	\$17.00
Kids					Frencl	h 75	\$16.00
	Buttered Noodles	\$9.75					
	Macaroni & Cheese	\$10.50					
	Grilled Cheese & Soup	\$12.00					
	Chicken Tenders	\$12.00					
	Seared Wild Salmon	\$16.00					
	Roasted Chicken Breast	•					
	6oz Gluten Free Penne	\$-					
Desser							
	Royale Cookie		\$3.50				
	Chocolate Chunk Cookie		\$3.50				
	Snickerdoodle Cookie	•					
	Oatmeal Raisin Cookie	\$3.50					
	Tillamook Ice Cream		\$4.00				

Form AB-101

Alcohol Beverage Appointment of Agent

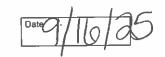


Agent Type (check one)				
☑ Original (no fee) ☐ Successor (\$10 fee for mo	unicipal licen	sees only)		
Part A: Business Information				
Legal Business Name (individual name if sole proprietor)	•			
Nordstrom, Inc.				
2. Business Trade Name or DBA				,
Nordstrom Marketplace Cafe				
B. Entity Type (check one)			· · · · · · · · · · · · · · · · · · ·	
Limited Liability Company		Corporation	☐ Nonprofit Organ	
Alcohol Beverage Business Authorization (check one) Municipal Retail License	5. If successo N/A	r agent, provide Sta	ate Permit or Municipal Retail	License Number
. Describe the reason for appointing a successor agent, if successor N/A				
Part B: Agent Information				To MI
	2. First Name			3. M.I.
Jenquine	Veroni	ca 		E
. Email			5. Phone	
			(415)	794-9904
. Home Address				
				<u></u>
. City	8. State	9. Zip Code	10. Date of B	irth
4 Di an Liana (Olata ID Namba)		12 Drivere Lie	ense/State ID State of Issuan	ce
Drivers License/State ID Number		12. Dilveis Lic	Eliserotate ib otate or issuari	
			<u> </u>	
Part C: Agent Questions				
 Have you satisfied the responsible beverage server training Submit proof of completion. 	ng requireme	nt?		Yes No
2. Have you completed Form AB-100, Alcohol Beverage Indi Form AB-300, Alcohol Beverage Personal Questionnaire (ividual Ques (permittee)?	tionnaire (license	e) or	Yes No
, oiii, ib oco, i noono. Borolego i oleoner quoenement				
3. Have you been a Wisconsin resident for at least 90 contin See instructions for exceptions.	uous days?			Yes No

Part D: Business Attestation							
READ CAREFULLY BEFORE SIGNING: I, the corporation, nonprofit organization, or limited beverage activities on such premises. I certified on behalf of the entity. If I am appointing a sulfunderstand that I may be prosecuted for sulfunderstand that I may be provided materially if convicted.	d liability com fy that I am a uccessor ager ibmitting false	npany with full authority and cor nuthorized by the above-named nt, I rescind all previous agent a e statements and affidavits in co	ntrol of the preentity to auth prointments nection with	remises and of all alcohol orize this individual to act for this premises. Further, a this application, and that			
Last Name		First Name		M.I.			
Mulligan		Rebecca		K			
Title	Email			Phone			
VP Restaurant Operations	becky.m	ulligan@nordstrom.co	om	(917) 733-6094			
Signature Date 9/22/2025							
Part E: Agent Attestation							
READ CAREFULLY BEFORE SIGNING: I, the nonprofit organization, or limited liability come on the premises for the above-named busin and affidavits in connection with this application may be required to forfeit not more	pany and ass ess. I further ion, and that	sume full responsibility for the co understand that I may be pros any person who knowingly provi	ecuted for su	alcohol beverage activities ubmitting false statements			
Last Name		First Name		M.I.			
Jenquine,		Veronica		E			
Signature			Date	(/ a =			

Form AB-100

Alcohol Beverage Individual Questionnaire



All individuals involved in the alcohol beverage business must complete this form, including:

sole proprietor

- all officers, directors, and agent of a corporation or nonprofit organization
 members and agent of a limited liability company
- · all partners of a partnership

Your alcoh	nol beverage applicat	tion or renew	al is not complete	until a	III require	d Individual Questionna	ires are	submitted.	
Part A:	Business Informa	ition							
1. Legal B	usiness Name (individu	al name if sole	proprietor)						
Nord	strom, Inc.								
2. Busines	s Trade Name or DBA								
Nord	strom Marketp	lace Car	fe					<u></u>	
-	ype (check one)								4 45
☐ Sol	e Proprietor 🔲	Partnership	Limited L	iability	Company	/ ✓ Corporation	<u></u>	Nonprofit O	ganization
Part B:	Individual Inform	ation			<u></u>				
1. Last Na	me		·	2. Firs	t Name				3. M.I.
Jenq	uine			Ve	ronica	ı			E
4. Relation	nship to Business (Title)		5. Email					Phone	
Gene	ral Manager						4	<u> </u>	
7. Home A	Address								
8. City				9). State	10. Zip Code	1	11. Date of Bi	rth
200									
12. Driver	s License/State ID Num	ber				13. Drivers License/State	: ID State	of Issuance	
						<u> </u>			
	<u></u>								
Part C:	Address History				-				
		consin?						···· 🚺 `	Yes No
,	•							[/MA	M/YYYY)
If yes,	provide the month a	nd year wher	n you permanently	moved	d to Wisco	onsin		Ι,	06/2008
	 								00/2000
2. List in	chronological order	all of your ad	dresses within the	last 5	years. Att	ach additional sheets if i	,		
Previous	Address 1			City			State	Zip Code	- 10
Previous	Address 2			City			State	Zip Code	
Previous	Address 3			City	_	-	State	Zip Code	
[
Previous	Address 4			City			State	Zip Code	•
Previous	Address 5			City			State	Zip Code	•
3 Lieta	Il states and counties	vou have liv	ed in as an adult <i>i</i>	Attach	additional	sheets if necessary.			
			County	12000011	State	County	State	County	
State	County	State	· ·			San Francisco		,	
WI	Milwaukee	AZ State	Maricopa County		CA State	County	State	County	
State	County	State	County						

Continued →

			1.635
Part D: Criminal History			
 Have you ever been convicted of any offenses (exclude for violation of any federal, Wisconsin, or another state 			
If yes to question 1, please list details of each conviction	on below. Attach additi	ional sheets as needed.	
Law/Ordinance Violated	Location		Conviction Date
DUI	Milwaukee Co	unty	07/16/2016
Penalty Imposed		1	
paid fine & 1 yr license suspensio	n	Was sentence completed?	Yes No
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence completed?	. ☐ Yes ☐ No
		Trad definence completed:	
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence completed?	Yes No
ordinances?	nding charges using t	he space below. Attach additiona	al
Donat Mr. Association	500		
Part E: Attestation	<u> </u>		
READ CAREFULLY BEFORE SIGNING: Under pena truthfully. I certify that I am not prohibited from particip beverage industry as a restricted investor. I understand under penalty of state law. I further understand that I may with this application, and that any person who knowing to forfeit not more than \$1,000 if convicted.	ating in this business at that any license iss by be prosecuted for s	due to any involvement in anoth sued contrary to Wis. Stat. Chap ubmitting false statements and af	ner tier of the alcohol- iter 125 shall be void fidavits in connection



awarded to

Veronica Jenquine

This certificate represents the successful completion of an approved Wisconsin Department of Revenue Responsible Beverage Server Course in compliance with secs. 125.04(5)(a)5., 125.17(6), and 134.66(2m), Wis. Stats.

www.Wisconsin-Bartending.com

Training Provider

09/16/2025

Training Date

Form		
Α	B-1	00

Alcohol Beverage Individual Questionnaire

Date	
Date	
1	

All individuals involved in the alcohol beverage business must complete this form, including:

sole proprietor

- all officers, directors, and agent of a corporation or nonprofit organization
 members and agent of a limited liability company
- · all partners of a partnership

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted

Nord	strom, Inc							
2. Busine:	ss Trade Name or E	BA						
Nord	lstrom Mark	etplace Cai	ie .					
3. Entity T	ype (check one)							
☐ So	le Proprietor	Partnership	Limited L	iability	/ Compan	y Corporation	1 🔲	Nonprofit Organization
Part B:	Individual Info	ormation	LUL EMES		SAME I		in a s	10 重型 10 00 10 00
1. Last Na	ame	-		2. Fir	st Name		•	3. M.L.
Stei	nes			Aı	nn			M
4. Relation	nship to Business (Title)	5. Email				6	. Phone
CLO,	Gen Counse	l & Corp Se	ec E					
7. Home /	Address							
8. City				!	9. State	10. Zip Code	1	1. Date of Birth
23								<u> </u>
12. Driver	s License/State ID	Number				13. Drivers License/Stat	te ID State	of Issuance
Part C:	Address Histo	ory			all Tyles	Mar Sept Market	VLO 540	
							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes No
,.								10 (14:5)
If yes,	, provide the mon	th and year when	you permanently	move	d to Wisc	onsin		(MM/YYY)
2. List in	chronological or	der all of your add	Iresses within the	last 5	years. Att	tach additional sheets if	necessar	у.
Previous	Address 1			City		·	State	Zip Code
Previous	Address 2		•	City			State	Zip Code
Previous	Address 3			City			State	Zip Code
Previous /	Address 4			City			State	Zip Code
				´				
Previous a	Address 5			City	•	<u> </u>	State	Zip Code
3. List al	II states and coun	ties you have live	ed in as an adult.	Attach	additiona	I sheets if necessary.		
State	County	State	County		State	County	State	County
WA	King	ОН	Hamilton		KY	Kenton	VA	City-Richmond
State	County	State	County		State	County	State	County
VA	Henrico	wı	Milwaukee		CA	Los Angeles	DC	Washington
			·					
								Continued —

Form **AB-100**

Alcohol Beverage Individual Questionnaire

Date		

All individuals involved in the alcohol beverage business must complete this form, including:

sole proprietor

- all officers, directors, and agent of a corporation or nonprofit organization
 members and agent of a limited liability company
- · all partners of a partnership

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Bu	siness Informa	tion		W IIEE	Market I		¥ 1847 1	
_	ess Name (individua	I name if sole	proprietor)					
_ Nordst:	rom, Inc.							
2. Business Tr	ade Name or DBA				•			
Nordst:	rom Marketp	lace Ca	fe					
3. Entity Type Sole P		Partnership	☐ Limited	Liability	Compan	y 🗸 Corporat	tion 🔲 🗈	Nonprofit Organization
Part B: Ind	ividual Informa	ition		1111/4			GILLIAN A	and the second
1. Last Name				2. Firs	st Name			3. M.I.
Steine	S			Ar	n			M
4. Relationship	to Business (Title)		5. Email			470	6	i. Phone
7. Home Addre	988		<u> </u>					
8. City				1	9. State	10. Zip Code	1	1. Date of Birth
12. Drivers Lic	ense/State ID Numb	er				13. Drivers License/State ID State of Issuance		
1. Do you cu	·							(MMAXXXXX
						onsin		
2. List in chr	onological order a	l of your add	dresses within the	last 5	years. Att	ach additional shee	ts if necessar	
Previous Addr	ess 1		-	City			State	Zip Code
Previous Addr	ess 2			City			State	Zip Code
Previous Addr	ess 3			City			State	Zip Code
Previous Addr	ess 4			City			State	Zip Code
Previous Addr	ess 5			City			State	Zip Code
3. List all sta	tes and counties y	ou have live	ed in as an adult.	Attach	additiona	sheets if necessary	y	
	unty	State	County		State	County	State	County
	ompkins unty	State	County		State	County	State	County

Continued →

Part D: Criminal History			
Have you ever been convicted of any offenses (exclude for violation of any federal, Wisconsin, or another state)			
If yes to question 1, please list details of each convict	ion below. Attach additi	onal sheets as needed.	
Law/Ordinance Violated	Location		Conviction Date
N/A			
Penalty Imposed		Was sentence completed?	. Yes No
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence completed?	. Yes No
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence completed?	. Yes No
If yes to question 2, describe nature and status of pesheets as needed. N/A			
Part E: Attestation			
READ CAREFULLY BEFORE SIGNING: Under penatruthfully. I certify that I am not prohibited from particip beverage industry as a restricted investor. I understar under penalty of state law. I further understand that I may with this application, and that any person who knowing to forfeit not more than \$1,000 if convicted.	pating in this business and that any license issua ay be prosecuted for su	due to any involvement in anothe ued contrary to Wis. Stat. Chapte bmitting false statements and affi false information on this applicati	er tier of the alcohol er 125 shall be void davits in connection
Signature		9.22.2	5

Form AB-100

Alcohol Beverage Individual Questionnaire

Date		

All individuals involved in the alcohol beverage business must complete this form, including:

· sole proprietor

- all officers, directors, and agent of a corporation or nonprofit organization
- · all partners of a partnership
- · members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A:	Business Info	rmation						
1. Legal E	Business Name (ind	ividual name if sol	e proprietor)					
Nord	lstrom, Inc							
2. Busine:	ss Trade Name or (DBA						
Nord	lstrom Mark	etplace Ca	fe					
3. Entity T	Type (check one)							
☐ So	le Proprietor	Partnership	Limite	d Liability	Compar	y Corpor	ation 🔲 N	Ionprofit Organization
Part B:	Individual Info	ormation				A 2 3 1 3		
1. Last Na	ame			2. Firs	st Name	_		3. M.I.
Mull	igan			Re	becca			K
4. Relatio	nship to Business (Title)	5. Email				6	. Phone
VP,	Restaurant	Operation	s					
7. Home /	Address							
8. City				(State	10. Zip Code	1	1. Date of Birth
12. Driver	rs License/State ID	Number				13. Drivers Licens	se/State ID State	of Issuance
						_		
Part C:	Address Histo	nrv			# 1			
							and the second s	☐ Yes ✓ No
1. DO 90	ou currently live in	I VVISCOTISITI?						
If yes	, provide the mon	ith and year whe	n you permanen	itly moved	d to Wisc	onsin		(MM/YYYY)
2. List in	chronological or	der all of your ad	dresses within t	the last 5	years. At	tach additional she	ets if necessar	y.
Previous	Address 1			City			State	Zip Code
Previous	Address 2			City			State	Zip Code
Previous	Address 3			City			State	Zip Code
Previous	Address 4			City			State	Zip Code
Previous	Address 5			City			State	Zip Code
0 1:-4-				14 . A 44 1-		I also at SE and a second		
				it. Attach		I sheets if necessa	<u> </u>	
State	County	State	County		State	County	State	County
WA	King	NJ	Essex					
State	County	State	County		State	County	State	County
								O-mil t
								Continued →

AB-100 (R. 1-25)

Wisconsin Department of Revenue

Part D: Criminal History				W
Have you ever been convicted of any offenses (exclude for violation of any federal, Wisconsin, or another state)			. Yes	✓ No
If yes to question 1, please list details of each conviction	on below. Attach additi	onal sheets as needed.		
Law/Ordinance Violated	Location		Conviction	Date
N/A				
Penalty Imposed		Was sentence completed?	. Yes	☐ No
Law/Ordinance Violated	Location		Conviction	Date
Penalty Imposed		Was sentence completed?	. Yes	☐ No
Law/Ordinance Violated	Location	8	Conviction	Date
Penalty Imposed		Was sentence completed?	. Yes	☐ No
If yes to question 2, describe nature and status of pe sheets as needed. N/A	nding charges using the	ne space below. Attach additional		
Part E: Attestation				- 100
READ CAREFULLY BEFORE SIGNING: Under penal truthfully. I certify that I am not prohibited from particip beverage industry as a restricted investor. I understand under penalty of state law. I further understand that I may with this application, and that any person who knowing to forfeit not more than \$1,000 if convicted. Signature	ating in this business ad that any license issual by be prosecuted for su	due to any involvement in anothe ued contrary to Wis. Stat. Chapte bmitting false statements and affic	er tier of the er 125 shall davits in cor	alcohol be void nnection

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Alcohol Beverage Individual Questionnaire

Date		

All individuals involved in the alcohol beverage business must complete this form, including:

- all officers, directors, and agent of a corporation or nonprofit organization
 members and agent of a limited liability company
- sole proprietorall partners of a partnership

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A:	Business Info	rmation					S 11	
1. Legal B	lusiness Name (ind	lividual name if sole	proprietor)					
Nord	strom, Inc	•						
2. Busines	ss Trade Name or I	DBA						
Nord	strom Mark	etplace Ca	fe					
	ype (check one)					_		
Sol	le Proprietor	☐ Partnership	Limited	I Liability	/ Compar	y 🔽 Corpora	ation N	onprofit Organization
Part B:	Individual Info	ormation					11881	11
1. Last Na	ame			2. Fir	st Name			3. M.I.
Nord	lstrom			E:	rik	_		В
4. Relation	nship to Business (Title)	5. Email				6.	Phone
Dire	ctor & Co-	CEO					,	
7. Home A	Address							
								_
8. City					9. State	10. Zip Code	11	, Date of Birth
							,	
12. Driven	s License/State ID	Number				13. Drivers Licens	e/State ID State of	of Issuance
Part C:	Address Histo	ory						
1. Do yo	u currently live in	Wisconsin?						Yes 🗸 N
								(MM/YYYY)
If yes,	, provide the mon	ith and year whe	n you permanent	tly move	d to Wisc	onsin		
0 1:-4:-		alaa alk afaa ad	danana within th	l4 C		toch odditional abo	-4- 16	
		der all of your ad	dresses within tr		years. At	tach additional she		
Previous /	Address 1			City			State	Zip Code
Previous /	Address 2			City			State	Zip Code
-			<u> </u>					
Previous /	Address 3			City			State	Zip Code
Previous /	Address 4			City			State	Zip Code
								7: 0: 1:
Previous /	Address 5			City			State	Zip Code
								
3. List al	II states and cour	nties you have liv	ed in as an adulf	t. Attach	additiona	I sheets if necessa	ry.	
State	County	State	County	-	State	County	State	County
	King	5,778	Pierce					
WA		WA.						
WA State	County	WA State	County		State	County	State	County
					State	County	State	County

Continued →

 Have you ever been convicted of any offer for violation of any federal. Wisconsin. or a 	anna favaluata a també a Ministra	a contant so that the contant	
, , , , , , , , , , , , , , , , , , , ,		es uniess related to alconol beverag county or municipal ordinances?	
If yes to question 1, please list details of e	ach conviction below. Attach	additional sheets as needed.	
Law/Ordinance Violated	Location		Conviction Date
N/A			
Penalty Imposed		Was sentence completed?.	Yes No
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence completed?.	Yes No
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence completed?.	Yes No
Part E: Attestation READ CAREFULLY BEFORE SIGNING: truthfully. I certify that I am not prohibited f beverage industry as a restricted investor. under penalty of state law. I further understawith this application, and that any person v	from participating in this busi . I understand that any licens and that I may be prosecuted	ness due to any involvement in an- se issued contrary to Wis. Stat. Ch for submitting false statements and	other tier of the alcohol apter 125 shall be void affidavits in connection

Form **AB-100**

Alcohol Beverage Individual Questionnaire

All individuals involved in the alcohol beverage business must complete this form, including:

- all officers, directors, and agent of a corporation or nonprofit organization
 members and agent of a limited liability company
- sole proprietorall partners of a partnership

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A.	Business Info	rmation							
	Business Name (indi		nroprietor)						
_	dstrom, Inc.		proprietor)						
	ess Trade Name or D								
	istrom Marke		Fo						
		stprace ca	re						
	Type (check one) ble Proprietor	□ Bartaershin	□ Limitod	L tabilib	. Campan		Cornection		Januarit Overniestian
	ne Proprietor	☐ Partnership		Liability	Compar	ıy	✓ Corporation		Nonprofit Organization
	Individual Info	rmation		1		11/2			
1. Last Na				1	st Name				3. M.I.
Dilt				Ke	elly				M
	onship to Business (T	îtle)	5. Email					6	i. Phone
CFO									
7. Home	Address								
8. City					9. State	10. Zi	p Code	1	1. Date of Birth
Į.									
12. Drive	rs License/State ID N	lumber				13. Di	rivers License/State	ID State	of Issuance
Part C:	: Address Histo	rv	100 H		0 = 0		5.83	N F W	
	ou currently live in							err-2 00.04	
1. 00 }0	od daniently live in	***************************************							
If yes	, provide the mont	h and year wher	you permanently	/ move	d to Wisc	onsin .			(MM/YYYY)
2. List in	n chronological ord	er all of your ad	dresses within the	last 5	years. At	tach add	ditional sheets if n	ecessar	y.
Previous	Address 1			City				State	Zip Code
Previous	Address 2			City				State	Zip Code
Previous	Address 3			City				State	Zip Code
Previous	Address 4			City				State	Zip Code
				,					
Previous	Address 5			City				State	Zip Code
				""					
			70						
3. List a	II states and count	ies you have live	ed in as an adult.	Attach	additiona	ıl sheets	if necessary.		
State	County	State	County		State	County		State	County
TN	Davidson	TX	Harris						
State	County	State	County		State	County	1	State	County
	·							E	

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Continued \rightarrow

 Have you ever been convicted of any of for violation of any federal, Wisconsin, 			
If yes to question 1, please list details of	of each conviction below. Attach	additional sheets as needed.	
Law/Ordinance Violated	Location		Conviction Date
N/A			
Penalty Imposed		Was sentence completed?	Yes No
Law/Ordinance Violated	Location	'	Conviction Date
Penalty Imposed	1	Was sentence completed?	Yes No
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence completed?	Yes No
If yes to question 2, describe nature a sheets as needed.	and status of pending charges u	sing the space below. Attach add	tional
	nd status of pending charges u	sing the space below. Attach add	tional
sheets as needed.	nd status of pending charges u	sing the space below. Attach add	tional

Form		
Α	B-1	00

Alcohol Beverage Individual Questionnaire

Date		

All individuals involved in the alcohol beverage business must complete this form, including:

• sole proprietor

- all officers, directors, and agent of a corporation or nonprofit organization
 members and agent of a limited liability company
- · all partners of a partnership

Part A: Business Information

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

1. Legal E	Business Name (in	dividual name it sole	proprietor)					
Nord	lstrom, Inc	· .						
2. Busine	ss Trade Name or	DBA			-			
Nord	lstrom Mark	etplace Ca	fe					
3. Entity 1	Type (check one)				_			
☐ So	le Proprietor	Partnership	☐ Limited	d Liability C	ompan	y Corporation	n 🔲 N	Ionprofit Organization
Part B:	Individual Inf	formation						Faller LATE
1. Last Na	ame			2. First N	lame			3. M.I.
Nord	dstrom			Pet	er			E
4. Relatio	nship to Business	(Title)	5, Email			190	6	. Phone
Co-	-CEO		28					
7. Home	Address							
8. City				9. 8	State	10. Zip Code	1	1. Date of Birth
0.05				,				90
12. Drive	rs License/State ID	Number				13. Drivers License/S	late ID State	of Issuance
1.14								
Port C:	Address Hist	ion:	-3 1 5 1					
1. DO VO	III CUITANTIV IIVA II							
	od odinomity into it	11 1113001131111		• • • • • • • • •				Yes 🔽 No
_								(MMA/VVVV)
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If yes	, provide the mo	nth and year whe	n you permanen	tly moved to	o Wisco		• • • • • • •	(MM/YYYY)
If yes	, provide the mo	nth and year whe	n you permanen	tly moved to	o Wisco	onsin	• • • • • • • •	(MM/YYYY)
If yes	, provide the mo	nth and year whe	n you permanen	tly moved to	o Wisco	onsin	if necessar	(MM/YYYY)
If yes 2. List in	, provide the monotonical of Address 1	nth and year whe	n you permanen	tly moved to he last 5 year	o Wisco	onsin	if necessary	y. Zip Code
If yes 2. List in	, provide the mo	nth and year whe	n you permanen	tly moved to	o Wisco	onsin	if necessar	(MM/YYYY)
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2. List in Previous	, provide the monotonical of Address 1	nth and year whe	n you permanen	tly moved to he last 5 year	o Wisco	onsin	if necessary	y. Zip Code
2. List in Previous Previous Previous	, provide the monotonical of Address 1 Address 2 Address 3	nth and year whe	n you permanen	tly moved to he last 5 yea City City City	o Wisco	onsin	if necessary State State State	y. Zip Code Zip Code
2. List in Previous Previous Previous	, provide the monochronological of Address 1	nth and year whe	n you permanen	he last 5 year	o Wisco	onsin	if necessary State	y. Zip Code Zip Code
If yes 2. List in Previous Previous Previous Previous	, provide the monotonical of Address 1 Address 2 Address 3	nth and year whe	n you permanen	city City City City	o Wisco	onsin	State State State State	y. Zip Code Zip Code Zip Code
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If yes 2. List in Previous Previous Previous Previous	, provide the monotonical of Address 1 Address 2 Address 3	nth and year whe	n you permanen	city City City City	o Wisco	onsin	State State State State	y. Zip Code Zip Code Zip Code
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2. List in Previous Previous Previous Previous Previous A. List a State	Address 3 Address 4 Address 5	nth and year whe	n you permanen dresses within the	city City City City City St. Attach ad	o Wisco	ach additional sheets	State State State State State State	Zip Code Zip Code Zip Code Zip Code
2. List in Previous Previous Previous Previous Previous A. List a State WA	Address 3 Address 4 Address 5 Il states and coulculty King	nth and year whe	ed in as an adul	city City City City City St. Attach ad	ars. Att	sheets if necessary.	if necessary State State State State State State State	y. Zip Code Zip Code Zip Code Zip Code County
2. List in Previous Previous Previous Previous Previous A. List a State WA	Address 3 Address 4 Address 5 Il states and coulculty King	nth and year whe	ed in as an adul	city City City City City St. Attach ad	ars. Att	sheets if necessary.	if necessary State State State State State State State	y. Zip Code Zip Code Zip Code Zip Code County

Part D: Criminal History			
Have you ever been convicted of any for violation of any federal, Wisconsin			
If yes to question 1, please list details	of each conviction below. Attach a	dditional sheets as needed.	
Law/Ordinance Violated	Location		Conviction Date
N/A			
Penalty Imposed		Was sentence completed?	Yes No
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence completed?	Yes No
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence completed?	Yes No
sheets as needed. N/A			
Part E: Attestation			
READ CAREFULLY BEFORE SIGNII truthfully. I certify that I am not prohibit beverage industry as a restricted inverunder penalty of state law. I further undwith this application, and that any pers to forfeit not more tyran \$1,000 if convictions.	ted from participating in this busin stor. I understand that any license erstand that I may be prosecuted fo on who knowingly provides materi	ess due to any involvement in ar issued contrary to Wis. Stat. Ch or submitting false statements and	nother tier of the alcohol napter 125 shall be void d affidavits in connection
Signature XXX VIX		Date 9 /19	/25-



WISCONSIN DEPARTMENT OF REVENUE PO BOX 8902 MADISON, WI 53708-8902

001195

NORDSTROM, INC. 1700 7TH AVE STE 1000 SEATTLE WA 98101-4407

Contact Information:

2135 RIMROCK RD PO BOX 8902 MADISON, WI 53708-8902 ph: 608-266-2776 fax: 608-327-0235 email: DORBusinessTax@wisconsin.gov website: revenue.wi.gov

Letter ID L1251546672

Wisconsin Business Tax Registration Certificate

Expiration date:

May 31, 2026

Legal/real name:

NORDSTROM, INC.

- This certificate confirms that you are registered with the Wisconsin Department of Revenue for the tax types shown below.
- This registration certificate is not a seller's permit, and should not be used as proof that you hold a seller's permit.
- You may not transfer this certificate to any other individual or business.

Тах Туре	Account Type	Number
Sales & Use Tax	Sales & Use Tax	456-0002859473-05
Local Exposition Tax	Local Exposition Tax	014-0002859473-08
Withholding Tax	Withholding Tax	036-0002859473-02

The following is a list of the business locations that you have registered with the Department of Revenue.

Store 028

456-0002859473-05 NORDSTROM, INC. 7349 W TOWNE WAY MADISON WI 53719-1028

Store 0282

456-0002859473-05 NORDSTROM, INC. NORDSTROM 2424 NORTH MAYFAIR ROAD WAUWATOSA WI 53226

Store 0272

456-0002859473-05 NORDSTROM, INC. NORDSTROM RACK 11400 WEST BURLEIGH STREET WAUWATOSA WI 53222

[city logo]

WAUWATOSA COMMON COUNCIL CITY OF WAUWATOSA PROCLAMATION

Recognizing the Extraordinary Response of City of Wauwatosa Employees To the August 2025 Storm and Flood

On Saturday, August 9, and Sunday, August 10, 2025, Wauwatosa experienced a "1,000-year flood" during a storm that brought 8-14 inches of rain to our community and caused the Menomonee River to rise to 14 feet and overflow its banks.

The raging river devastated the Little Red Store and hundreds of Wauwatosa homes and businesses. Flooding in Hart Park severely damaged the stadium, playground, softball field, and Muellner Building and displaced multiple athletic teams, the Wauwatosa Senior Center, and the Wauwatosa Curling Club. Property owners in Wauwatosa suffered millions of dollars in damages.

During the storm, the Wauwatosa Fire Department responded to 123 service calls and rescued more than 70 people and numerous pets. The Wauwatosa Police Department received more than 350 calls for service, managed snarled traffic, and patrolled and monitored the affected homes along Menomonee River Parkway. Our first responders ensured that the city did not experience any serious injuries or fatalities.

During the storm, Department of Public Works employees filled a sinkhole and worked with other first responders to secure and protect City property. Following the storm, they collected over 1,000 tons of debris on more than 1,900 service trips. City Hall employees worked all weekend, and beyond, to coordinate the overall response and to provide emergency information to residents.

NOW, THEREFORE, LET IT BE KNOWN that the Mayor and Common Council of the City of Wauwatosa commend these extraordinary efforts and express their gratitude and the gratitude of the entire Wauwatosa community to the employees of the City of Wauwatosa.

Dennis R. McBride, Mayor	
James Moldenhauer, District 1	Andrew Meindl, District 1
Margaret Arney, District 2	Brad Foley, District 2
Joseph Makhlouf II, District 3	Robin Brannin, District 3
Ernst Franzen District 4	David Lewis District 4

Dated this 28th day of October, 2025.

Sean Lowe, District 5	Rob Gustafson, District 5
Joseph Phillips, District 6	Aletha Champine, District 6
Michael Morgan, District 7	Amanda Fuerst, District 7
Jason Wilke, District 8	Melissa Dolan, District 8

[city logo]

WAUWATOSA COMMON COUNCIL CITY OF WAUWATOSA PROCLAMATION

Recognizing Amanda Saso for Her Protection of The Little Red Store in the August 2025 Storm and Flood

The "Little Red Store," located at 7720 Harwood Avenue, is one of Wauwatosa's most beloved buildings. Built in 1854, it is an official City of Wauwatosa landmark and the city's oldest commercial structure.

The Little Red Store is owned by the City of Wauwatosa and leased and managed by the Wauwatosa Historical Society for the benefit of the entire Wauwatosa community.

On Saturday, August 9, and Sunday, August 10, 2025, Wauwatosa experienced a "1,000-year flood" during a storm that brought 8-14 inches of rain to our community and caused the Menomonee River to rise to 14 feet and overflow its banks.

At 3:00 a.m. on Sunday morning, Amanda Saso, the Executive Director of the Wauwatosa Historical Society, began monitoring security cameras and watched as water continued to rise around the store. At 7:00 a.m., she contacted and retained a trusted water and disaster mitigation company. At 4:00 p.m., after floodwaters began to recede, she was able to enter the building with the help of the Wauwatosa Police Department. The basement was completely flooded and water had reached the landing on the first floor. At its peak, more than nine feet of water had filled the basement. Water had also entered through the back door, making its way down the hall and into the kitchen. By 5:00 p.m., a mitigation crew was on site. Submersible pumps began removing water, and volunteers began removing sludge from floors and walls.

Nothing irreplaceable was damaged, but all of the items stored in the basement were destroyed. The City's Department of Public Works completed removed and disposed of the ruined items. Some damage occurred to the wood floor on the first level, the front porch stairs and back ramp sustained structural damage, and the gardens were devastated. Nevertheless, because of Ms. Saso's courage and foresight, the Little Red Store was saved from destruction.

NOW, THEREFORE, LET IT BE KNOWN that the Mayor and Common Council of the City of Wauwatosa commend these extraordinary efforts and express their gratitude and the gratitude of all Wauwatosans to Amanda Saso for her courage and extraordinary efforts on behalf of our community.

Dennis R. McBride, Mayor	
James Moldenhauer, District 1	Andrew Meindl, District 1
Margaret Arney, District 2	Brad Foley, District 2

Dated this 28th day of October, 2025.

Joseph Makhlouf II, District 3	Robin Brannin, District 3
Ernst Franzen, District 4	David Lewis, District 4
Sean Lowe, District 5	Rob Gustafson, District 5
Joseph Phillips, District 6	Aletha Champine, District 6
Michael Morgan, District 7	Amanda Fuerst, District 7
Jason Wilke, District 8	Melissa Dolan, District 8



Wauwatosa, WI

7725 W. North Avenue Wauwatosa, WI 53213

Staff Report

File #: 25-1292 Agenda Date: 10/21/2025 Agenda #: 4.

Review and consideration of approval of the 2026 Common Council Meeting Calendar

Submitted by:

Zach Kessler, Interim City Clerk

Department:

City Clerk

A. Issue

Pursuant to Sec. 2.02.070 of the Municipal Code, several options for the 2026 Common Council and Council Committee meeting calendar are presented to the Government Affairs Committee for review, consideration, and recommendation to the full Common Council.

B. Key Issues for Consideration

In July of 2024, the Common Council amended its meeting calendar to reflect changes to several sections of the Municipal Code related to Common Council and Council Committee meetings. The Common Council continued with this calendar model in 2025.

Major changes to the 2025 meeting calendar from prior years included:

- Reducing Common Council meetings to one per month, on the fourth Tuesday
- Scheduling Community and Financial Affairs Committees on the first Tuesday, and all Committees on the third Tuesday
- Adding additional Financial Affairs Committee meetings in October to accommodate budget discussions

Meeting utilization to date:

- The Community Affairs Committee has not met on the first Tuesday in 2025.
- The Financial Affairs Committee has met on the first Tuesday three times through September (excluding additional October budget sessions).

Calendar options for 2026:

- Option A Continue Current Model: Retains the existing structure of meetings on the first, third, and fourth Tuesdays.
- Option B Staggered Committees: Splits meetings across three consecutive weeks.
 - o First Tuesday: Community Affairs / Financial Affairs
 - o Second Tuesday: Transportation Affairs / Government Affairs
 - o Third Tuesday: Common Council
- Option C Condensed Schedule: Holds all four committees on one night, followed by a full

File #: 25-1292 Agenda Date: 10/21/2025 Agenda #: 4.

Council meeting the next week. Additional Financial Affairs meetings are scheduled in April, June, September, October, and November to accommodate reports and heavier workloads.

All calendars account for holidays and elections.

Other Items for Consideration:

• Various volunteer committees (e.g., Sustainability Committee, Commission for Persons with Disabilities, Historic Preservation Commission, etc.) deliver annual reports to Council committees throughout the year. The Council could schedule two dedicated committee nights - one in the spring and one in the fall - for these reports. Committees and commissions would pick one of these dates, and all four Council committees would meet to hear the reports.

C. Recommendation

I recommend that the Committee review and discuss the three options for the 2026 Common Council meeting calendar and make a recommendation to the full Common Council for approval of a final 2026 meeting calendar.

D. Attachments

- 2026 Common Council Meeting Calendar Option A
- 2026 Common Council Meeting Calendar Option B
- 2026 Common Council Meeting Calendar Option C



2026

Common Council Calendar

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Common Council Meetings - 6:30 PM

Standing Committee Meetings – 6:30 PM

Community Affairs Committee – 6:30 PM Financial Affairs Committee – 6:30 PM

Standing Committee Meetings – 6:30 PM

Government Affairs Committee – 6:30 PM Transportation Affairs Committee – 6:30 PM Community Affairs Committee – 7:30 PM Financial Affairs Committee – 7:30 PM **Holidays - City Offices Closed**

Election Days

Special Financial Affairs Committee – 6:30 PM

*All times are subject to change



City of Wauwatosa – Option B

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Common Council Meetings - 6:30 PM

Standing Committee Meetings – 6:30 PM

Community Affairs Committee Financial Affairs Committee

Standing Committee Meetings - 6:30 PM

Government Affairs Committee Transportation Affairs Committee

Special Financial Affairs Committee - 6:30 PM

Holidays - City Offices Closed

Election Days

*All times are subject to change



City of Wauwatosa – Option C

Common Council Calendar

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Common Council Meetings - 6:30 PM

Financial Affairs Committee Meetings - 6:30 PM Financial Affairs Committee - 6:30 PM

Standing Committee Meetings – 6:30 PM

Government Affairs Committee - 6:30 PM Transportation Affairs Committee - 6:30 PM Community Affairs Committee – 7:30 PM Financial Affairs Committee - 7:30 PM

Holidays - City Offices Closed

Election Days

*All times are subject to change



Wauwatosa, WI

7725 W. North Avenue Wauwatosa, WI 53213

Staff Report

File #: 25-1832 Agenda Date: 10/21/2025 Agenda #: 5.

Discussion and consideration of establishing polling place sites for the City of Wauwatosa

Submitted by:

Zach Kessler, Interim City Clerk

Department:

City Clerk

A. Issue

The City Clerk's Office is seeking Committee feedback on two proposed approaches for establishing polling sites for the 2026-2027 election cycle. The goal is to ensure accessible, efficient, and balanced polling sites following the City's transition from 8 to 12 aldermanic districts and the loss of two existing polling sites.

B. Background/Options

Key Issues for Consideration

- Two existing polling sites (Trinity Episcopal Church and Annunciation Greek Orthodox Church) have declined to continue hosting elections.
- The Muellner Building has reopened following renovations, though space and accessibility constraints limit its usefulness.
- Wauwatosa will transition from 8 to 12 aldermanic districts in 2026. Previously, our 8-9 polling sites were largely oriented around 8 aldermanic districts.
- Current polling places are generally willing to continue, though some experience crowding while others are underutilized.
- Public feedback in past elections has noted concern with sites outside city limits and use of church facilities.
- Election Day turnout varies across wards, with wards 19, 20, and 21 having high Election Day turnout levels, and wards 5, 6A, and 6B having low Election Day turnout levels.

Potential New Polling Sites

Potential New Sites	<u>Notes</u>
Hoyt Park Great Hall	Spacious, large parking lot, separate entry/exit
Muellner Building - Garden Room	Large parking lot and newly renovated, but the Garden Room is too small and scheduling is a challenge due to Curling and Senior Club events/programming
Wil-O-Way Underwood	Potentially viable; needs assessment
Currie Park Clubhouse	Large parking lot, good size, but shared entry/exit

Options for 2026-2027

Option A - Minimal Change

- Replaces polling sites only where necessary (six wards).
- Maintains general continuity for voters.
- Serves as a transition year to evaluate ward balance under the new districts.

Option B - Site Optimization

- Reassigns select wards to balance voter volume and improve facility use.
- Reduces crowding at Library and Currie Park while eliminating underuse elsewhere.
- Example Adjustments:
 - Ward 15 moves to Mount Mary (reducing volume at the Library).
 - Wards 17 and 18 move to Hoyt Park.
 - Ward 22 moves to Mount Mary to reduce volume at Currie Park.

Option A - Minimal Change		Option B - Site Optimization		
Pros	Cons	Pros	Cons	
Minimal disruption to voters	Continues uneven voter distribution and potential crowding at Library and Currie Park		Involves more voter changes	
Simplifies administration and communication	Underutilizes some existing spaces	_	Requires heavier communication and preparation effort	

Polling Site	Total Voters - Option A (as of October 10, 2025)	Total Voters - Option B (as of October 10, 2025)
City Hall Lower Civic Center	4,188	4,188
St. Matthew's Church	2,203	3,668
Hoyt Park Great Hall	2,102	3,642
St. Camillus O'Donnell Room	4,376	4,376
Honey Creek Church	4,271	4,271
Library Firefly Room	4,091	2,772
Mt. Mary University	4,588	4,330
Mt. Zion Church	3,850	3,850
Currie Park Clubhouse	4,150	2,722

Timeline

- October 2025: Committee review and feedback.
- November-December 2025: Finalize site selections and prepare resolution for Council approval.
- January 18, 2026: Statutory deadline for polling place establishment before the February 2026 Spring Primary.

File #: 25-1832 Agenda Date: 10/21/2025 Agenda #: 5.

• Early 2026: Voter notification postcards mailed to affected households.

Next Steps

- Staff will refine polling site assignments based on Committee feedback and bring a final recommendation to the Committee for consideration and final Common Council approval in November.
- Once approved, the Clerk's Office will begin preparations for 2026-2027 elections, including notification of affected voters.
- In 2026, the Clerk's Office will place signs at previous polling locations on Election Days, redirecting voters to the new sites. The Clerk's Office will also record feedback about any polling site changes.

Other Information:

• Included in the 2026 Common Council executive budget are funds for a Citywide mailing with information about the change from 8 to 12 aldermanic districts. This mailing is separate from any polling site relocation notices, but will complement the City's broader voter communication strategy. More information can be found in the 2026 Common Council budget narrative.

C. Fiscal Impact

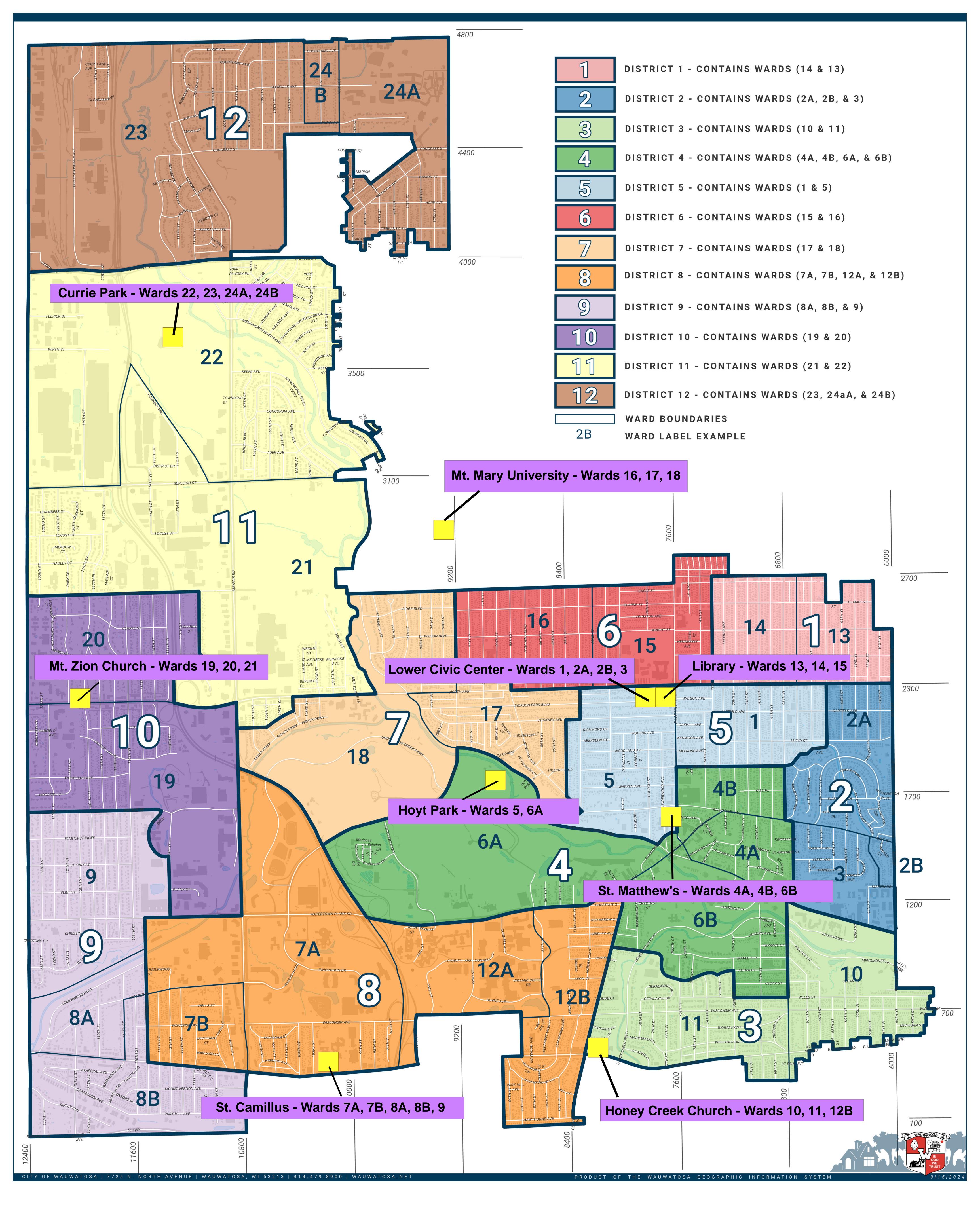
The number of affected households will vary based on the total number of wards reassigned to new polling places. The Clerk's Office is currently obtaining quotes from several companies for the printing and mailing of the relocation postcards. Funds have been included in the 2026 budget.

D. Recommendation

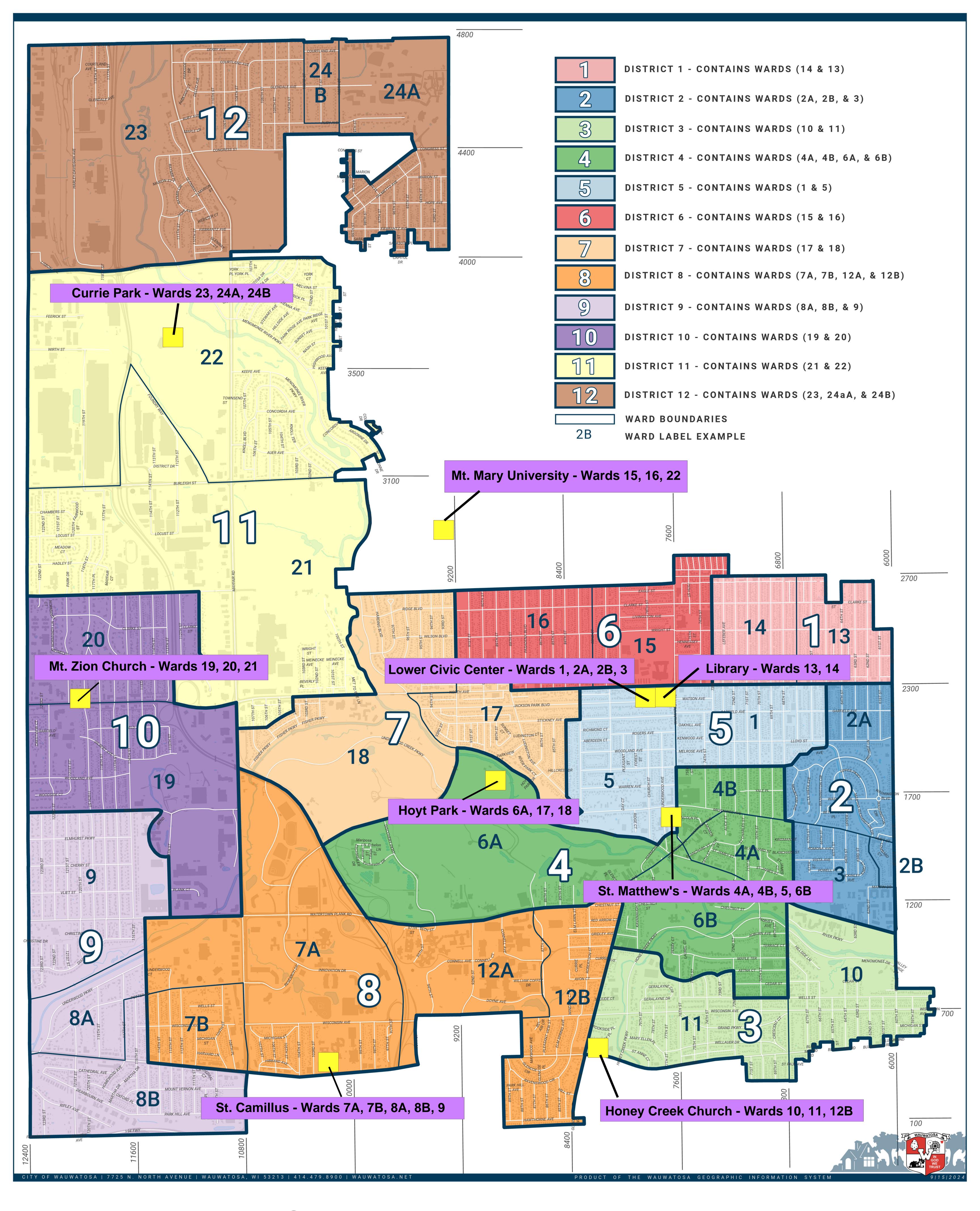
The Clerk's Office requests Committee discussion and direction on whether to pursue a *Minimal Change* approach or a *Site Optimization* approach in developing the 2026-2027 polling place plan.

E. Attachments

- 2026-2027 Polling Site Map Option A
- 2026-2027 Polling Site Map Option B



2026-2027 Polling Sites - Option A Minimize Change



2026-2027 Polling Sites - Option B Site Optimization



Wauwatosa, WI Staff Report

File #: 24-1414 Agenda Date: 10/21/2025 Agenda #: 6.

Discussion and consideration of Common Council compensation for 2026 and 2028

Background

This item was initially considered by the Government Affairs Committee on November 12, 2024. The item was held by the Committee and is now coming back for discussion and consideration.

The initial agenda packet materials from November 2024, including a memo and compensation comparison chart, are included in this meeting's agenda packet.

The City of Wauwatosa will be transitioning from 16 to 12 alderpersons after the April 2026 spring election.



ADMINISTRATION DEPARTMENT MEMO

To: Government Affairs Committee

From: Administration - Human Resources

Meeting Date: November 12, 2024

Subject: Discussion and Consideration of Common Council Compensation for 2026 and 2028

A. Issue

The compensation for the Common Council, Mayor and Alderpersons, is only periodically adjusted and may only be adjusted in advance of a succeeding term of office. It is NOT legal for an elected body to grant themselves as incumbents an increase in compensation. In this instance any modification can and would be effective with the next term of office. In the case of Alderpersons, April of 2026 and, Mayor, in April of 2028. In terms of budgetary impact that will be adjusted with the 2026 and 2028 budgets, respectively.

The purpose of this report is only to begin a discussion as to how the body wants to look at the issue. Herein I have not attempted to suggest the positions have changed in the fundamental nature of what the roles entail or to reconsider the attraction to the position. Instead, I have left those consideration to the body and relied on simply bringing current the compensation based on an inflation adjustment as is often the baseline of compensation review. In addition, for comparative review is an attachment of compensation in several other municipalities.

B. Background/Options

The most recent two adjustments to the Aldermanic 'stipend' were an increase to \$350 per month in 1982 and \$450 in 2018. The current cumulative budget amount is \$86,400. In adopting the modification pay associated with the referendum creating 12 aldermanic seats; the Common Council set in policy that the cumulative pay to the 16 Alders would be divided by 12 once that change takes place. This change will bring the Aldermanic pay to \$600 per month. If one adjusts for inflation from 1982; the monthly stipend would be \$1,166 or from 2018 calculates to \$576 per month.

The pay for the position of Mayor was most recently adjusted in 2012 to a monthly amount of \$2,500 per month. Brining this current to 2024 would be an adjustment to \$3,477 per month or \$41,724 annually.

C. Strategic Plan (Area of Focus)

This issue most closely aligns with the overall Vision, Mission, and Values of the organization.

D. Fiscal Impact

The fiscal impact is quite varied depending on the approach one takes. For descriptive purposes, \$1,166 per month for 12 Alders is a budgetary increase of \$81,504 annually and about ¾ of that in



ADMINISTRATION DEPARTMENT MEMO

2026 as a partial year. Likewise, if you use the adjustment from 2018 but then divide by 12 instead of 16 you arrive at an annual adjustment of \$24,192 (partial in 2026. In the case of the position of Mayor; simply adjusting for inflation is an adjustment of \$11,724 in 2028 and beyond.

E. Recommendation

First, I would suggest taking time over the next couple months to consider the soundness of our current structure and if resolved that it preserves the functions as it has for many years the issue becomes quickly one of how to adjust to bring forward the compensation. In this instance, and from among other questions the committee may have, staff can be responsive with an explicit recommendation. Last, each of these inflation adjustments brings the number to 2024. We would prefer adjusting forward to 2026 and 2028 so that value is not 'outdated' upon adoption.

Municipality	Population	Monthly Pay: Alders	Annual Pay: Alders	Hours Worked: Alders (note: this can be an estimate, i.e., 3 hours per week, etc.)
Appleton	74,511	\$5 6 3	\$6 <i>,</i> 750	5 hours
Bayside	4,384	\$100	\$1,200	unknown
Beloit	36,449	\$208	\$2,500	<u> </u>
Brookfield	41,958	\$826	\$9,911	15+ hours
Brown Deer	12,609	\$400	\$4,800	
Cedarburg	12,421	\$200	\$2,400	
Cudahy	17,796	\$650	\$7,800	
Delafield	7,181	\$313	\$3,750	1-10 hours
Eau Claire	69,737	\$250	\$3,000	
Fond du Lac	44,339	\$417	\$5,000	
Fox Point	6,643	\$0	\$0	3 hours per month
Franklin	36,066	\$600	\$7,200	~10
Greendale	14,540	\$599	\$7,193	5-7 hours
Greenfield	37,071	\$575	\$6,900	15 hours
Hartford	15,829	\$333	\$4,000	30 mins per week
Kenosha	94,484	\$500	\$6,000	10 plus
La Crosse	51,380	\$575	\$6,900	
Manitowoc	34,570	\$450	\$5,400	2-3 hours
Menomonee Falls	39,246	\$458	\$5,500	unknown
Mequon	25,337	\$400	\$4,800	1-2 hours
Milwaukee	563,305	\$7,017	\$84,206	40 hours plus
Muskego	25,150	\$636	\$7,638	7 hours
Neenah	27,361	\$440	\$5,280	
New Berlin	40,315	\$508	\$6,100	3-5 hours /week
Oak Creek	36,087	\$600	\$7,200	Varies
Oconomowoc	16,847	\$591	\$7,093	20-25 hours
Oshkosh	65,948	\$417	\$5,000	10 hours
Pewaukee	16,169	\$542	\$6,500	
Racine	76,462	\$575	\$6,900	
River Hills	1,571	\$0	\$0	Under 5 hours
Sheboygan	49,773	\$507	\$6,084	
Shorewood	13,526	\$83	\$1,000	Varies
South Milwaukee	20,309	\$725	\$8,700	Varies
Waukesha	70,454	\$584	\$7,000	20 hours
Wausau	39,833	\$446	\$5,355	
Wauwatosa	47,289	\$450	\$5,400	
West Allis	58,950	\$900	\$10,800	20
West Bend	31,604	\$352	\$4,235	20 per week
West Milwaukee	4,019	\$300	\$3,600	10 hours per month



ALDERPERSON AGENDA ITEM MEMO

To: Government Affairs

From: Ald. Margaret Arney

Date: July 15, 2025

Subject: Proposed Design Element Addition to Wauwatosa's Identity

A. Background/Rationale

The purpose of this project is to propose the addition of a new design element to the City of Wauwatosa's identity as an enhancement (not a replacement) of our existing brand identity.

We are not replacing the Wauwatosa shield. We are proposing to add a flexible design element. The intent is to provide a modern, approachable option for certain communication materials, while preserving the legacy of the shield.

B. Key Issues for Consideration

Initial conversations with branding agencies suggest this would be a low-effort project. Additionally, the timing aligns well with our upcoming website redesign: our current provider is no longer supporting wauwatosa.net, and we plan to request funding for a new website in the upcoming budget. It would be ideal to finalize a branding element in advance of that work.

C. Fiscal Impact

This project is expected to fall below the threshold that would require a formal RFP under our purchasing policy, making it a straightforward and cost-effective effort. However, we would still obtain at least three quotes to get the most competitive price and qualified agency. Our early conversations suggest the cost would be reasonable and in line with similar small-scale design projects.

This is currently unfunded in 2025. Ideally, the committee would direct staff to identify a funding source either in 2025 or early 2026, prior to the website redesign. To be clear, this is a gradual evolution. No mass replacement of signage, vehicles, or uniforms is planned.

D. Requested Action

I request that the Common Council instruct staff to pursue the addition of a new visual design element to the City's identity.



Project Purpose

To propose the addition of a new design element to the City of Wauwatosa's brand book as an enhancement (not a replacement) of our existing brand identity.

Project Purpose

- We are not replacing the Wauwatosa shield.
- We are proposing to add a flexible design element that can be used selectively to complement the shield.
- The intent is to provide a modern, approachable option for certain communication materials, while preserving the formality and legacy of the shield.

Examples of other organizations



BEFORE







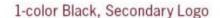


BEFORE

AFTER

Examples of other organizations

City Seal











Brand

Factors to Consider

- Initial conversations with agencies suggest this would be a low-cost project.
- Our website, Wauwatosa.net is no longer being supported and slated in the 2026 budget for a redesign. Ideally, we would complete the design element prior to the website redesign.

Implementation Approach

- This is a gradual evolution, not a rebrand.
- Over time, we may update select materials (digital, casual print pieces) to include the new element, while keeping the shield for formal or institutional uses.
- No mass replacement of signage, vehicles, or uniforms is planned.

Ask of the Common Council:

- 1. Consider giving staff direction to pursue the addition of a new visual design element to the City's brand book.
- 2. Recognize this as an expansion of the city's toolbox, offering more flexibility and relevance without discarding tradition.



ALDERPERSON AGENDA ITEM MEMO

To: Wauwatosa Common Council

From: Ald. Margaret Arney

Date: December 19, 2023

Subject: Proposed process to update the City of Wauwatosa logo

A. Background/Rationale

Wauwatosa is a desirable, thriving, diverse community that offers its residents outstanding amenities and services. In recent years we have seen an influx of younger families, expansion of large and small businesses, and a revitalized village "downtown."

Wauwatosa invests significantly in our public image through our online website presence, tourism-related marketing and social media. Unfortunately, our city logo has not kept pace with our growth and changes. The logo is the one consistent image representing the city. Like the original kitchens and furnishings of many of our 1950's era homes, it needs updating.

B. Key Issues for Consideration

As a city, we have invested in high quality marketing efforts over the last several years. We feel the benefits of this investment in the bounceback from the pandemic in our local businesses, restaurants and tourism.

Updating our logo is an important piece of our marketing investment.

C. Fiscal Impact

There will be no short-term impact to the investigation of logo update options. Staff will assess the impact on the Wauwatosa City budget and offer the Council options.

D. Requested Action

I request that the Common Council instruct staff to explore the process and cost of updating and implementing a new Wauwatosa city logo that aligns with our current city image, values and marketing goals.

E. Attachments

None.