

FRANKLIN TOWN COUNCIL

Agenda & Meeting Packet

November 3, 2021

Meeting will be held at the **Municipal Building**
2nd floor, Council Chambers
355 East Central Street
7:00 PM

A NOTE TO RESIDENTS: All citizens are now welcome to attend public board and committee meetings in person. Additionally, in an effort to maximize citizen engagement opportunities, citizens will be able to continue to participate remotely via phone OR Zoom. The meetings will also be [live-streamed by Franklin TV](#) and shown on Comcast Channel 11 and Verizon Channel 29.

- **Link to access meeting:** November 3, 2021 Town Council Meeting Link [HERE](#) -- Then click "Open Zoom"
 - Or copy and paste this URL into your browser: <https://us02web.zoom.us/j/89957171824>
 - **Call-In Phone Number:** Call 1-929-205-6099 and enter Meeting ID # 899 5717 1824 --Then press #

1. SWEARING IN OF TOWN CLERK AND TOWN COUNCIL

2. ELECTION OF OFFICERS – Town Council Chair, Vice-Chair & Clerk

3. ANNOUNCEMENTS FROM THE CHAIR

- This meeting is being recorded by Franklin TV and shown on Comcast channel 11 and Verizon Channel 29. This meeting may be recorded by others.*
- Chair to identify members participating remotely.*

4. CITIZEN COMMENTS

- Citizens are welcome to express their views for up to five minutes on a matter that is not on the agenda. The Council will not engage in a dialogue or comment on a matter raised during Citizen Comments. The Town Council will give remarks appropriate consideration and may ask the Town Administrator to review the matter.*

5. APPROVAL OF MINUTES

- [October 6, 2021](#)

6. PROCLAMATIONS/RECOGNITIONS - None Scheduled

7. APPOINTMENTS

- [Franklin Cultural Council: Venus Senjam](#)
- [Franklin Cultural Council: Patrick Kinner](#)
- [Franklin Cultural Council: Shelley Green](#)
- [Franklin Cultural Council: Jacob Juncker](#)

8. HEARINGS - 7:10pm - None Scheduled

9. LICENSE TRANSACTIONS

- a. [Residence Inn Boston Franklin, License Modification, Change of Manager, Officers/Directors/ LLC Managers & Change of ownership Interest, 4 Forge Parkway, Franklin, MA 02038](#)
- b. [Shaw's Supermarkets, Inc. d/b/a Shaw's, License Modification, Change of Officers/Directors/LLC Managers, 255 East Central Street, Franklin, MA 02038](#)
- c. [99 Restaurants of Boston, LLC d/b/a The Ninety-Nine, License Modification, Change of Officers/Directors/LLC Managers, 847 West Central Street, Franklin, MA 02038](#)

10. PRESENTATIONS/DISCUSSIONS

- a. [Presentation: Open Meeting Law, Public Records, Ethics and Conducting a Public Meeting - Mark Cerel, Town Attorney](#)

11. SUBCOMMITTEE REPORTS

- a. Capital Budget Subcommittee
- b. Budget Subcommittee
- c. Economic Development Subcommittee

12. LEGISLATION FOR ACTION

- a. [Resolution 21-65: Cable Funds in Support of PEG Service and Programming per MGL Ch. 44, §53F3/4 - \\$18,500.22 \(Motion to Approve Resolution 21-65 - Majority Vote\)](#)
- b. [Resolution 21-66: Gift Acceptance: Veterans Service Department \(\\$3,295.00\) and Fire Department \(\\$965.00\) \(Motion to Approve Resolution 21-66- Majority Vote\)](#)

13. TOWN ADMINISTRATOR'S REPORT

14. FUTURE AGENDA ITEMS

15. COUNCIL COMMENTS

16. EXECUTIVE SESSION

- a. *Considering the purchase, exchange, lease or value of real property, because an open meeting may have a detrimental effect on the negotiating position of the Board.*
 - i. *Schmidt's Farm, Prospect Street*

17. ADJOURN

Note:

Two-Thirds Vote: requires 6 votes

Majority Vote: requires majority of members present and voting

**FRANKLIN TOWN COUNCIL
MINUTES OF MEETING
October 6, 2021**

A meeting of the Town Council was held on Wednesday, October 6, 2021, at the Municipal Building, 2nd Floor, Council Chambers, 355 East Central Street, Franklin, MA. Councilors present: Andrew Bissanti, Brian Chandler, Robert Dellorco, Cobi Frongillo, Melanie Hamblen, Glenn Jones, Thomas Mercer, Deborah Pellegrini. Councilors absent: None. Administrative personnel in attendance: Jamie Hellen, Town Administrator; Mark Cerel, Town Attorney; Alecia Alleyne, Assistant to the Town Administrator.

CALL TO ORDER: ► Chair Mercer called the meeting to order at 7:00 PM. Chair Mercer called for a moment of silence; all recited the Pledge of Allegiance.

ANNOUNCEMENTS: ► Chair Mercer reviewed the following as posted on the agenda. A Note to Residents: All citizens are now welcome to attend public board and committee meetings in person. Additionally, in an effort to maximize citizen engagement opportunities and comply with open meeting law regulations, citizens will be able to continue to participate remotely via phone or Zoom. The meetings will also be live-streamed by Franklin TV and shown on Comcast Channel 11 and Verizon Channel 29. He stated that this meeting is being recorded by Franklin TV and may also be recorded by others. ► Chair Mercer announced that he appointment Councilor Chandler to the Budget Subcommittee.

CITIZEN COMMENTS: ► Ms. Karen Miller, 246 Washington Street, stated that she received a registered letter to attend a Planning Board meeting earlier this week as a company is looking to put a large commercial business at the end of Talf Drive across the wetlands in a residential area. She stated that there are many concerns about this project such as traffic, the Charter School in the area, and 18 wheelers delivering items. She would like the Town Council to be aware of this issue. ► Ms. Jane Callaway-Tripp, 607 Maple Street, stated that her daughter is putting on a 14-mile walk for the 13 Fallen Soldiers; information is available on social media. She stated that the military and American flags will be carried. If a person would like to attend and is not on social media, reach out to Ms. Callaway-Tripp and she will provide information.

APPROVAL OF MINUTES: ► *September 1, 2021, and September 15, 2021.* ► **MOTION to Approve** the September 1, 2021 meeting minutes by **Dellorco. SECOND** by **Jones. No discussion.** ► **VOTE: Yes-8, No-0, Absent-0.** ► **MOTION to Approve** the September 15, 2021 meeting minutes by **Dellorco. SECOND** by **Jones. No discussion.** ► **VOTE: Yes-8, No-0, Absent-0.**

PROCLAMATIONS/RECOGNITIONS: ► *Franklin Cultural Council - 2021 Cultural Festival.*

► Councilor Frongillo read aloud a proclamation from the Town Council recognizing Ms. Kaye Kelly of the Franklin Cultural Council on the 2021 Cultural Festival. ► Ms. Kelly reviewed the mission and vision for the festival. She stated that the theme of the festival was community unity. She shared quotes from people in the community. She requested that the Town Council add a line item to the budget to help continue the festival in 2022; however, they will continue to look for sponsorships. She said that events like this will help the community heal; she is in favor of more events like this. She thanked Mr. Hellen and everyone for their support. ► Chair Mercer thanked Ms. Kelly and her committee; he stated that it was a great event.

APPOINTMENTS: ► *Susan Younis - Municipal Affordable Housing Trust.* ► Councilor Jones read the appointment. ► **MOTION to Ratify** the appointment by the Town Administrator of Susan L. Younis to serve as member of the Municipal Affordable Housing Trust, with a term to expire on June 30, 2022, by **Jones. SECOND** by **Dellorco. Discussion:** ► Mr. Hellen stated that Ms. Younis applied some time ago and recently

this vacancy came up. ► Ms. Younis thanked the Town Council for the opportunity and reviewed her experience. ► **VOTE: Yes-8, No-0, Absent-0.**

► **Candice Narsasian - Cultural District Committee.** ► Councilor Jones read the appointment. ► **MOTION to Ratify** the appointment by the Town Administrator of Candice Narsasian to serve as a member of the Cultural District Committee, with a term to expire on June 30, 2024, by **Jones. SECOND** by **Dellorco.**

Discussion: ► Mr. Hellen stated that Ms. Narsasian is relatively new to Franklin; he noted that she will bring her social media and web design knowledge to the Cultural District Committee. ► Ms. Narsasian stated that she is excited to be part of the committee. ► **VOTE: Yes-8, No-0, Absent-0.**

► **Anne Bergen - Franklin TV Board of Directors.** ► Councilor Jones read the appointment. ► **MOTION to Ratify** the appointment by the Town Administrator of Anne Bergen to serve as a member of the Franklin TV Board of Directors, with a term to expire on June 30, 2024, by **Jones. SECOND** by **Dellorco. Discussion:**

► Mr. Hellen stated that both Ms. Bergen and Mr. Norman have been long-term volunteers on the Franklin TV Board of Directors. ► Ms. Bergen stated that Franklin TV is a gem in the community; their board has the honor of overseeing all the activity of this organization. She stated that Mr. Norman has been an incredible presence on this board. ► **VOTE: Yes-8, No-0, Absent-0.**

► **Ken Norman - Franklin TV Board of Directors.** ► Councilor Jones read the appointment. ► **MOTION to Ratify** the appointment by the Town Administrator of William K. Norman to serve as a member of the Franklin TV Board of Directors, with a term to expire on June 30, 2024, by **Jones. SECOND** by **Hamblen. No discussion.** ► **VOTE: Yes-7, No-1, Absent-0.** (Mr. Bissanti voted no.)

HEARINGS: None.

LICENSE TRANSACTIONS: None.

PRESENTATIONS/DISCUSSIONS: ► **Franklin School Department Update to Town Council: Dr. Sara Ahern, Superintendent of Schools.** ► Dr. Ahern noted that there were School Committee members attending the meeting. She narrated a slideshow presentation which was provided in the Town Council's meeting packet. She stated that tonight they would be discussing an enrollment/staffing update including pandemic recovery; financial update including Chapter 70/new school spending, Franklin per pupil spending, and COVID relief funding; and school facility planning including Davis Thayer closure and master facilities plan. She reviewed the strategy for district improvement 2018-2021 which included: 1. social-emotional well-being of students and staff, 2. engaging and rigorous curriculum, 2. high-quality instruction to meet the academic needs of each learner, and 4. effective two-way communication to support student learning. She reviewed the 2021 enrollment preliminary information and noted that three of the elementary schools have more enrollment than projected. She stated that there has been a decrease of enrollment in the middle schools. She stated this is primarily due to decreased birth rates. She stated that the high school is also experiencing a decline in enrollment. She stated that in total last year Franklin public school enrollment was 4,848 and this year's enrollment is at 4,771. She reviewed staff headcount and noted that roles have evolved to accommodate expanded student needs. She stated that the schools have provided adjustment counselors. She reviewed the provided graphs showing elementary enrollment versus number of elementary classroom teachers 2008 to 2022; the average class size is 20.6. She reviewed the provided graph showing middle school enrollment versus number of grades 6 to 8 classroom teachers 2019 to 2022. ► Ms. Miriam Goodman, School Business Administrator, reviewed each slide of the financial update, which was provided in the Town Council's meeting packet. She provided an update of a district's Chapter 70 aid and reviewed that it is determined in three basic steps: 1.) It defines and calculates a foundation budget, an adequate funding level for each district, given the specific grades, programs, and demographic characteristics of its students. The FY2022 foundation budget

reflects Student Opportunity Act. 2.) It then determines an equitable local contribution, how much of that “foundation budget” should be paid for by each city and town’s property tax, based upon the relative wealth of the community. 3.) The remainder is funded by Chapter 70 state aid. She explained that Franklin will only receive minimum aid, \$30 per pupil, until the excess base is reduced. She stated that enrollment is down 4 percent; the foundation budget is down 0.67 percent. She reviewed the required local contribution as a percentage of foundation budget is 71 percent. She reviewed that in-district per pupil expenditure is \$14,698; the state average is \$16,936. She discussed net school spending to comply with state law. She noted that in FY20, Franklin spent \$7.6 million more than required net school spending. ► Dr. Ahern discussed the slides reviewing the impact of the pandemic on funding and implications. She stated that there were not massive layoffs; they were able to recall the staff. She reviewed highlights of strategic pandemic-related investments. She reviewed the major takeaways which included: current proposed FY22 budget plans for continued support of students in post-pandemic recovery; prioritizing class sizes and academic/SEL interventions; anticipating being able to support the FY22 budget with available revenue sources and supplemental state and federal aid to meet pandemic learning needs; Franklin is in the 25th percentile for per pupil expenditure and 22nd percentile for actual net school spending; percentage of local funding towards the FPS budget has increased and will continue to increase over time; and need to be planning for the long-term learning needs of FPS students. She discussed school facility planning including the facilities planning timelines and noted the implications of the pandemic on facilities planning. She discussed that space needs have changed based on the pandemic. ► Town Council members asked questions, made comments, confirmed information provided on the slides, and thanked the presenters for their presentation. ► In response to questions, Dr. Ahern agreed that if unfunded mandates were not upon them, they would have more funding to use for other purposes. She stated that in the budget materials they break down the mandated professional development amount. ► Ms. Goodman confirmed that any fundings allocated to the School Department that they do not spend is returned to the Town; generally, the School Department spends 99 percent of the funding, so there is very little returned. She reviewed the per pupil spending calculation. ► Dr. Ahern stated, in response to how Franklin test scores compare to the towns that are providing more per pupil spending, that she did not have that answer tonight. She discussed that they are seeing some students who are not at grade level expectations due to the pandemic year; she stated curriculum specialists and interventionists are providing a critical role in addressing this. She discussed that the MCAS may not reflect higher level skills of students. She stated that from the Department of Education, they are not allowed to do only remote learning at this time. She noted that there are trends that have emerged regarding drug addiction and gave thanks to the SAFE Coalition. She discussed how success/outcomes are measured. She stated that they are in an environment where they measure it with test scores. She stated that there are remarkable things going on at the high school where students are exceeding at national challenges such as DECA and the mock trial team. She stated that post-secondary pursuits are a way to measure success. She stated that in younger students, measures of success include the eighth-grade civics projects. She stated that she would love to see more project-based learning. She reviewed the U.S. News Report and stated that the student to teacher ratio is not favorable and it does cost the Town in the rankings; they also look at test scores which are related to the student to teacher ratio. She reviewed the formula for receiving the expected local contribution from the Town and the student enrollment decrease. ► Mr. Hellen reviewed the aggregate wealth model enacted in 2006 which balances income wealth and land values in the community. He stated that the town administrator presents the Town budget as part of the process. He stated that all departments are obligated to give the finance director and town administrator a proposed FY23 budget; then around March, all departments are met with and every line item is evaluated. In April, the Finance Committee process begins and the Town Council budget review process is in May. He stated there is a dialogue between him and every department including the schools regarding each department’s proposed budget. He encouraged citizens to look at the budget narratives and documents and participate in the upcoming meetings to lend their voices to these issues. ► Dr. Ahern confirmed that the Franklin schools are having food supply-chain issues. She stated that the percentage of students choosing to go to private schools is staying the same. She stated that there seems to be an increase in home schooling. She explained that although there are so many specialists, it is not

taking away from the classroom. She stated that, now, a team of people are supporting the classroom; there is a more diverse set of needs in the classroom. ► Director of Public Facilities Michael D'Angelo stated that the final phase install is being completed this week; all buildings will have UVI installed. ► Ms. Goodman discussed the bus driver shortage. She stated that all students are begin transported to and from school; after school activities and athletic runs are having struggles being supported.

SUBCOMMITTEE REPORTS:

- a. **Capital Budget Subcommittee.** ► None.
- b. **Budget Subcommittee.** ► None.
- c. **Economic Development Subcommittee.** ► Ms. Hamblen stated that the next meeting is October 20th prior to the Town Council meeting.

LEGISLATION FOR ACTION:

Note: Two-Thirds Vote requires six votes; Majority Vote requires majority of members present and voting.

- a. ***Resolution 21-54: A Resolution Adopting the Town of Franklin 2021 Housing Production Plan (Motion to Approve Resolution 21-54 - Majority Vote).*** ► Councilor Jones read the resolution. ► **MOTION to Approve Resolution 21-54: A Resolution Adopting the Town of Franklin 2021 Housing Production Plan by Dellorco. SECOND by Hamblen. Discussion:** ► Mr. Hellen stated approval of the plan was a goal for the Town Council and Town Administrator for this legislative session, as voted on by the Town Council in January 2020. The last local and state approved plan was in 2012 and is outdated. He reminded the community that this is only a plan; there are no requirements to implement any of these items. This plan will very likely receive state approval for checking all of the boxes they require. The plan received unanimous support from the Town Council's Economic Development Committee (EDC) in June. The Planning Board unanimously approved the Plan at its September 27, 2021, meeting. He stated that HPP guidance requires Town Council and Planning Board approval in order for the State to approve the plan. He thanked all those involved in the preparation of this plan. ► Councilor Bissanti stated that he hopes they can obtain these goals; he thinks it can be done. This is a framework and road map. ► Mr. Hellen confirmed this plan includes Franklin Ridge. ► Councilor Chandler stated that senior housing is very important. ► Councilor Hamblen stated that this was one of the EDC goals. She thanked the Department of Planning and Community Development for their hard work on this. ► Councilor Jones stated that this plan is a positive step forward to address affordable housing. ► Mr. Hellen reviewed the timeline for approval when this is sent to the State. He stated that there are 60 units of senior housing at Franklin Ridge. ► **VOTE: Yes-8, No-0, Absent-0.**
- b. ***Resolution 21-55: Gift Acceptance - Veterans Department, \$1000 (Motion to Approve Resolution 21-55 - Majority Vote).*** ► Councilor Jones read the resolution. ► **MOTION to Approve Resolution 21-55: Gift Acceptance - Veterans Department, \$1000 by Dellorco. SECOND by Hamblen. Discussion:** ► Mr. Hellen thanked Mr. Joseph Halligan for his generous donation. ► **VOTE: Yes-8, No-0, Absent-0.**
- c. ***Resolution 21-56: Gift Acceptance - Conservation Commission, \$1000 (Motion to Approve Resolution 21-56 - Majority Vote).*** ► Councilor Jones read the resolution. ► **MOTION to Approve Resolution 21-56: Gift Acceptance - Conservation Commission, \$1000 by Dellorco. SECOND by Hamblen. Discussion:** ► Mr. Hellen thanked Mr. Joseph Halligan for his generous donation. He explained that Mr. Halligan has donated many times over the years to Earth Day. ► **VOTE: Yes-8, No-0, Absent-0.**
- d. ***Resolution 21-57: Gift Acceptance - Town of Franklin, Dog Park Gazebo (Motion to Approve Resolution 21-57 - Majority Vote).*** ► Councilor Jones read the resolution. ► **MOTION to Approve Resolution 21-57: Gift Acceptance - Town of Franklin, Dog Park Gazebo by Dellorco. SECOND by**

Hamblen. Discussion: ► Mr. Hellen thanked the donators for their generosity. He noted the donation has been approved by the Building Commissioner. ► **VOTE: Yes-8, No-0, Absent-0.**

- e. Resolution 21-58: Cable Funds in Support of PEG Service and Programming per MGL Ch. 44, §53F3/4 (Motion to Approve Resolution 21-58 - Majority Vote).* ► Councilor Jones read the resolution. ► **MOTION to Approve** Resolution 21-58: Cable Funds in Support of PEG Service and Programming per MGL Ch. 44, §53F3/4 by **Dellorco. SECOND** by **Hamblen. Discussion:** ► Mr. Hellen stated that this is a requirement by the State. ► **VOTE: Yes-8, No-0, Absent-0.**

TOWN ADMINISTRATOR'S REPORT: ► Mr. Hellen announced that the Town will be awarded a \$2.2 million MassWorks Grant for the reconstruction at the corner of Washington Street and Grove Street. He gave a shout-out to the Planning Board as they began the conversation based on traffic studies. He stated that between this grant, authorizations made by the Town Council, and host agreement monies, the Town will have \$3 million to improve the intersection. He thanked the legislative delegation, Marcus Partners, and others for their work on obtaining this grant. He stated that the Town was awarded \$75,000 by the Department of Housing and Community Development for a community planning grant. He stated that the downtown study that was financed will be paid for by this grant program. He stated that \$22,000 was received by the Chief of Police in a road safety grant to allow mobilize controls to help with speeding, seatbelts, and distracted driving. He stated that the Senior Center is implementing a vaccination policy; as of October 18, 2021, to enter the Senior Center, everyone will have to show proof of vaccination or they will have to wear a mask while not consuming food or beverages in the café. He noted that 49 Franklin residents have died as a result of COVID. He stated that for all Town sponsored events held in the Senior Center, that is the policy. He noted that private events held in the Senior Center do not have to follow the policy. He stated that the Senior Center staff recommends all people wear masks, if possible. He stated that there are 51 active COVID cases in Franklin. He stated that the 215 Prospect Street appraisal has been completed at \$2.065 million. The next step is that the opponents can come back with their appraisal. He stated that this week there will be another open house at the Fire Department on Saturday, October 9th, from 10 AM to 2 PM. Regarding municipal aggregation, National Grid's rate as of last week was 14.8 cents per KWh; the Town of Franklin is at 10.7 cents per KWh. He stated that according to Lisa Audette of the Franklin Housing Authority, the waiting list for Franklin housing, although not all on the waiting list are from Franklin, shows 6,087 have applied for public housing.

FUTURE AGENDA ITEMS: ► Councilor Frongillo stated that he is excited of the passing of the HPP. ► Councilor Bissanti stated that his homeless presentation will be forthcoming. ► Councilor Pellegrini stated that she would like the Housing Authority to provide an update to the Town Council.

COUNCIL COMMENTS: ► Councilor Pellegrini noted the passing of Mr. Julio Renzi, former Town Council member. ► Councilor Hamblen thanked the School Department for their presentation. She thanked the Franklin Downtown Partnership and all others involved in the Harvest Festival; it was wonderful. ► Councilor Bissanti stated that he attended the Veterans coffee; he commended Health Director Cathleen Liberty as she did a great presentation on COVID and vaccinations. He stated that the Harvest Festival was wonderful. He noted the Recreation Department and all they do. ► Councilor Chandler noted that a police exam will be given in December. He thanked the Town, DPW, and others for the great work done at the dog park; he thanked Councilor Bissanti and his family for the generous donation. ► Councilor Frongillo thanked the Downtown Partnership for the fabulous Harvest Festival. ► Councilor Jones noted the successful festivals that have been held in Franklin. He thanked the School Department for the presentation. ► Councilor Dellorco stated that the Harvest Festival was great. He thanked Councilor Bissanti for his generous donation. He gave a shout-out to the high school basketball team. ► Chair Mercer thanked Dr. Ahern for the presentation. He stated that the Harvest Festival was great success for the community. He gave condolences to the Renzi family.

EXECUTIVE SESSION: None.

ADJOURN: ► MOTION to Adjourn by Dellorco. SECOND by Jones. No Discussion. ► VOTE: Yes-8, No-0, Absent-0.

Meeting adjourned at 9:41 PM.

Respectfully submitted,

Judith Lizardi
Recording Secretary

Town of Franklin

355 East Central Street
Franklin, Massachusetts 02038-1352



Phone: (508) 520-4949
www.franklinma.gov

OFFICE OF THE TOWN ADMINISTRATOR

October 29, 2021

To: Town Council
From: Jamie Hellen, Town Administrator
Alecia Alleyne, Assistant to the Town Administrator
RE: Cultural Council Appointments

We are recommending the appointment of four new members to the Franklin Cultural Council. All four appointees will be on the board for a three year term which will expire June 30, 2024.

Proposed Appointees:

- ❖ Venus Senjam
- ❖ Patrick Kinner
- ❖ Shelley Green
- ❖ Jacob Juncker

We have included their respective volunteer forms attached with separate resolutions for each appointment.

Please let us know if you have any questions.

APPOINTMENTS



Cultural Council

Venus Senjam

177 Glen Meadow Rd.
Franklin, MA 02038

The Cultural Council has recommended the appointment of Venus Senjam to serve as a member of the Cultural Council with a three (3) year term to expire on June 30, 2024.

MOTION to ratify the appointment by the Town Administrator of Venus Senjam to serve as a member of the Cultural Council.

DATED: _____, 2021

VOTED: _____

UNANIMOUS: _____

A TRUE RECORD ATTEST:

YES: _____ **NO:** _____

ABSTAIN: _____ **ABSENT:** _____

RECUSED: _____

Town Clerk

Franklin Town Council



Town of Franklin MA

355 East Central Street

Franklin, MA 02038

Phone: 508-520-4949

Volunteer Form

Good Government Starts with You!

Date Submitted: October 8, 2021

Name: VENUS SENJAM

Home Address: 177 GLEN MEADOW RD
FRANKLIN, MA 02038

Mailing Address: 177 GLEN MEADOW RD
FRANKLIN, MA 02038

Phone Number(s):

Email Address:

Current Occupation/Employer: Not Employed

Narrative: I can volunteer 5-6 hours every week. I have a Bachelor of Technology in Electrical Engineering. I am a retired Army Major from the Indian Army where I served for 8 years from 2001 to 2009 in the Corps of Engineers. I served in the field in remote areas for 3 years gaining a lot of insight in man-management and leadership under strenuous conditions before moving to Military Engineer Services posting where I was responsible for power and water supply management. I served as Assistant Garrison Engineer (Electrical and Mechanical) at an Air Force Station and was part of the team organizing one of the biggest military aviation exhibitions in Asia held every two years. I have experience in budgeting, planning, estimating, and executing projects related to residential buildings, hospitals, electricals, and external water supply systems.

Currently, I am a part-time fashion designer & quilter doing fashion shows along with continued education from the School Of Design, Boston. Some of my works are available at <https://www.venusjenjam.com/>

Board(s) / Committee(s): ___ Franklin Cultural Council

APPOINTMENTS



Cultural Council

Patrick Kinner

6 Nicholas Drive
Franklin, MA 02038

The Cultural Council has recommended the appointment of Patrick Kinner to serve as a member of the Cultural Council with a three (3) year term to expire on June 30, 2024.

MOTION to ratify the appointment by the Town Administrator of Patrick Kinner to serve as a member of the Cultural Council.

DATED: _____, 2021

VOTED: _____

UNANIMOUS: _____

A TRUE RECORD ATTEST:

YES: _____ **NO:** _____

ABSTAIN: _____ **ABSENT:** _____

RECUSED: _____

Town Clerk

Franklin Town Council



Town of Franklin MA

355 East Central Street

Franklin, MA 02038

Phone: 508-520-4949

Volunteer Form

Good Government Starts with You!

Date Submitted: May 26, 2021

Name: Patrick Kinner

Home Address: 6 NICHOLAS DRIVE
Franklin

Mailing Address: 6 NICHOLAS DRIVE
Franklin

Phone Number(s):

Email Address:

Current Occupation/Employer: Public Health Researcher/Program Evaluation Consultant

Narrative: I have spent a lot of my personal and professional time organizing activities and events, and facilitating involvement with people from a wide range of backgrounds. Ensuring that local events and services are equally available to all members of a community is very important to me. I also understand the value of community engagement, and how the arts can bring people together. I've seen in at school events I've been involved in, through the many, varied events at the public library I helped to support, and in how public spaces, public art, and public gatherings can both foster community and spur creativity and connections between people. I'm happy to bring these life experiences to the FCC, so that we can build similar experiences for everyone in Franklin.

Board(s) / Committee(s): ___ Franklin Cultural Council

APPOINTMENTS



Cultural Council

Shelley Green

7 Kingswood Drive
Franklin, MA 02038

The Cultural Council has recommended the appointment of Shelley Green to serve as a member of the Cultural Council with a three (3) year term to expire on June 30, 2024.

MOTION to ratify the appointment by the Town Administrator of Shelley Green to serve as a member of the Cultural Council.

DATED: _____, 2021

VOTED: _____

UNANIMOUS: _____

A TRUE RECORD ATTEST:

YES: _____ **NO:** _____

ABSTAIN: _____ **ABSENT:** _____

RECUSED: _____

Town Clerk

Franklin Town Council



Town of Franklin MA

355 East Central Street

Franklin, MA 02038

Phone: 508-520-4949

Volunteer Form

Good Government Starts with You!

Date Submitted: June 7, 2021

Name: Shelley C Green

Home Address: 7 Kingswood Drive
FRANKLIN, MA 02038

Mailing Address: 7 Kingswood Drive
FRANKLIN, MA 02038

Phone Number(s):

Email Address:

Current Occupation/Employer: Sr Business Systems Analyst/Broadridge Financial Sevices

Narrative: 5-6 hours a week

Computer literate

Long time board member/president Ford Hall Forum in Boston. Oversaw 100th Anniversary celebration events, assisted in negotiating move from NEU to Suffolk, strategic planning, event planning (program planning and fund raising)

Board Member Metrowest Performing Arts (2 years)

First Lego League judge and volunteer (trained judges, mentored individuals who wanted to run teams)

Writing skills - have written press releases and editor of women's pilot organization newsletter; published food writer

Managed day to day operations of a theatrical production company in Philadelphia

Project management (day job)

Board(s) / Committee(s): ___ Franklin Cultural Council

APPOINTMENTS



Cultural Council

Jacob Juncker

40 Marvin Ave.

Franklin, MA 02038

The Cultural Council has recommended the appointment of Jacob Juncker to serve as a member of the Cultural Council with a three (3) year term to expire on June 30, 2024.

MOTION to ratify the appointment by the Town Administrator of Jacob Juncker to serve as a member of the Cultural Council.

DATED: _____, 2021

VOTED: _____

UNANIMOUS: _____

A TRUE RECORD ATTEST:

YES: _____ **NO:** _____

ABSTAIN: _____ **ABSENT:** _____

RECUSED: _____

Town Clerk

Franklin Town Council



Town of Franklin MA

355 East Central Street

Franklin, MA 02038

Phone: 508-520-4949

Volunteer Form

Good Government Starts with You!

Date Submitted: August 18, 2021

Name: Jacob W Juncker

Home Address: 40 Marvin Ave.
Franklin

Mailing Address: 40 Marvin Ave.
Franklin MA 02038

Phone Number(s):

Email Address:

Current Occupation/Employer: Clergy / Franklin United Methodist Church

Narrative: I can commit to a few nights per week. I believe my vocation as a pastor is a good fit for the Cultural Council as the church is a major facilitator of the arts.

Board(s) / Committee(s): ___ Franklin Cultural Council

Town of Franklin

355 East Central Street
Franklin, Massachusetts 02038-1352



Phone: (508) 520-4949
www.franklinma.gov

OFFICE OF THE TOWN ADMINISTRATOR

Memorandum

October 29, 2021

To: Town Council
From: Jamie Hellen, Town Administrator
Alecia Alleyne, Assistant to the Town Administrator

Re: License Transaction: Change of Officers/Directors/LLC Managers, Change of Ownership Interest and Change of Manager

NEP OPS-T, LLC d/b/a Residence Inn Boston Franklin, is seeking approval for a Change of Officers/Directors/ LLC Managers, Change of ownership Interest, and Change of Manager.

Their application submitted to the ABCC (attached) in August 2021 named Kelsey Quinones as the proposed new Manager; however per the recent application modification submitted by Whitney Gillings, License Consultant for Residence Inn Boston Franklin, the proposed new manager has changed to Mohamed Hashesh.

All Departments have signed off on this application.

LICENSE TRANSACTION



**License Modification, Change of Officers/Directors/ LLC Managers,
Change of Ownership Interest and Change of Manager**

NEP OPS-T, LLC

Residence Inn Boston Franklin
4 Forge Parkway
Franklin, MA 02038

NEP OPS-T, LLC d/b/a Residence Inn Boston Franklin, is seeking approval for a Change of Officers/Directors/ LLC Managers and Change of Ownership Interest as described in their Application for Multiple Amendments submitted to the Alcoholic Beverages Control Commission on August 6, 2021.

NEP OPS-T, LLC d/b/a Residence Inn Boston Franklin is also seeking approval for a Change of Manager to Mohamed Hashesh.

All Departments have signed off on this application.

MOTION to approve the request by NEP OPS-T, LLC d/b/a Residence Inn Boston Franklin, for a Change of Officers/Directors/ LLC Managers and Change of ownership Interest, and also a Change of Manager to Mohamed Hashesh as described above.

DATED: _____, 2021

VOTED:

UNANIMOUS: _____

A True Record Attest:

YES: _____ **NO:** _____

ABSTAIN: _____

ABSENT: _____

RECUSED: _____

Town Clerk

Franklin Town Council



Via FedEx 774471448320
August 6, 2021

Jamie Hellen
Town of Franklin
355 E. Central St.
Third Floor
Franklin, MA 02038

RE: Residence Inn Boston Franklin
4 Forge Parkway
Franklin, MA 02038

Dear Jamie:

Enclosed please find an amendment application for the liquor license at the above referenced hotel to change the LLC Officers & Managing Directors. There has be no change to the Manager of Record, Susan Perrothers.

I will be you point of contact so please let me know if you have any questions or need additional information.

Sincerely,

A handwritten signature in blue ink that reads "Whitney Gillings". The signature is written in a cursive, flowing style.

Whitney Anderson Gillings
972-354-6472
wgillings@bluebonnetconsulting.com

Payment Confirmation

YOUR PAYMENT HAS PROCESSED AND THIS IS YOUR RECEIPT

Your account has been billed for the following transaction. You will receive a receipt via email.



Transaction Processed Successfully.

INVOICE #: f85f907d-f886-4ac8-9d15-e1644c900d3d

Description	Applicant, License or Registration Number	Amount
FILING FEES-RETAIL	00075-HT-0430	\$200.00
		\$200.00

Total Convenience Fee: **\$4.70**

Date Paid: **8/6/2021 1:40:41 PM EDT**

Total Amount Paid: **\$204.70**

Payment On Behalf Of

License Number or Business Name:
00075-HT-0430

Fee Type:
FILING FEES-RETAIL

Billing Information

First Name:
Elise

Last Name:
Turner

Address:
12700 Hillcrest Rd., Suite 220

City:
DALLAS

State:
TX

Zip Code:
75230

Email Address:
WGILLINGS@BLUEBONNETCONSULTING.COM



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
 www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
 MONETARY TRANSMITTAL FORM

APPLICATION FOR MULTIPLE AMENDMENTS

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL LICENSING AUTHORITY.

ECRT CODE: RETA

Please make \$200.00 payment here: [ABCC PAYMENT WEBSITE](#)

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE PAYMENT RECEIPT

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

00075-HT-0430

ENTITY/ LICENSEE NAME

ADDRESS

CITY/TOWN

STATE

ZIP CODE

For the following transactions (Check all that apply):

- New License
- Change of Location
- Change of Class (i.e. Annual / Seasonal)
- Change Corporate Structure (i.e. Corp / LLC)
- Transfer of License
- Alteration of Licensed Premises
- Change of License Type (i.e. club / restaurant)
- Pledge of Collateral (i.e. License/Stock)
- Change of Manager
- Change Corporate Name
- Change of Category (i.e. All Alcohol/Wine, Malt)
- Management/Operating Agreement
- Change of Officers/
Directors/LLC Managers
- Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees)
- Issuance/Transfer of Stock/New Stockholder
- Change of Hours
- Other
- Change of DBA

THE LOCAL LICENSING AUTHORITY MUST MAIL THIS TRANSMITTAL FORM ALONG WITH COMPLETED APPLICATION, AND SUPPORTING DOCUMENTS TO:

Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3
 Chelsea, MA 02150-2358



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
 www.mass.gov/abcc

APPLICATION FOR MULTIPLE AMENDMENTS

1. BUSINESS ENTITY INFORMATION

Entity Name	Municipality	ABCC License Number
NEP OPS-T, LLC	Town of Franklin	00075-HT-0430

Please provide a narrative overview of the transaction(s) being applied for. On-premises applicants should also provide a description of the intended theme or concept of the business operation. Attach additional pages, if necessary.

APPLICATION CONTACT

The application contact is the person who should be contacted with any questions regarding this application.

Name	Title	Email	Phone
Whitney Gillings	License Consultant	wgillings@bluebonnetconsulting.com	972-354-6472

2. AMENDMENT-Change of License Classification

<input type="checkbox"/> Change of License Category All Alcohol, Wine and Malt, Wine Malt and Cordials	Last-Approved License Category	
	Requested New License Category	
<input type="checkbox"/> Change of License Class Seasonal or Annual	Last-Approved License Class	
	Requested New License Class	
<input type="checkbox"/> Change of License Type* i.e. Restaurant to Club *Certain License Types CANNOT change once issued*	Last-Approved License Type	
	Requested New License Type	

3. AMENDMENT-Change of Business Entity Information

<input type="checkbox"/> Change of Corporate Name	Last-Approved Corporate Name:	
	Requested New Corporate Name:	
<input type="checkbox"/> Change of DBA	Last-Approved DBA:	
	Requested New DBA:	
<input type="checkbox"/> Change of Corporate Structure LLC, Corporation, Sole Proprietor, etc	Last-Approved Corporate Structure	
	Requested New Corporate Structure	

4. AMENDMENT-Pledge Information

<input type="checkbox"/> Pledge of License	To whom is the pledge being made:	
<input type="checkbox"/> Pledge of Inventory		
<input type="checkbox"/> Pledge of Stock		

5. AMENDMENT-Change of Manager

Change of License Manager

A. MANAGER INFORMATION

The individual that has been appointed to manage and control the licensed business and premises.

Proposed Manager Name Date of Birth SSN

Residential Address

Email Phone

Please indicate how many hours per week you intend to be on the licensed premises Last-Approved License Manager

B. CITIZENSHIP/BACKGROUND INFORMATION

Are you a U.S. Citizen? Yes No *Manager must be a U.S. Citizen

If yes, attach one of the following as proof of citizenship US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers.

Have you ever been convicted of a state, federal, or military crime? Yes No

If yes, fill out the table below and attach an affidavit providing the details of any and all convictions. Attach additional pages, if necessary, utilizing the format below.

Date	Municipality	Charge	Disposition
		n/a	

C. EMPLOYMENT INFORMATION

Please provide your employment history. Attach additional pages, if necessary, utilizing the format below.

Start Date	End Date	Position	Employer	Supervisor Name
		See attached		

D. PRIOR DISCIPLINARY ACTION

Have you held a beneficial or financial interest in, or been the manager of, a license to sell alcoholic beverages that was subject to disciplinary action? Yes No If yes, please fill out the table. Attach additional pages, if necessary,utilizing the format below.

Date of Action	Name of License	State	City	Reason for suspension, revocation or cancellation
	n/a			

I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate:

Manager's Signature Date

6. AMENDMENT-Change of Officers, Stock or Ownership Interest

Change of Officers/Directors **Change of Ownership Interest (LLC Managers/LLP Partners, Trustees)** **Change of Stock (E.g. New Stockholder/ Transfer or Issuance of Stock)**

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:
On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers - At least 50% must be US citizens;
Off Premises(Liquor Store) Directors or LLC Managers - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal	Residential Address	SSN	DOB
Paul Ray Womble	[REDACTED]	[REDACTED]	11-04-1963

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Managing Director	0	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
see attached AFTER organizational char			

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Additional pages attached? Yes No

CRIMINAL HISTORY

Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions.

Yes No

MANAGEMENT AGREEMENT

Are you requesting approval to utilize a management company through a management agreement? Please provide a copy of the management agreement.

Yes No

6. AMENDMENT-Change of Officers, Stock or Ownership Interest

6B. CURRENT OFFICERS, STOCK OR OWNERSHIP INTEREST

List the individuals and entities of the current ownership. Attach additional pages if necessary utilizing the format below.

Name of Principal	Title/Position	Percentage of Ownership
Laura Benner	Managing Director	0%
Keon Marvasti	Managing Director	0%
See attached BEFORE organizational chart		

6A. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality
See attached list for Paul Womble			

6B. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality
See attached list for Paul Womble			

6C. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation
n/a			

APPLICANT'S STATEMENT

I, Paul Womble the: sole proprietor; partner; corporate principal; LLC/LLP manager
Authorized Signatory

of NEP OPS-T, LLC
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature: 

Date:

Title: Managing Director

CORPORATE VOTE

The Board of Directors or LLC Managers of Entity Name
duly voted to apply to the Licensing Authority of and the
City/Town
Commonwealth of Massachusetts Alcoholic Beverages Control Commission on Date of Meeting

For the following transactions (Check all that apply):

- | | | | |
|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal) | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License | <input type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club / restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input checked="" type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input checked="" type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | | <input type="checkbox"/> Other <input type="text"/> | <input type="checkbox"/> Change of DBA |

"VOTED: To authorize Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

"VOTED: To appoint Name of Liquor License Manager

as its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of the conduct of all business therein as the licensee itself could in any way have and exercise if it were a natural person residing in the Commonwealth of Massachusetts."

A true copy attest,

For Corporations ONLY
A true copy attest,



Corporate Officer /LLC Manager Signature

Corporation Clerk's Signature

(Print Name)

(Print Name)



Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street, First Floor
Boston, MA 02114

DEBORAH B. GOLDBERG
TREASURER AND RECEIVER GENERAL

CORI REQUEST FORM

JEAN M. LORIZIO, ESQ.
CHAIRMAN

The Alcoholic Beverages Control Commission ("ABCC") has been certified by the Criminal History Systems Board to access conviction and pending Criminal Offender Record Information ("CORI"). For the purpose of approving each shareholder, owner, licensee or applicant for an alcoholic beverages license, I understand that a criminal record check will be conducted on me, pursuant to the above. The information below is correct to the best of my knowledge.

ABCC LICENSE INFORMATION

ABCC NUMBER: <small>(IF EXISTING LICENSEE)</small>	00075-HT-0430	LICENSEE NAME:	NEP OPS-T, LLC	CITY/TOWN:	Town of Franklin
-------------------------------------------------------	---------------	----------------	----------------	------------	------------------

APPLICANT INFORMATION

LAST NAME:	Womble	FIRST NAME:	Paul	MIDDLE NAME:	Ray
MAIDEN NAME OR ALIAS (IF APPLICABLE):	[REDACTED]	PLACE OF BIRTH:	[REDACTED]		
DATE OF BIRTH:	[REDACTED]	SSN:	[REDACTED]	ID THEFT INDEX PIN (IF APPLICABLE):	[REDACTED]
MOTHER'S MAIDEN NAME:	[REDACTED]	DRIVER'S LICENSE #:	[REDACTED]	STATE LIC. ISSUED:	[REDACTED]
GENDER:	[REDACTED]	HEIGHT:	[REDACTED]	WEIGHT:	[REDACTED]
EYE COLOR:	[REDACTED]				
CURRENT ADDRESS:	[REDACTED]				
CITY/TOWN:	[REDACTED]	STATE:	[REDACTED]	ZIP:	[REDACTED]
FORMER ADDRESS:	[REDACTED]				
CITY/TOWN:	[REDACTED]	STATE:	[REDACTED]	ZIP:	[REDACTED]

PRINT AND SIGN

PRINTED NAME:	Paul Ray Womble	APPLICANT/EMPLOYEE SIGNATURE:	
---------------	-----------------	-------------------------------	--

NOTARY INFORMATION

On this March 5, 2021 before me, the undersigned notary public, personally appeared Paul Ray Womble
(name of document signer), proved to me through satisfactory evidence of identification, which were known to me
to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

NOTARY



DIVISION USE ONLY

REQUESTED BY:	[REDACTED]
	<small>SIGNATURE OF CORI-AUTHORIZED EMPLOYEE</small>

The DCI Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identity Theft PIN Number by the DCI. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. ALL CORI request forms that include this field are required to be submitted to the DCI via mail or by fax to (617) 660-4614.



JEAN M. LORIZIO, ESQ.
CHAIRMAN

Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150

CORI REQUEST FORM

The Alcoholic Beverages Control Commission ("ABCC") has been certified by the Criminal History Systems Board to access conviction and pending Criminal Offender Record Information ("CORI"). For the purpose of approving each shareholder, owner, licensee or applicant for an alcoholic beverages license, I understand that a criminal record check will be conducted on me, pursuant to the above. The information below is correct to the best of my knowledge.

ABCC LICENSE INFORMATION

ABCC NUMBER: (IF EXISTING LICENSEE) LICENSEE NAME: CITY/TOWN:

APPLICANT INFORMATION

LAST NAME: FIRST NAME: MIDDLE NAME:

MAIDEN NAME OR ALIAS (IF APPLICABLE): PLACE OF BIRTH:

DATE OF BIRTH: SSN: ID THEFT INDEX PIN (IF APPLICABLE):

MOTHER'S MAIDEN NAME: DRIVER'S LICENSE #: STATE LIC. ISSUED:

GENDER: HEIGHT: WEIGHT: EYE COLOR:

CURRENT ADDRESS:

CITY/TOWN: STATE: ZIP:

FORMER ADDRESS:

CITY/TOWN: STATE: ZIP:

PRINT AND SIGN

PRINTED NAME: APPLICANT/EMPLOYEE SIGNATURE: ←

NOTARY INFORMATION

On this before me, the undersigned notary public, personally appeared (name of document signer), proved to me through satisfactory evidence of identification, which were to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

 NOTARY



DIVISION USE ONLY

REQUESTED BY: SIGNATURE OF CORI-AUTHORIZED EMPLOYEE:

The DCJ Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identify Theft PIN Number by the DCJ. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. ALL CORI request forms that include this field are required to be submitted to the DCJ via mail or by fax to (617) 660-4614.

Residence Inn Boston Franklin

Resume for Kelsey Quinones

I have 13+ years of working in the Hospitality/Customer Service industry specifically in hotel environments. My core focus is to provide top-notch quality customer service to hotel guests while representing my organization & supporting my colleagues in fast-paced hospitality environments. I have often acted as property General Manager when GM position is open or when GM is away for extended periods of time and supervised daily operations of the property including AR, AP, HR, Employee and Guest Relations.

Recent Work Experience:

2020 – Present: Residence Inn Boston Franklin – 4 Forge Pkwy., Franklin, MA 02038

- Supervisor: Susan Perrothers

2020 – Present: Residence Inn Foxborough – 250 Foxborough Blvd., Foxborough MA, 02035

- Supervisor: Jesse Weatherford

2018 – 2020: TownePlace Suites Chelsea – 30 Eastern Ave, Chelsea, MA 02150

- Supervisor: Michelle Haselhuhm

2012 – 2018: Present: Residence Inn Boston Franklin – 4 Forge Pkwy., Franklin, MA 02038

- Supervisor: Susan Perrothers

2010 – 2012: Residence Inn Chelsea – 200 Maple St., Chelsea, MA 02150

- Supervisor: Chris Moulten



Town of Franklin, MA
Department of the Town Clerk
355 East Central Street, Franklin, MA 02038

Date Issued: December
29, 2017
Record #: 30437
Certificate #: 17-275

BUSINESS VERIFICATION CERTIFICATE

In conformity with the provisions of Chapter 110, Section 5 of the General Laws, as amended, the undersigned hereby declare(s) that a business under the title of:

RESIDENCE INN BY MARRIOTT is conducted at: 4 Forge Parkway

by the following person:

FULL NAME

NEP-OPS-T, LLC

RESIDENCE

222 LAKEVIEW AVE # 200, WEST PALM
BEACH, FLORIDA 33401

A certificate issued in accordance with this section shall be in force and effect for four years from the date of issue and shall be renewed each four years thereafter so long as such business shall be conducted and shall lapse and be void unless so renewed.

Expiration Date: 12-29-2021

Signature on file
Business Owner Signature #1

Business Owner Signature #2

A True Attest Copy

Teresa M. Burr

Teresa M. Burr
Town Clerk

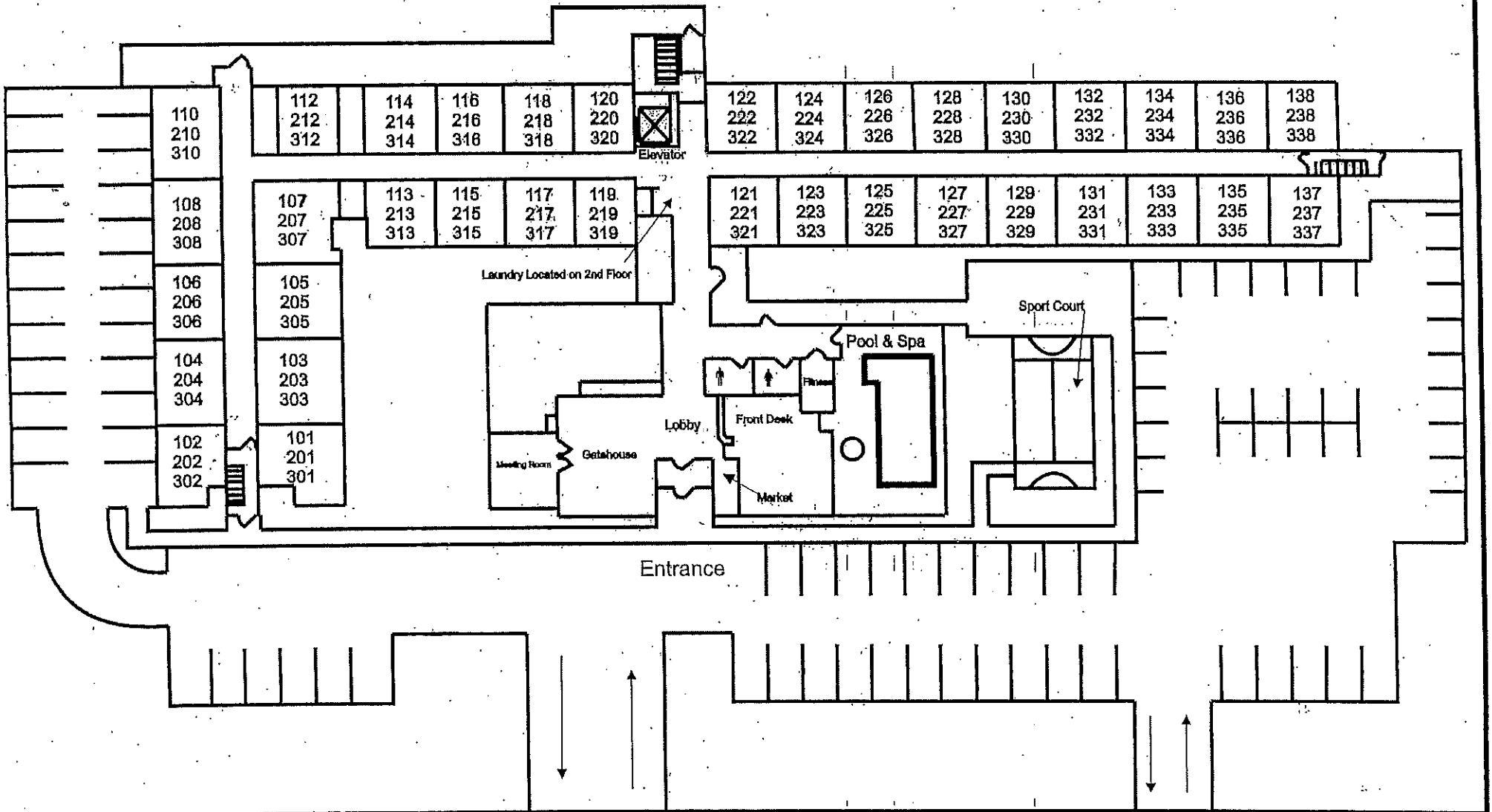
To learn more, scan this barcode or visit franklinma.viewpointcloud.com/#!/records/30437



Residence Inn® Marriott

Franklin Residence Inn

4 Forge Parkway
Franklin MA 02038
Tel: 508-541-8188
Fax: 508-541-8988





CERTIFICATE OF COMPLIANCE WITH STATE LAWS

Pursuant to M.G.L Chapter 62C, Sec 49A, and M.G.L. Ch. 151A, Section 19A, the undersigned acting on behalf on the License Holder, certifies under the penalty of perjury that, to the best of the undersign's knowledge and belief, the License Holder is in compliance with all laws of the Commonwealth of Massachusetts relating to taxes, reporting of employees and contractors, and withholding and remitting child support*.



** Signature of Individual or Corporate License Holder (Mandatory)

NEP OPS-T, LLC; 47-3510191

*** License Holder's Social Security Number/or Federal Identification Number

By: Paul Womble on behalf of NEP OPS-T, LLC

Date: _____

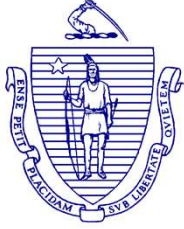
Corporate Officer

(Mandatory, if applicable)

*The provision in the Attestation of relating to child support applies only when the License Holder is an individual.

**Approval of or a renewal of a license will not be granted unless this certification clause is signed by the applicant. For all corporations, a certified copy of the vote of the Board of Directors must be provided.

*** Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Providers who fail to correct their non-filing or delinquency will not have a license or other agreement issued, renewed or extended. This request is made under the authority of Massachusetts General Laws, Chapter 62C, section 49A.



The Commonwealth of Massachusetts
 Department of Industrial Accidents
 1 Congress Street, Suite 100
 Boston, MA 02114-2017
 www.mass.gov/dia

Workers' Compensation Insurance Affidavit: General Businesses.
 TO BE FILED WITH THE PERMITTING AUTHORITY.

Applicant Information

Please Print Legibly

Business/Organization Name: Residence Inn Franklin

Address: 4 Forge Parkway

City/State/Zip: Franklin, MA 02038 Phone #:

<p>Are you an employer? Check the appropriate box:</p> <p>1. <input checked="" type="checkbox"/> I am a employer with _____ employees (full and/ or part-time).*</p> <p>2. <input type="checkbox"/> I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]</p> <p>3. <input type="checkbox"/> We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]**</p> <p>4. <input type="checkbox"/> We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]</p>	<p>Business Type (required):</p> <p>5. <input type="checkbox"/> Retail</p> <p>6. <input type="checkbox"/> Restaurant/Bar/Eating Establishment</p> <p>7. <input type="checkbox"/> Office and/or Sales (incl. real estate, auto, etc.)</p> <p>8. <input type="checkbox"/> Non-profit</p> <p>9. <input type="checkbox"/> Entertainment</p> <p>10. <input type="checkbox"/> Manufacturing</p> <p>11. <input type="checkbox"/> Health Care</p> <p>12. <input checked="" type="checkbox"/> Other <u>Hotel</u></p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.
 **If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.

Insurance Company Name: Sompo American Insurance Company

Insurer's Address: 777 3rd Avenue 24th Floor

City/State/Zip: New York, NY 10017 United States

Policy # or Self-ins. Lic. # JCDS1037L0 Expiration Date: 03/31/2022

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.

Signature: [Signature] Date: _____

Phone #: 972-444-9700

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: _____ Permit/License # _____

Issuing Authority (circle one):
 1. Board of Health 2. Building Department 3. City/Town Clerk 4. Licensing Board 5. Selectmen's Office
 6. Other _____

Contact Person: _____ Phone #: _____



**COMMONWEALTH OF MASSACHUSETTS
Town of Franklin**

Licensing

Residence Inn by Franklin

4 Forge Parkway

**IS HEREBY GRANTED A INNHOLDER LICENSE
THE LICENSE IS ISSUED IN CONFORMITY WITH THE AUTHORITY GRANTED NY GENERAL
LAWS, CHAPTER 140 AND AMENDMENTS THERETO.**

This permit is granted in conformity with the statutes and ordinances relating thereto, and
expires:

December 31, 2021

unless sooner suspended or revoked.

Jamie Hellen, Town Administrator

LICENSE NUMBER
20-539

FEE
\$125.00

DATE ISSUED
December 3, 2020

Mohamed Hashesh

Cambridge MA • Phone: 617-852-6697 • E-Mail: mohamedhashesh@me.com

Hotel General Management

Result-oriented and dedicated business professional with demonstrated success in general management within the hospitality industry. History of providing effective leadership with focus on total organizational coordination to efficiently manage operations, provide innovative concepts, supervise high performing teams, and oversee staff. Extensive background in accounting and P&L, with the proven ability to control cost and positively impact the bottom line. Track record of exceeding goals, boosting sales, and increasing revenue without compromising customer service.

Experience

Highgate Hotels- Area Managing Director of Operations **April 2019 -Present**

Cambridge Courtyard by Marriott

Ensuring each and every guest have a great experience in a 216-room full service hotel through 85 union employees. Administer operating and capital budgets and manage strategic operations of the hotel to ensure profitability and return on owner investment.

The Arcadian Hotel Brookline

Managing a 230 room independent non-union property in the heart of Brookline. Managing renovation, rebranding, and restructuring of the property.

Shaner Hotels- Durham Marriott City Center

General Manager **August 2013- April 2019**

* **Task Force General Manager for Marriott Chattanooga Downtown**

* **Task Force General Manager for French Leave Resort Eleuthera Autograph Collection**

* **Task Force General Manager for Buffalo Marriott Harbor Center in Buffalo New York.**

* **Task Force General Manager for Courtyard Marriott Glassboro, New Jersey**

* **Director of Operations for Southbridge Hotel and Conference Center**

Revere Hotel Boston Common, 200 Stuart St. Boston, Ma- Director of Rooms **February 2011 to July 2013**

Liberty Hotel, 215 Charles St Boston, Ma- Director of Housekeeping
February 2011

January 2008 to

Education

American University of Cairo

September 2002- May 2006

LICENSE TRANSACTION



License Modification, Change of Officers/Directors/LLC Managers

Shaw's Supermarkets, Inc. d/b/a Shaw's

255 East Central Street

Franklin, MA 02038

Shaw's Supermarkets, Inc. d/b/a Shaw's is seeking approval for a License Modification, for a Change of Officers/Directors/LLC Managers as described in their Application for Multiple Amendments submitted to the Alcoholic Beverages Control Commission on August 30, 2021.

All Departments have signed off on this application.

MOTION to approve the request by Shaw's Supermarkets, Inc. d/b/a Shaw's for a License Modification, Change of Officers/Directors/LLC Managers as described above.

DATED: _____, 2021

VOTED:

UNANIMOUS: _____

A True Record Attest:

YES: _____ **NO:** _____

ABSTAIN: _____

ABSENT: _____

RECUSED: _____

Town Clerk

Franklin Town Council

McDERMOTT
QUILTY &
MILLER LLP

28 STATE STREET, SUITE 802
BOSTON, MA 02109

WWW.MQMLLP.COM

October 8, 2021

Via Federal Express Delivery

Attn: Mr. Jamie Hellen, Town Administrator
355 East Central Street (Third Floor)
Route 140
Franklin, MA 02038

**Re: Application for Change of Officers/Directors to a §15 Retail Package Store License
Shaw's Supermarkets, Inc. d/b/a Shaw's
255 E Central Street, Franklin, MA 02038**

Dear Mr. Hellen:

This office represents Shaw's Supermarkets, Inc. in its application for a Change of Officers/Directors to its §15 Retail Package Store License exercised at its long-existing grocery store located at the above-referenced address. Enclosed please find **one (1) set of originals** of the required application materials and copies of the required supplemental documents regarding the above-referenced matter:

1. Monetary Transmittal Form with ABCC Payment Confirmation;
2. \$500 Payment To Be Made on ViewPoint Portal;
3. ABCC Application for Amendment;
4. ABCC Applicant's Statement;
5. Business Entity Summary;
6. Articles of Organization;
7. Corporate Vote;
8. ABCC CORI Request Forms;
9. DOR Certificate of Good Standing; and
10. DUA Certificate of Compliance;

Understanding the current situation with COVID-19 and public hearings, please kindly assign this matter for hearing at the next available hearing date (virtual or otherwise).

Thank you for your attention to and courtesy in this matter. If you have any questions, please do not hesitate to contact me.

Attn: Mr. Jamie Hellen, Town
Administrator
October 8th , 2021
Page Two of Two

Very Truly Yours,

Nicholas J. Zozula, Esq.

NJZ/aw
Enclosures



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
 www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
 MONETARY TRANSMITTAL FORM

APPLICATION FOR MULTIPLE AMENDMENTS

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL LICENSING AUTHORITY.

ECRT CODE: RETA

Please make \$200.00 payment here: [ABCC PAYMENT WEBSITE](#)

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE PAYMENT RECEIPT

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

00033-PK-0430

ENTITY/ LICENSEE NAME

ADDRESS

CITY/TOWN

STATE

ZIP CODE

For the following transactions (Check all that apply):

- New License
- Change of Location
- Change of Class (i.e. Annual / Seasonal)
- Change Corporate Structure (i.e. Corp / LLC)
- Transfer of License
- Alteration of Licensed Premises
- Change of License Type (i.e. club / restaurant)
- Pledge of Collateral (i.e. License/Stock)
- Change of Manager
- Change Corporate Name
- Change of Category (i.e. All Alcohol/Wine, Malt)
- Management/Operating Agreement
- Change of Officers/
Directors/LLC Managers
- Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees)
- Issuance/Transfer of Stock/New Stockholder
- Change of Hours
- Other
- Change of DBA

THE LOCAL LICENSING AUTHORITY MUST MAIL THIS TRANSMITTAL FORM ALONG WITH COMPLETED APPLICATION, AND SUPPORTING DOCUMENTS TO:

**Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3
 Chelsea, MA 02150-2358**

Payment Confirmation

YOUR PAYMENT HAS PROCESSED AND THIS IS YOUR RECEIPT

Your account has been billed for the following transaction. You will receive a receipt via email.



Transaction Processed Successfully.

INVOICE #: 8c67d99f-4d47-4d5b-8f00-2dbd513a052f

Description	Applicant, License or Registration Number	Amount
FILING FEES-RETAIL	00033-PK-0430	\$200.00
		\$200.00

otal Conv nience Fe **\$4.70**

Date Paid: **8/30/2021 4 00:06 PM ED**

Total Amount Paid: **\$204.70**

Payment On Behalf Of

License Number or Business Name:
00033-PK-0430

Fee Type:
FILING FEES-RETAIL

Billing Information

First Name:
Secretary

Last Name:
Corporate

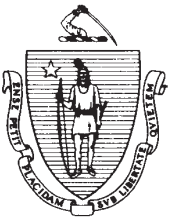
Address:
250 Parkcenter Blvd

City:
Boise

State:
ID

Zip Code:
83706

Email Address:
legal.licensing.team@albertsons.com



*The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc*

APPLICATION FOR MULTIPLE AMENDMENTS

Please select all of the amendments you are applying for(continued):

CHANGE OF OFFICERS/DIRECTORS/LLC MANAGERS

DOR Certificate of Good Standing

DUA Certificate of Compliance

CORI Authorization Complete one for the proposed manager of record. This form **must** be *notarized with a stamp or raised seal*.

Business Structure Documents

If Sole Proprietor, **Business Certificate**

If partnership, **Partnership Agreement**

If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

Vote of the Entity Board

Monetary Transmittal Form

\$200 fee via [ABCC website](#) and Payment Receipt

CHANGE OF OWNERSHIP INTEREST (e.g. LLC Members, LLP Partners, Trustees etc.)

DOR Certificate of Good Standing

DUA Certificate of Compliance

Change of Officers/Directors Application

Financial Statement

CORI Authorization Complete one for the proposed manager of record. This form **must** be *notarized with a stamp or raised seal*.

Business Structure Documents

If Sole Proprietor, **Business Certificate**

If partnership, **Partnership Agreement**

If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

Vote of the Entity Board

Purchase and Sale Agreement

Supporting Financial Records

Advertisement*

Monetary Transmittal Form

\$200 fee via [ABCC website](#) and Payment Receipt

CHANGE OF STOCK INTEREST (e.g. New Stockholders or Transfer or Issuance of Stock)

DOR Certificate of Good Standing

DUA Certificate of Compliance

Change of Officers/Directors Application

Financial Statement

CORI Authorization Complete one for the proposed manager of record. This form **must** be *notarized with a stamp or raised seal*.

Business Structure Documents

If Sole Proprietor, **Business Certificate**

If partnership, **Partnership Agreement**

If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

Vote of the Entity Board

Purchase and Sale Agreement

Supporting Financial Records

Advertisement*

Monetary Transmittal Form

\$200 fee via [ABCC website](#) and Payment Receipt

**If abutter notification and advertisement are required for transaction, please see the local licensing authority.*



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
 www.mass.gov/abcc

APPLICATION FOR MULTIPLE AMENDMENTS

1. BUSINESS ENTITY INFORMATION

Entity Name	Municipality	ABCC License Number
Shaw's Supermarkets, Inc.	Franklin, MA	00033-PK-0430

Please provide a narrative overview of the transaction(s) being applied for. On-premises applicants should also provide a description of the intended theme or concept of the business operation. Attach additional pages, if necessary.

The Licensee has changed their officers/directors removing Laura Donald as Group Vice President Corporate Law & Assistant Secretary and Cynthia Garnett as Director; adding John Scuccimarra as a Director. As such, we are filing this multiple amendment application to effectuate the same.

APPLICATION CONTACT

The application contact is the person who should be contacted with any questions regarding this application.

Name	Title	Email	Phone
Nicholas Zozula	Attorney	nzozula@mqmlp.com	617 646 4440

2. AMENDMENT-Change of License Classification

<input type="checkbox"/> Change of License Category	Last-Approved License Category	
All Alcohol, Wine and Malt, Wine Malt and Cordials	Requested New License Category	
<input type="checkbox"/> Change of License Class	Last-Approved License Class	
Seasonal or Annual	Requested New License Class	
<input type="checkbox"/> Change of License Type*	Last-Approved License Type	
i.e. Restaurant to Club *Certain License Types CANNOT change once issued*	Requested New License Type	

3. AMENDMENT-Change of Business Entity Information

<input type="checkbox"/> Change of Corporate Name	Last-Approved Corporate Name:	
	Requested New Corporate Name:	
<input type="checkbox"/> Change of DBA	Last-Approved DBA:	
	Requested New DBA:	
<input type="checkbox"/> Change of Corporate Structure	Last-Approved Corporate Structure	
LLC, Corporation, Sole Proprietor, etc	Requested New Corporate Structure	

4. AMENDMENT-Pledge Information

<input type="checkbox"/> Pledge of License	To whom is the pledge being made:	
<input type="checkbox"/> Pledge of Inventory		
<input type="checkbox"/> Pledge of Stock		

6. AMENDMENT-Change of Officers, Stock or Ownership Interest

Change of Officers/Directors **Change of Ownership Interest (LLC Managers/LLP Partners, Trustees)** **Change of Stock (E.g. New Stockholder/ Transfer or Issuance of Stock)**

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:
On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers - At least 50% must be US citizens;
Off Premises (Liquor Store) Directors or LLC Managers - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal	Residential Address	SSN	DOB
Robert Backus	[REDACTED]	[REDACTED]	9/28/1972

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
President & Director	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Juliette Pryor	[REDACTED]	[REDACTED]	1/18/1965

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Executive VP & Secretary	0%	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
John Scuccimarra	[REDACTED]	[REDACTED]	07/02/1972

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Director	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Gary R. Morton	[REDACTED]	[REDACTED]	10/11/1961

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
VP, Treasurer, Assistant Secretary & Director	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Additional pages attached? Yes No

CRIMINAL HISTORY

Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions. Yes No

MANAGEMENT AGREEMENT

Are you requesting approval to utilize a management company through a management agreement? Please provide a copy of the management agreement. Yes No

6. AMENDMENT-Change of Officers, Stock or Ownership Interest

6B. CURRENT OFFICERS, STOCK OR OWNERSHIP INTEREST

List the individuals and entities of the current ownership. Attach additional pages if necessary utilizing the format below.

Name of Principal	Title/Position	Percentage of Ownership
Name of Principal	Title/Position	Percentage of Ownership
Name of Principal	Title/Position	Percentage of Ownership
Name of Principal	Title/Position	Percentage of Ownership
Name of Principal	Title/Position	Percentage of Ownership
Name of Principal	Title/Position	Percentage of Ownership

6A. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality
See Exhibit A			

6B. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6C. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation
10/27/2006	License No. 01708-PK-0116	Boston	Sale to a Minor- 1 Day suspension

APPLICANT'S STATEMENT

I, Robert Backus the: sole proprietor; partner; corporate principal; LLC/LLP manager
Authorized Signatory

of Shaw's Supermarkets, Inc.
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature: 

Date: 09 . 09 . 2021

Title: President & Director



William Francis Galvin Secretary of the Commonwealth of Massachusetts



[HOME](#) [DIRECTIONS](#) [CONTACT US](#)

Corporations Division

Business Entity Summary

ID Number: 041123420

Summary for: SHAW'S SUPERMARKETS, INC.

The exact name of the Domestic Profit Corporation: SHAW'S SUPERMARKETS, INC.				
Merged with SHAW EQUIPMENT CORPORATION on 02-26-2016				
Entity type: Domestic Profit Corporation				
Identification Number: 041123420				
Date of Organization in Massachusetts: 07-10-1920				
Last date certain:				
Current Fiscal Month/Day: 02/28		Previous Fiscal Month/Day: 02/28		
The location of the Principal Office:				
Address: 750 W CENTER ST				
City or town, State, Zip code, Country: WEST BRIDGEWATER, MA 02379 USA				
The name and address of the Registered Agent:				
Name: CT CORPORATION SYSTEM				
Address: 155 FEDERAL STREET STE 700				
City or town, State, Zip code, Country: BOSTON, MA 02110 USA				
The Officers and Directors of the Corporation:				
Title	Individual Name	Address		
PRESIDENT	ROBERT B BACKUS	750 W CENTER ST WEST BRIDGEWATER, MA 02379 USA		
TREASURER	GARY R MORTON	250 PARKCENTER BLVD BOISE, ID 83706 USA		
SECRETARY	JULIETTE PRYOR	250 PARKCENTER BLVD BOISE, ID 83706 USA		
ASSISTANT SECRETARY	GARY R MORTON	250 PARKCENTER BLVD BOISE, ID 83706 USA		
EXECUTIVE VICE PRESIDENT	JULIETTE PRYOR	250 PARKCENTER BLVD BOISE, ID 83706 USA		
VICE PRESIDENT	GARY R MORTON	250 PARKCENTER BLVD BOISE, ID 83706 USA		
DIRECTOR	JOHN SCUCCIMARRA	750 W CENTER ST WEST BRIDGEWATER, MA 02379 USA		
DIRECTOR	GARY R MORTON	250 PARKCENTER BLVD BOISE, ID 83706 USA		
DIRECTOR	ROBERT B BACKUS	750 W CENTER ST WEST BRIDGEWATER, MA 02379 USA		
Business entity stock is publicly traded:				
The total number of shares and the par value, if any, of each class of stock which this business entity is authorized to issue:				
Class of Stock	Par value per share	Total Authorized		Total issued and outstanding
		No. of shares	Total par value	No. of shares

CORPORATE VOTE

The Board of Directors or LLC Managers of
Entity Name

duly voted to apply to the Licensing Authority of and the
City/Town

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on
Date of Meeting

For the following transactions (Check all that apply):

- | | | | |
|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal) | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License | <input type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club / restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input checked="" type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | | <input type="checkbox"/> Other <input type="text"/> | <input type="checkbox"/> Change of DBA |


"VOTED: To authorize
Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

"VOTED: To appoint
Name of Liquor License Manager

as its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of the conduct of all business therein as the licensee itself could in any way have and exercise if it were a natural person residing in the Commonwealth of Massachusetts."

A true copy attest,



Corporate Officer /LLC Manager Signature
Robert Backus

(Print Name)

For Corporations ONLY

A true copy attest,

Corporation Clerk's Signature

(Print Name)



Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street, First Floor
Boston, MA 02114

DEBORAH B. GOLDBERG
TREASURER AND RECEIVER GENERAL

CORI REQUEST FORM

JEAN M. LORIZIO, ESQ.
CHAIRMAN

The Alcoholic Beverages Control Commission ("ABCC") has been certified by the Criminal History Systems Board to access conviction and pending Criminal Offender Record Information ("CORI"). For the purpose of approving each shareholder, owner, licensee or applicant for an alcoholic beverages license, I understand that a criminal record check will be conducted on me, pursuant to the above. The information below is correct to the best of my knowledge.

ABCC LICENSE INFORMATION

ABCC NUMBER: <small>(IF EXISTING LICENSEE)</small>	00033-PK-0430	LICENSEE NAME:	Shaw's Supermarkets Inc.	CITY/TOWN:	Franklin
-------------------------------------------------------	---------------	----------------	--------------------------	------------	----------

APPLICANT INFORMATION

LAST NAME:	Scuccimarra	FIRST NAME:	John	MIDDLE NAME:	Louis
MAIDEN NAME OR ALIAS (IF APPLICABLE):		PLACE OF BIRTH:	[REDACTED]		
DATE OF BIRTH:	[REDACTED]	SSN:	[REDACTED]	ID THEFT INDEX PIN (IF APPLICABLE):	
MOTHER'S MAIDEN NAME:	[REDACTED]	DRIVER'S LICENSE #:	[REDACTED]	STATE LIC. ISSUED:	[REDACTED]
GENDER:	[REDACTED]	HEIGHT:	[REDACTED]	WEIGHT:	[REDACTED]
EYE COLOR:	[REDACTED]				
CURRENT ADDRESS:	[REDACTED]				
CITY/TOWN:	[REDACTED]	STATE:	[REDACTED]	ZIP:	[REDACTED]
FORMER ADDRESS:	[REDACTED]				
CITY/TOWN:	[REDACTED]	STATE:	[REDACTED]	ZIP:	[REDACTED]

PRINT AND SIGN

PRINTED NAME:	JOHN L. SCUCCIMARRA	APPLICANT/EMPLOYEE SIGNATURE:	[Handwritten Signature]
---------------	---------------------	-------------------------------	-------------------------

NOTARY INFORMATION

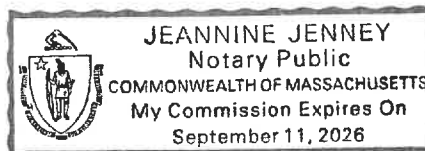
On this 4th day of Sept 2021 before me, the undersigned notary public, personally appeared John Scuccimarra (name of document signer), proved to me through satisfactory evidence of identification, which were Mass license to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

[Handwritten Signature]
NOTARY

DIVISION USE ONLY

REQUESTED BY:	[Signature of CORI-Authorized Employee]
---------------	-----------------------------------------

The DCII Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identity Theft PIN Number by the DCII. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. ALL CORI request forms that include this field are required to be submitted to the DCII via mail or by fax to (617) 660-4614.





CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



SHAWS SUPERMARKET INC
134 WATER ST
WAKEFIELD MA 01880-3015

000013

Why did I receive this notice?

The Commissioner of Revenue certifies that, as of the date of this certificate, SHAWS SUPERMARKET INC is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.

What if I have questions?

If you have questions, call us at (617) 887-6400 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 9:00 a.m. to 4:00 p.m..

Visit us online!

Visit mass.gov/dor to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

Edward W. Coyle, Jr., Chief
Collections Bureau



THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF LABOR AND WORKFORCE DEVELOPMENT
DEPARTMENT OF UNEMPLOYMENT ASSISTANCE

Charles D. Baker
GOVERNOR

Karyn E. Polito
LT. GOVERNOR



366106310

Rosalin Acosta
SECRETARY

Richard A. Jeffers
DIRECTOR

SHAW'S SUPERMARKETS, INC.
Attn: ATTN: PAYROLL
P.O. BOX 600
EAST BRIDGEWATER, MA 02333

EAN: 00097130
August 18, 2021

Certificate Id:50674

The Department of Unemployment Assistance certifies that as of 8/18/2021 ,SHAW'S SUPERMARKETS, INC. is current in all its obligations relating to contributions, payments in lieu of contributions, and the employer medical assistance contribution established in G.L.c.149,§189.

This certificate expires in 30 days from the date of issuance.

Richard A. Jeffers, Director

Department of Unemployment Assistance



Town of Franklin, MA
Department of the Town Clerk
355 East Central Street, Franklin, MA 02038

Date Issued: March 12, 2019
Record #: 36987
Certificate #: 19-57

BUSINESS VERIFICATION CERTIFICATE

In conformity with the provisions of Chapter 110, Section 5 of the General Laws, as amended, the undersigned hereby declare(s) that a business under the title of:

Shaw's # 3581 is conducted at: 255 EAST CENTRAL ST

by the following person:

FULL NAME	RESIDENCE
Albertson's Companies/NASC. tax@ safeway.com	P.O Box 29096- Mailstop 6531, Pheonix, AZ 85027

A certificate issued in accordance with this section shall be in force and effect for four years from the date of issue and shall be renewed each four years thereafter so long as such business shall be conducted and shall lapse and be void unless so renewed.

Expiration Date: 03-13-2023

Signature on file
Business Owner Signature #1

Business Owner Signature #2

Teresa M. Burr
A True Attest Copy
Teresa M. Burr
Town Clerk

To learn more, scan this barcode or visit franklinma.viewpointcloud.com/#!/records/39077



19-57



Town of Franklin, MA
Department of the Town Clerk
355 East Central Street, Franklin, MA 02038

BUSINESS VERIFICATION CERTIFICATE

In conformity with the provisions of Chapter 110, Section 5 of the General Laws, as amended, the undersigned hereby declare(s) that a business under the title of:

Shaw's #3581 is conducted at 255 East Central Street, Franklin MA 02038
Name of Business Address of Business

FULL NAME OF OWNER(S)
Albertson's Companies/NASC.
tax@safeway.com

RESIDENCE(S)
PO BOX 29096 Mailstop 6531 Pheonix, AZ

A certificate issued in accordance with this section shall be in force and in effect for four years from the Date of issue and shall be renewed each four years thereafter so long as such business shall be conducted and shall lapse and be void unless so renewed.

EXPIRATION DATE: _____

Business Owner Signature #1

Email Address

Business Owner Signature #2

Email Address

The Commonwealth of Massachusetts

Norfolk County ss.

Personally appeared before me the above-named

Notary Signature

Com.Exp.Date

made oath that the foregoing statement is true.

A certificate issued in accordance with this section shall be in force and effect for four years from the date of issue and shall be renewed each four years thereafter so long as such business shall be conducted and shall lapse and be void unless so renewed.

A True Attest Copy

Teresa M. Burr, Town Clerk

The Commonwealth of Massachusetts

Town of Franklin

October 5,

19

BUSINESS CERTIFICATE

87-124
91-601
95-310
99-338
03-299
87 07-333
11-260

In conformity with the provisions of Chapter one hundred and ten, Section five of the General Laws, as amended, the undersigned hereby declare(s) that a business under the title of STAR MARKET

is conducted at Number 273 East Central Street Street Franklin CITY OR TOWN

by the following named persons.

FULL NAME	Business Address
Jewel Companies, Inc.	625 Mt. Auburn Street
Star Market Co. Division	Cambridge, Massachusetts 02138

Signed *[Signature]*
 Jeffrey K. Schaffer (SIGNATURE) (SIGNATURE)
 (SIGNATURE) (SIGNATURE)

The Commonwealth of Massachusetts

Middlesex ss. October 5, 19 87

Personally appeared before me the above-named Jeffrey K. Schaffer, known to me to be the Vice President and General Counsel for Star Market Co.

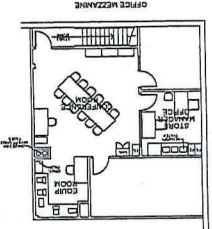
and made oath that the foregoing statement is true.

A certificate issued in accordance with this section shall be in force and effect for four years from the date of issue and shall be renewed each four years thereafter so long as such business shall be conducted and shall lapse and be void unless so renewed.

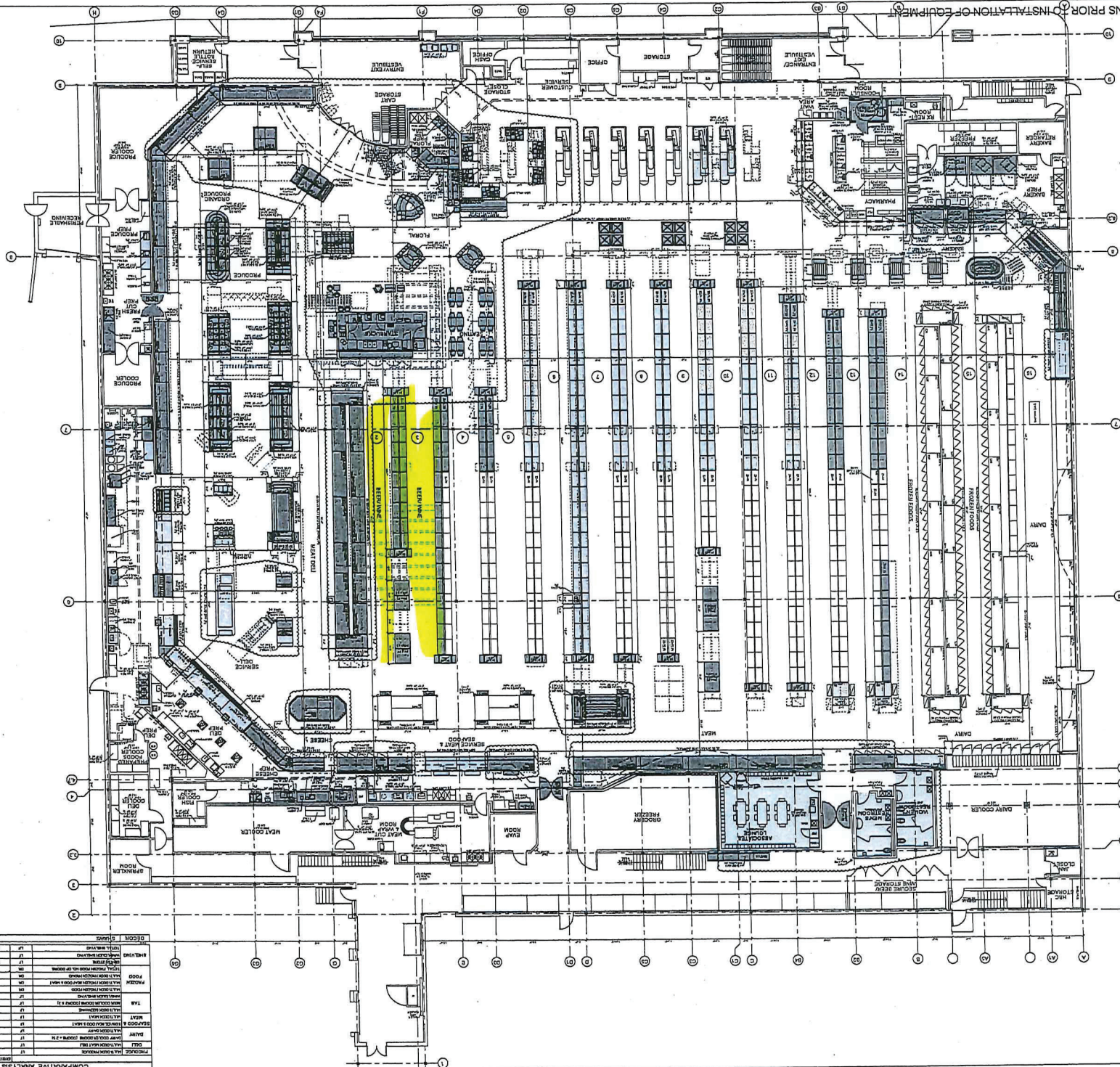
Expiration Date 08/5/1991

(Seal)

[Signature]
 My Commission Expires 3/9/93
[Signature]
 Town Clerk



FIELD VERIFY ALL CONDITIONS PRIOR TO INSTALLATION OF EQUIPMENT



F1.1
 FIXTURE PLAN
 03581 (7581)
SHAW'S
 FRANKLIN
 03581 (7581)
 255 EAST CENTRAL STREET
 FRANKLIN, MA

- REMOVED
- EXISTING
- RELOCATED
- NEW
- REPLUS
- REMOVED
- RELOCATED
- NEW
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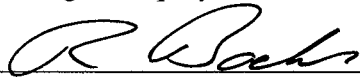
COMPARATIVE ANALYSIS
 (REVISED) 1/15/81
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 2. ALL DIMENSIONS ARE TO THE CENTERLINE UNLESS OTHERWISE NOTED.
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NO.	DESCRIPTION	QTY	UNIT	DATE
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3	PRODUCE	10	LINEAL	11/80
4	PRODUCE	10	LINEAL	11/80
5	PRODUCE	10	LINEAL	11/80
6	PRODUCE	10	LINEAL	11/80
7	PRODUCE	10	LINEAL	11/80
8	PRODUCE	10	LINEAL	11/80
9	PRODUCE	10	LINEAL	11/80
10	PRODUCE	10	LINEAL	11/80
11	PRODUCE	10	LINEAL	11/80
12	PRODUCE	10	LINEAL	11/80
13	PRODUCE	10	LINEAL	11/80
14	PRODUCE	10	LINEAL	11/80
15	PRODUCE	10	LINEAL	11/80
16	PRODUCE	10	LINEAL	11/80
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48	PRODUCE	10	LINEAL	11/80
49	PRODUCE	10	LINEAL	11/80
50	PRODUCE	10	LINEAL	11/80



CERTIFICATE OF COMPLIANCE WITH STATE LAWS

Pursuant to M.G.L Chapter 62C, Sec 49A, and M.G.L. Ch. 151A, Section 19A, the undersigned acting on behalf on the License Holder, certifies under the penalty of perjury that, to the best of the undersign's knowledge and belief, the License Holder is in compliance with all laws of the Commonwealth of Massachusetts relating to taxes, reporting of employees and contractors, and withholding and remitting child support*.



** Signature of Individual or Corporate License Holder (Mandatory)

FIN: 04-1123420

*** License Holder's Social Security Number/or Federal Identification Number

By: Robert Backus, President, Shaw's Supermarkets, Inc. Date: 10.05.2021
Corporate Officer
(Mandatory, if applicable)

*The provision in the Attestation of relating to child support applies only when the License Holder is an individual.

**Approval of or a renewal of a license will not be granted unless this certification clause is signed by the applicant. For all corporations, a certified copy of the vote of the Board of Directors must be provided.

*** Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Providers who fail to correct their non-filing or delinquency will not have a license or other agreement issued, renewed or extended. This request is made under the authority of Massachusetts General Laws, Chapter 62C, section 49A.



The Commonwealth of Massachusetts
 Department of Industrial Accidents
 1 Congress Street, Suite 100
 Boston, MA 02114-2017
 www.mass.gov/dia

Workers' Compensation Insurance Affidavit: General Businesses.
 TO BE FILED WITH THE PERMITTING AUTHORITY.

Applicant Information

Please Print Legibly

Business/Organization Name: _____

Address: _____

City/State/Zip: _____ Phone #: _____

Are you an employer? Check the appropriate box:

- 1. I am a employer with _____ employees (full and/ or part-time).*
- 2. I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]
- 3. We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]**
- 4. We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

Business Type (required):

- 5. Retail
- 6. Restaurant/Bar/Eating Establishment
- 7. Office and/or Sales (incl. real estate, auto, etc.)
- 8. Non-profit
- 9. Entertainment
- 10. Manufacturing
- 11. Health Care
- 12. Other _____

*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

**If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.

Insurance Company Name: _____

Insurer's Address: _____

City/State/Zip: _____

Policy # or Self-ins. Lic. # _____ Expiration Date: _____

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.

Signature: _____ Date: 10/6/2021

Phone #: _____

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: _____ Permit/License # _____

Issuing Authority (circle one):

- 1. Board of Health 2. Building Department 3. City/Town Clerk 4. Licensing Board 5. Selectmen's Office
- 6. Other _____

Contact Person: _____ Phone #: _____

Information and Instructions

Massachusetts General Laws chapter 152 requires all employers to provide workers' compensation for their employees. Pursuant to this statute, an *employee* is defined as "...every person in the service of another under any contract of hire, express or implied, oral or written."

An *employer* is defined as "an individual, partnership, association, corporation or other legal entity, or any two or more of the foregoing engaged in a joint enterprise, and including the legal representatives of a deceased employer, or the receiver or trustee of an individual, partnership, association or other legal entity, employing employees. However, the owner of a dwelling house having not more than three apartments and who resides therein, or the occupant of the dwelling house of another who employs persons to do maintenance, construction or repair work on such dwelling house or on the grounds or building appurtenant thereto shall not because of such employment be deemed to be an employer."

MGL chapter 152, §25C(6) also states that "**every state or local licensing agency shall withhold the issuance or renewal of a license or permit to operate a business or to construct buildings in the commonwealth for any applicant who has not produced acceptable evidence of compliance with the insurance coverage required.**"

Additionally, MGL chapter 152, §25C(7) states "Neither the commonwealth nor any of its political subdivisions shall enter into any contract for the performance of public work until acceptable evidence of compliance with the insurance requirements of this chapter have been presented to the contracting authority."

Applicants

Please fill out the workers' compensation affidavit completely, by checking the boxes that apply to your situation and, if necessary, supply your insurance company's name, address and phone number along with a certificate of insurance. Limited Liability Companies (LLC) or Limited Liability Partnerships (LLP) with no employees other than the members or partners, are not required to carry workers' compensation insurance. If an LLC or LLP does have employees, a policy is required. Be advised that this affidavit may be submitted to the Department of Industrial Accidents for confirmation of insurance coverage. **Also be sure to sign and date the affidavit.** The affidavit should be returned to the city or town that the application for the permit or license is being requested, **not** the Department of Industrial Accidents. Should you have any questions regarding the law or if you are required to obtain a workers' compensation policy, please call the Department at the number listed below. Self-insured companies should enter their self-insurance license number on the appropriate line.

City or Town Officials

Please be sure that the affidavit is complete and printed legibly. The Department has provided a space at the bottom of the affidavit for you to fill out in the event the Office of Investigations has to contact you regarding the applicant. Please be sure to fill in the permit/license number which will be used as a reference number. In addition, an applicant that must submit multiple permit/license applications in any given year, need only submit one affidavit indicating current policy information (if necessary). A copy of the affidavit that has been officially stamped or marked by the city or town may be provided to the applicant as proof that a valid affidavit is on file for future permits or licenses. A new affidavit must be filled out each year. Where a home owner or citizen is obtaining a license or permit not related to any business or commercial venture (i.e. a dog license or permit to burn leaves etc.) said person is NOT required to complete this affidavit.

The Department's address, telephone and fax number:

The Commonwealth of Massachusetts
Department of Industrial Accidents
1 Congress Street
Boston, MA 02114-2017
Tel. # 617-727-4900 ext. 7406 or 1-877-MASSAFE
Fax # 617-727-7749
www.mass.gov/dia

LICENSE TRANSACTION



License Modification, Change of Officers/Directors/LLC Managers

99 Restaurants of Boston, LLC d/b/a The Ninety-Nine

847 West Central Street

Franklin, MA 02038

99 Restaurants of Boston, LLC d/b/a The Ninety-Nine is seeking approval for a License Modification, Change of Officers/Directors/LLC Managers as described in the Application for Amendment that was submitted to the Alcoholic Beverages Control Commission.

All Departments have signed off on this application.

MOTION to approve the request by 99 Restaurants of Boston, LLC d/b/a The Ninety-Nine for a License Modification, Change of Officers/Directors/LLC Managers as described above.

DATED: _____, 2021

VOTED:

UNANIMOUS: _____

A True Record Attest:

YES: _____ **NO:** _____

ABSTAIN: _____

ABSENT: _____

RECUSED: _____

Town Clerk

Franklin Town Council



CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



99 RESTAURANTS OF BOSTON LLC
3038 SIDCO DR
NASHVILLE TN 37204-4506



Why did I receive this notice?

The Commissioner of Revenue certifies that, as of the date of this certificate, 99 RESTAURANTS OF BOSTON LLC is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.

What if I have questions?

If you have questions, call us at (617) 887-6400 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 9:00 a.m. to 4:00 p.m..

Visit us online!

Visit mass.gov/dor to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

Edward W. Coyle, Jr., Chief
Collections Bureau



THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF LABOR AND WORKFORCE DEVELOPMENT
DEPARTMENT OF UNEMPLOYMENT ASSISTANCE

Charles D. Baker
GOVERNOR
Karyn E. Polito
LT. GOVERNOR



350590950

Rosalin Acosta
SECRETARY
Richard A. Jeffers
DIRECTOR

Restaurant Growth Services LLC
3038 SIDCO DRIVE
NASHVILLE, TN 37204

EAN: 21983661
May 26, 2021

Certificate Id:48234

The Department of Unemployment Assistance certifies that as of 5/26/2021 ,Restaurant Growth Services LLC is current in all its obligations relating to contributions, payments in lieu of contributions, and the employer medical assistance contribution established in G.L.c.149,§189.

This certificate expires in 30 days from the date of issuance.

Richard A. Jeffers, Director

Department of Unemployment Assistance



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 239 Causeway Street Boston, MA 02114
www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
 MONETARY TRANSMITTAL FORM

APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL LICENSING AUTHORITY.

ECRT CODE: RETA

Please make \$200.00 payment here: <https://www.paybill.com/mass/abcc/retail/>
 PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL

EPAY CONFIRMATION NUMBER

A.B.C.C. LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

ENTITY/ LICENSEE NAME

ADDRESS

CITY/TOWN STATE ZIP CODE

For the following transactions (Check all that apply):

- | | | | |
|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal) | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License | <input type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club / restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input checked="" type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | | <input type="checkbox"/> Other <input type="text"/> | <input type="checkbox"/> Change of DBA |

THE LOCAL LICENSING AUTHORITY MUST MAIL THIS
 TRANSMITTAL FORM ALONG WITH
 COMPLETED APPLICATION, AND SUPPORTING DOCUMENTS TO:

ALCOHOLIC BEVERAGES CONTROL COMMISSION
 239 CAUSEWAY STREET
 BOSTON, MA 02241-3396



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 239 Causeway Street, Boston, MA 02114
www.mass.gov/abcc

APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

Change of Officers/ Directors/LLC Managers **Change of Stock Interest**

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Officer/Directors Application
- CORI Authorization
- Vote of the Entity
- Business Structure Documents
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

(e.g. New Stockholders or Transfer or Issuance of Stock)

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Stock Application
- CORI Authorization
- Financial Statement
- Vote of the Entity
- Purchase & Sale Agreement
- Supporting Financial Records
- Advertisement (New Stockholder Only)*
- Business Structure Documents
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

Change of Ownership Interest

(e.g. LLC Members, LLP Partners, Trustees etc.)

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Stock Application
- CORI Authorization
- Financial Statement
- Vote of the Entity
- Purchase & Sale Agreement
- Supporting Financial Records
- Advertisement (New Stockholder Only)*
- Business Structure Documents
 - If Sole Proprietor, **Business Certificate**
 - If partnership, **Partnership Agreement**
 - If corporation or LLC, **Articles of Organization** from the Secretary of the Commonwealth

Non-Profit Club Change of Officers/ Directors

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Officer/Directors Application
- Vote of the club signed by an approved officer
- Business Structure Documents -**Articles of Organization** from the Secretary of the Commonwealth

Management Agreement

- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Management Agreement
- Vote of Entity

**If abutter notification and advertisement is required for transaction, please see the local licensing authority.*

1. BUSINESS ENTITY INFORMATION

Entity Name	Municipality	ABCC License Number
99 Restaurants of Boston, LLC	Franklin	00063-RS-0430

Please provide a narrative overview of the transaction(s) being applied for. Attach additional pages, if necessary.

Goodloe M. Partee has left the company, and has been replaced by Wendy Harkness as LLC Manager, Chief Administrative Officer, and Secretary.

APPLICATION CONTACT

The application contact is the person who should be contacted with any questions regarding this application.

Name	Title	Email	Phone
Joseph H. Devlin	Attorney	jdevlin@ucdlaw.com	617-514-2828

APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

2. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:
On Premises (E.g. Restaurant/ Club/Hotel) Directors or LLC Managers - At least 50% must be US citizens;
Off Premises(Liquor Store) Directors or LLC Managers - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal	Residential Address	SSN	DOB
Charles O. Noyes	[REDACTED]	[REDACTED]	2/5/61
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
LLC Manager, President	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
MA Resident			<input checked="" type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Kurt Schnaubelt	[REDACTED]	[REDACTED]	2/12/64
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
LLC Manager, CFO	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
MA Resident			<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Wendy Harkness	[REDACTED]	[REDACTED]	4/21/1973
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
LLC Manager, CAO, Secretary	0%	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
MA Resident			<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
W. Craig Barber	[REDACTED]	[REDACTED]	8/27/55
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
LLC Manager, CEO	0%	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
MA Resident			<input type="radio"/> Yes <input checked="" type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
99 Restaurants of Massachusetts, LLC	[REDACTED]	[REDACTED]	
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
LLC Member	100%	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
MA Resident			<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
Ownership structure remains	unchanged.		
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
		<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
MA Resident			<input type="radio"/> Yes <input type="radio"/> No

Additional pages attached? Yes No

CRIMINAL HISTORY

Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions.

Yes No

MANAGEMENT AGREEMENT

Are you requesting approval to utilize a management company through a management agreement? Please provide a copy of the management agreement.

Yes No

APPLICATION FOR AMENDMENT-Change of Officers, Stock or Ownership Interest

3. CURRENT OFFICERS, STOCK OR OWNERSHIP INTEREST

List the individuals and entities of the current ownership. Attach additional pages if necessary utilizing the format below.

Name of Principal	Title/Position	Percentage of Ownership
Charles O. Noyes	LLC Manager, President	0%
J. Stephen Sparks	LLC Manager, CFO	0%
Goodloe M. Partee	LLC Manager, General Counsel, Secretary	0%
W. Craig Barber	LLC Manager, CEO	0%
99 Restaurants of Massachusetts, LLC	LLC Member	100%

4. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality
See Exhibit A			

5. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality
See Exhibit B			

6 DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation
	See Exhibit C		

7. FINANCIAL DISCLOSURE

Associated Cost(s):

\$0.00

SOURCE OF CASH CONTRIBUTION

Please provide documentation of available funds. (E.g. Bank or other Financial institution Statements, Bank Letter, etc.)

Name of Contributor	Amount of Contribution
Total:	

SOURCE OF FINANCING

Please provide signed financing documentation.

Name of Lender	Amount	Type of Financing	Is the lender a licensee pursuant to M.G.L. Ch. 138.
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No

FINANCIAL INFORMATION

Provide a detailed explanation of the form(s) and source(s) of funding for the cost identified above.

Officer change. No associated costs.

APPLICANT'S STATEMENT

I, Charlie Noyes the: sole proprietor; partner; corporate principal; LLC/LLP manager
Authorized Signatory
of 99 Restaurants of Boston, LLC
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature:

Charlie Noyes

Date:

March 23, 2021

Title:

President



Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street, First Floor
Boston, MA 02114

STEVEN GROSSMAN
TREASURER AND RECEIVER GENERAL

KIM S. GAINSBORO, ESQ.
CHAIRMAN

CORI REQUEST FORM

The Alcoholic Beverages Control Commission has been certified by the Criminal History Systems Board to access conviction and pending Criminal Offender Record Information. For the purpose of approving each shareholder, owner, licensee or applicant for an alcoholic beverages license, I understand that a criminal record check will be conducted on me, pursuant to the above. The information below is correct to the best of my knowledge.

ABCC LICENSE INFORMATION

ABCC NUMBER: LICENSEE NAME: 99 Restaurants of Boston, LLC CITY/TOWN:

(IF EXISTING LICENSEE)

APPLICANT INFORMATION

LAST NAME: Harkness FIRST NAME: Wendy MIDDLE NAME:

MAIDEN NAME OR ALIAS (IF APPLICABLE): PLACE OF BIRTH:

DATE OF BIRTH: SSN: ID THEFT INDEX PIN (IF APPLICABLE):

MOTHER'S MAIDEN NAME: DRIVER'S LICENSE #: STATE LIC. ISSUED:

GENDER: HEIGHT: WEIGHT: EYE COLOR:

CURRENT ADDRESS:

CITY/TOWN: STATE: ZIP:

FORMER ADDRESS:

CITY/TOWN: STATE: ZIP:

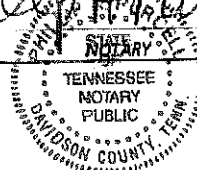
PRINT AND SIGN

PRINTED NAME: Wendy Harkness APPLICANT/EMPLOYEE SIGNATURE: *Wendy Harkness*

NOTARY INFORMATION

On this March 23, 2021 before me, the undersigned notary public, personally appeared Wendy Harkness
(name of document signer), proved to me through satisfactory evidence of identification, which were Personal Knowledge
to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Phillip A. Powell



DIVISION USE ONLY

REQUESTED BY:

SHOULD BE COMPLETED BY APPLICANT

The DCI Identity Theft Index PIN Number is to be completed by those applicants that have been issued an Identity Theft PIN Number by the DCI. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. ALL CORI request forms that include this field are required to be submitted to the DCI via mail or by fax to (617) 660-4614.

CORPORATE VOTE

The Board of Directors or LLC Managers of
Entity Name

duly voted to apply to the Licensing Authority of
City/Town and the

Commonwealth of Massachusetts Alcoholic Beverages Control Commission on
Date of Meeting

For the following transactions (Check all that apply):

- Change of Officers/Directors/LLC Manager
- Change of Ownership Interest (LLC Members, LLP Partners, Trustees)
- Issuance/Transfer of Stock/New Stockholder
- Management/Operating Agreement
- Other

"VOTED: To authorize
Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

A true copy attest,


Corporate Officer / LLC Manager Signature

For Corporations ONLY

A true copy attest,

Corporation Clerk's Signature

Corporations Division

Business Entity Summary

ID Number: 820573657

Request certificate

New search

Summary for: 99 RESTAURANTS OF BOSTON, LLC

The exact name of the Foreign Limited Liability Company (LLC): 99 RESTAURANTS OF BOSTON, LLC

Entity type: Foreign Limited Liability Company (LLC)

Identification Number: 820573657

Old ID Number: 000829977

Date of Registration In Massachusetts:
11-27-2002

Last date certain:

Organized under the laws of: State: DE Country: USA on: 11-18-2002

The location of the Principal Office:

Address: 3038 SIDCO DR. C/O 99 RESTAURANTS OF BOSTON, LLC
City or town, State, Zip code, NASHVILLE, TN 37204 USA
Country:

The location of the Massachusetts office, if any:

Address: 14 GILL ST.
City or town, State, Zip code, WOBURN, MA 01801 USA
Country:

The name and address of the Resident Agent:

Name: C T CORPORATION SYSTEM
Address: 155 FEDERAL STREET STE 700
City or town, State, Zip code, BOSTON, MA 02110 USA
Country:

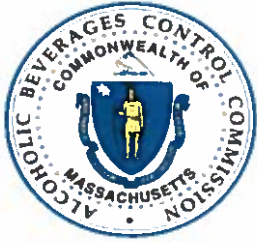
The name and business address of each Manager:

Title	Individual name	Address
MANAGER	KURT SCHNAUBELT	3038 SIDCO DR. NASHVILLE, TN 37204 USA
MANAGER	W. CRAIG BARBER	3038 SIDCO DR. NASHVILLE, TN 37204 USA
MANAGER	WENDY HARKNESS	3038 SIDCO DR. NASHVILLE, TN 37204 USA
MANAGER	CHARLES O. NOYES	3038 SIDCO DR. NASHVILLE, TN 37204 USA

The name and business address of the person(s) authorized to execute, acknowledge, deliver, and record any recordable instrument purporting to affect an interest in real property:

Title	Individual name	Address

Consent **Confidential** **Merger** **Manufacturing**
Data **Allowed**



*Commonwealth of Massachusetts
Department of the State Treasurer
Alcoholic Beverages Control Commission
95 Fourth Street
Chelsea, Massachusetts 02150*

August 18, 2021

LOCAL Boards

Andover, Auburn, Billerica, Braintree, Bridgewater, Barnstable, Boston, Chicoppe, Dartmouth, Easton, Fairhaven, Falmouthj, Framingham, Franklin, Greenfield, Haverhill, Hingham, Holyoke, Lowell, Lynnfield, Marlborough, No. Andover, Pembroke, Pittsfield, Plymouth, Quincy, Rockland, Somerville, Springfield, Stoneham, Tewksbury, Westfield, Westford, W. Springfield, Wilmington, Woburn, Worcester

The Alcoholic Beverages control Commission ("Commission") has received a request from 99 Restaurants of Boston, LLC for a change of Officers / Directors in the above noted cities and towns.

Due to the magnitude of these transactions, the Commission has received the information and documents provided by the licensee. The review was to determine whether the contemplated transaction is consistent with the provisions of M.G.L. c. 138. Based upon our review, we are satisfied that the transaction is consistent with the purposes of the law and would not result in the individual corporate licenses being deemed to be out of compliance with the applicable statute. Accordingly, this letter sets forth our recommended procedure for the processing of these applications.

Arrangements have been made for the Corporation to pay all of the \$200 application fees directly to the Commission. Therefore, no fee needs to be collected by the Local Licensing Authority.

The Commission has reviewed and accepted copies of the following documents and instruments:

1. Application for amendment
2. DOR Certificate of Good Standing
3. DUA Certificate of Good Standing
4. CORI Authorization
5. Vote authorizing the license amendment
6. List of exhibit's
7. Secretary of The Commonwealth Corporate Articles.

The applicant will contact you directly for processing the application. We will be processing this group filing differently than we have in the past due to the fact that these applications will be scanned into the e-licencing system.

The local Licensing Authority should send in the whole packet of the application and not just the local licensing review record that was done in the past. Should you or your town/city solicitor have any questions or require information or assistance , please contact Jack Carey at (617) 908-8575.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Sacramone', with a long horizontal flourish extending to the right.

Ralph Sacramone
Executive Director

Cc: Fredrick Mahony, Chief Investigator
Ryan Melville, Licensing Coordinator
Joe Devlin, Esq.



355 East Central Street
Franklin, Massachusetts 02038-1352

MEMORANDUM

October 29, 2021

To: Franklin Town Council
From: Mark G. Cerel, Town Attorney

RE: OML, Public Records, Ethics Law, Public Hearing Procedures: Specific Application to Town Council and Individual Member Conduct

I have provided prior Councils with written memoranda on Open Meeting Law, Ethics Law, and Conducting Public Hearings. I have attached copies of the three memoranda for the current Council members, because the law in these areas has not substantially changed. This memorandum is intended to emphasize those statutory provisions and legal procedures which continue to have specific application to the Town Council and its individual members.

Open Meeting Law (OML)

[Open Meeting Law Guide & Educational Materials](#)

- Statutory definitions of “deliberation” and “meeting” are both broad:
 - “Deliberation”: an oral or written communication through any medium, including electronic mail, between or among a quorum of a public body . . .
 - “Meeting” a deliberation by a public body with respect to any matter within the body’s jurisdiction . . .
- Cannot use either serial communications or subcommittees to avoid compliance.
- A.G.’s Office (Division of Open Government) charged with enforcement; consequence of public body’s non-compliance includes nullification of its action and/or a civil fine.
- Remote Participation: Revised A.G.’s regulations ease procedural requirements, but still need a quorum to be physically present and all votes to be by roll-call.

Public Records Law

- Definition includes all documents, regardless of form, made or received by public official for public purpose, unless within one or another specific statutory exemption, G.L. Ch. 4, Section 7, Par. 26
- Document itself determines whether it is a public record, not the equipment by which it was generated, e.g.; personal electronic device

Ethics Law G.L. Chapter 268A

[Conflict of Interest Law, M.G.L Ch. 268A](#)

[Financial Disclosure Law, M.G.L Ch. 268B](#)

[Ethics Commission Regulations](#)

- Town Council members are deemed to be municipal employees (as opposed to “special municipal employees”) and are therefore subject to all statutory prohibitions and restrictions
- Statutory prohibitions and restrictions apply not only to individual Council members, but also to their “immediate family” members
- Prohibitions apply not only to final decisions, i.e.: individual Councilor’s votes, but also to his/her participation, i.e.: deliberative process
- G.L. Chapter 268A is a criminal statute; penalty for violation include imprisonment and/or fine
- Specific statutory prohibitions:
 - Self-dealing, G.L. Ch. 268A, Section 19(a)
 - Interest in Contract, G.L. Ch. 268A, Section 20
 - Solicitation/Receipt; Appearance of Conflict, G.L. Chapter 268A, Section 23
- Ethics Commission available for guidance, in advance

Conducting Public Hearings

- Adjudicatory hearings are deemed to be an administrative function, as opposed to legislative; increased legal exposure to municipality, government body, and individual members as a result.
- Importance of being an impartial fact finder, as opposed to an advocate.
- Need to be familiar with appropriate legal standard/criteria and quantum of proof.
- Need to refrain from irrelevant or inappropriate comments.

MGC:ce

Attachments

**OML PRESENTATION FOR TOWN COUNCIL
MARK G. CEREL, TOWN ATTORNEY**

Statute is now in effect; took effect July 1, 2010

Going to address:

- Requirements for "public bodies", Town Boards, Commissions and Committees in particular, as opposed to Town Clerk;
- Enforcement mechanism (A.G.)
- Problems

General Prohibitions/Requirements/Exceptions:

- Quorum of public body meeting to deliberate
- What is/is not "meeting", "deliberation"
- Emails and other electronic communication
- Sequential communications

Meeting Requirements (Chair, in particular):

- Posting of Notice – timing and contents (Definition of "Emergency" unchanged)
- Listing of topics Chair reasonably anticipates
- Conduct of meeting
- Requirement to announce recordation
- Executive session Limited
- Minutes and records

A.G. Enforcement

- Process
- Remedies, including imposition of civil penalty

Problems

- Definition of "deliberation" and, because of it, with "meeting"
- Notices: listing of topics Chair **reasonably anticipates**
- Executive Session: "stating all subjects that may be revealed without compromising . . ." (level of detail?)
- Attorney-client privilege (SJC in **Suffolk Construction** case)

OVERVIEW OF STATE ETHICS LAW, G.L. CHAPTER 268A, AS REVISED IN 2009
by Mark G. Cerel, Franklin Town Attorney and
Medfield Town Counsel

The Massachusetts State Ethics Law G.L. Chapter 268A is a statute of extremely broad application. The statute defines “municipal employee” as “a person performing services for or holding an office, position, employment or membership in a municipal agency, whether by election, appointment, contract of hire or engagement, whether serving with or without compensation, on a full, regular, part-time, intermittent, or consultant basis”, excluding only elected town meeting and charter commission members. In 2009, the Legislature revised the statute, expanding prohibited conduct and substantially increasing the penalties for engaging in same. It is therefore important that all municipal employees be familiar with the statute so as not to run unwittingly afoul of legal requirements and prohibitions. The following discussion is intended to assist in this effort by highlighting the most significant aspects of the statute, both as it existed prior to 2009 and with the 2009 revisions.

Section 1 of the statute contains definitions; these were already in place and were not affected by the 2009 legislation. As with any comprehensive statutory scheme, a person needs to start his or her analysis with a close reading of all operative definitions. Of particular significance, are definitions of:

- (a) “Compensation”, which includes not only money but economic benefit.
- (c) “Immediate Family” which, in addition to spouse and children, includes both employee’s and spouse’s parents and siblings.

- (f) “Municipal Agency” which includes both enumerated representatives and “other instrumentality”.
- (g) “Municipal employee”, the definition of which is set out above.
- (j) “Participate” which includes not only actual decision making but input.
- (k) “Particular matter” which applies to virtually all governmental activities, excepting only municipal home rule petitioning.
- (n) “Special municipal employee” a status that provides limited exemption from the statute based upon being a volunteer or working part-time (works for municipality no more than 800 hours per year).
 - Cannot be mayor, city council member, or selectmen in town with population in excess of 10,000.
 - Position must be expressly classified (voted) by Council or BOS.
 - Designation applies to position, not individual.
 - Failure of Council or BOS to make express classification renders all employees of municipality “municipal employees” subject to all provisions of statute.

Sections 2 and 3 of the statute contain broad prohibitions on bribery, generally. Section 2 prohibits corrupt gifts or solicitations to public officials and Section 3 prohibits public officials from accepting or soliciting. These sections address fairly clear-cut criminal conduct and provide commensurate criminal penalties.

Section 17 of the statute prohibits certain conduct by municipal employees and parallels earlier sections addressed to state and county employees. In particular, the statute prohibits receiving or requesting compensation from a third party in relation to a

“particular matter” in which his or her municipality has “direct and substantial interest” or the third party’s paying or offering compensation. The statute partially exempts “special municipal employees” from its provision. There are several other stated exemptions including: representation of immediate family, special municipal employee’s assisting another person in performing contractual work for the benefit of the municipality (superior’s written certification required), municipal employees applying for building permit and performing work thereunder as long as not employed by permit-granting agency or its regulator. The 2009 revisions substantially increased both imprisonment and fine; a violation is currently punishable by 2 ½-5 years imprisonment and/or a \$10,000 fine.

Section 18 prohibits certain conduct by former municipal employees including acting as agent or attorney for a third party in any matter in which the person participated while a municipal employee. The 2009 revisions substantially increased both imprisonment and fine; a violation is currently punishable by 2 ½-5 years imprisonment and/or a \$10,000 fine.

Section 19(a) prohibits a municipal employee from participating in a municipal matter in which the employee, his or her immediate family, business entities in which the employee has an interest, or prospective employer has a financial interest. Section 19(b) provides several exemptions:

- municipal employee’s written disclosure of interest in advance and determination by person’s superior that interest insubstantial.

- Elected municipal employee (Treasurer-Collector) making bank deposits who files written disclosure of financial interest in advance.
- “Particular matter” involves determination of general policy and interest of municipal employee and immediate family is shared with substantial segment of municipality’s population. (Example: school committee member with school-age children).

The 2009 revisions substantially increased both imprisonment and fine; a violation is currently punishable by 2 ½-5 years imprisonment and/or a \$10,000 fine.

Section 20 prohibits a municipal employee from having a financial interest in a contract with the municipality other than his or her own employment contract; this means that a municipal employee cannot hold multiple positions with the municipality, unless he or she falls within a stated exception to the general prohibition. There are a number of exemptions; the first is a process to be followed where the employee proposes to provide personal services to the municipality on a limited basis outside of his or her regular working hours and not involving his or her regular job duties. (Example: school teacher employed by municipal recreation department during summer.) This requires written certification from contracting agency and exemption vote by council or selectmen. Other exemptions include: a qualifying special municipal employee who files a full disclosure of financial interest, and a municipal employee who provides personal services as part-time, call or volunteer emergency personnel (police, fire, ambulance, etc.). The 2009 revisions substantially increased both imprisonment

and fine; a violation is currently punishable by 2 ½-5 years imprisonment and/or a \$10,000 fine.

Section 21 was rewritten by 2009 legislation to expand the State Ethic Commission's enforcement authority; this includes the authority to impose a civil fine of up to \$25,000.

Section 23 sets out supplemental standards of conduct applicable to all governmental employees; the 2009 legislation substantially expanded these. The standard now include prohibitions on the following:

1. Accepting compensable employment which is "inherently incompatible" with one's public responsibilities.
2. Soliciting or receiving anything of substantial value (value of \$50) or using official position to secure favorable treatment.
3. Acting in a manner which would cause a reasonable person to conclude that official can be improperly influenced. (Liability can be avoided by official's filing of written disclosure.)
4. Making false or fraudulent claim for payment or compensation.

On the positive side, the legislation authorizes the State Ethics Commission to adopt regulations establishing a definition of "substantial value", exclusions for ceremonial privileges and exemptions, exclusions for family/friendship privileges and exemptions, and additional exclusions where "no genuine risk of conflict or appearance" thereof.

OUTLINE FOR WORKSHOP ON HOLDING PUBLIC (ADJUDICATORY) HEARINGS AND RENDERING DECISION IN MUNICIPAL PERMIT AND APPROVAL CASES

Workshop Subject Matter:

- Encompasses both land use and non-land use
- Includes Suspensions/Revocations as well as grants
- Applies to official(s) as well as Boards, if designated local permitting authority

Legal Context:

- Statutory authority to act (regulate)
- Constitutional procedural due process requirements:
 - Impartial fact-finder/decision maker
 - Notice and opportunity to be heard
 - Factual support for decision (varies with type of case)
- Compliance with other legal requirements
 - Open meeting and public records statutes
 - G.L. Chapter 268A (ethics law)
 - Mullin case applies to multi-session hearings; G.L. Ch. 39, Section 23D allows any Board member to miss one session

Principles Applicable to All Hearings:

- Be familiar with legal authority (statute, regulations, bylaw) under which you are acting
- Identify legal requirements/criteria upon which Board or officer must make factual findings
- Give proper legal notice: applicant/licensee, public at large, abutters/interested parties
- Hold public hearing: open, continue, close
- Deliberate: determine facts, based upon evidence introduced during hearing, apply legal criteria, reach decision including any conditions

Additional Principles Applicable to Land Use Hearings:

- Hold public hearing
 - Require applicant to introduce satisfactory proof on each element
 - If necessary, retain own consultant(s) to evaluate applicant's proof (G.L. Ch. 44, §53G)
 - Allow any opponents to make presentation, confined to legal criteria
 - Confine Board members' questioning, remarks to relevant issue(s)
- Deliberate publicly: review legal requirements, evaluate applicant's proof and any opposition in light of those requirements, being careful that Board members' confine analysis to relevant issue(s)
 - Find facts (make determination of facts supporting individual legal criteria)
 - Discuss conditions (must bear reasonable relationship to relief, Dolan v. City of Tigard, U.S. Sup. Ct.); no imposition of impact/exaction fees or other public benefits
 - Vote on decision, with any conditions
 - Draft/authorize staff to draft written decision for subsequent Board review

Additional Principles Applicable to Non-Land Use Hearings (Grants, Suspensions/Revocations):

- Legal standard: abuse of discretion or substantial evidence; importance of "creating record" for judicial review in event of appeal
- Application hearings: require applicant to make presentation

- Suspension/revocation hearings: arrange for another municipal officer to prosecute (make presentation): Police Chief, Board/Commission Agent, Town Attorney, etc.



Open Meeting Law Public Records Ethics Conducting a Public Hearing

November 3, 2021
Franklin Town Council
Mark Cerel, Town Attorney

OPEN MEETING LAW (OML)

Key Points:

- Council members cannot use either serial communications or subcommittees to avoid compliance.
- The A.G.'s Office (Division of Open Government) is charged with enforcement of OML compliance.
- The consequence of a public body's non-compliance includes nullification of its action and/or a civil fine.

PUBLIC RECORDS LAW

Key Points:

- Public records include all documents, regardless of form, made or received by a public official for public purpose, unless within a specific statutory exemption
 - G.L. Ch. 4, Section 7, Par. 26
- The document itself determines whether it is a public record, not the equipment by which it was generated
 - e.g.: personal electronic device

ETHICS LAW

G.L. Ch. 268A

Key Points:

- Town Council members are deemed to be municipal employees and are therefore subject to all statutory prohibitions and restrictions.
- Statutory prohibitions and restrictions apply not only to individual Council members, but also to their “immediate family” members.
- Prohibitions apply not only to final decisions, i.e.: individual Councilor’s votes, but also to his/her participation, i.e.: deliberative process

ETHICS LAW

G.L. Ch. 268A

Key Points:

- Penalty for violation of ethics laws include imprisonment and/or fine
- Specific statutory prohibitions:
 - **Self-dealing:** G.L. Ch. 268A, Sec. 19(a)
 - **Interest in Contract:** G.L. Ch. 268A, Sec. 20
 - **Solicitation/Receipt:** Appearance of Conflict, G.L. Chapter 268A, Sec. 23
- Ethics Commission available for guidance, in advance

CONDUCTING PUBLIC HEARINGS

Key Points:

- Adjudicatory hearings are deemed to be an administrative function, as opposed to a legislative function. This increases legal exposure to the municipality, government body, and individual members as a result.
- It is important to be an impartial fact finder, as opposed to an advocate.
- Public Officials need to be familiar with appropriate legal standard/criteria and quantum of proof.
- Public Officials shall refrain from irrelevant or inappropriate comments.

ADDITIONAL RESOURCES

Mass.gov

- [Open Meeting Law Guide & Educational Materials](#)

State Ethics Commission

- [Conflict of Interest Law, M.G.L Ch. 268A](#)
- [Financial Disclosure Law, M.G.L Ch. 268B](#)
- [Ethics Commission Regulations](#)

QUESTIONS?



Town of Franklin

355 East Central Street
Franklin, Massachusetts 02038-1352



Phone: (508) 520-4949
www.franklinma.gov

OFFICE OF THE TOWN ADMINISTRATOR

Memorandum

October 29, 2021

To: Town Council
From: Jamie Hellen, Town Administrator
Alecia Alleyne, Assistant to the Town Administrator

Re: Resolution 21-65: Cable Funds in Support of PEG Service

The Massachusetts Department of Revenue requires the Town Council to vote to appropriate PEG funds received from Comcast to an established revolving account.

Please find the attached resolution to appropriate \$18,500.22 in PEG funds received from Comcast for the period covering December 2020 to June 2021 to the Cable Access Corporation.

Please feel free to call with any questions.



TOWN OF FRANKLIN RESOLUTION 21-65

APPROPRIATION: Cable Funds in Support of PEG Service and Programming per
MGL Ch. 44, §53F3/4

TOTAL REQUESTED: \$18,500.22

PURPOSE: To appropriate \$18,500.22 from the PEG Access and Cable Related Fund created under MGL Ch. 44, §53F3/4, to be paid to Franklin Cable Access Corp. to operate the cable access studio and otherwise fund its operations.

MOTION: Be it Moved and Voted by the Town Council that the sum of \$18,500.22 be appropriated from the PEG Access and Cable Related Fund created under MGL Ch. 44, §53F3/4, to be paid to Franklin Cable Access Corp. to operate the cable access studio and otherwise fund its operations.

This resolution shall become effective according to the provisions of the Town of Franklin Home Rule Charter.

DATED: _____, 2021

VOTED: _____

UNANIMOUS: _____

A TRUE RECORD ATTEST:

YES: _____ **NO:** _____

ABSTAIN: _____ **ABSENT:** _____

RECUSED: _____

Town Clerk

Franklin Town Council

TOWN OF FRANKLIN

SCHEDULE OF DEPARTMENTAL PAYMENTS TO TREASURER

Turnover Number:

Department:
ADMINISTRATION
123

Date: 10/26/2021

FROM WHOM	DESCRIPTION	CODE	AMOUNT		TOTAL
Comcast Cable TV - Franchise Fee for period Dec. 2020 to June 2021	Comcast Cable TV	1	\$ 18,500.22	check #	\$ 18,500.22
TOTAL					\$ 18,500.22

To the Town Accountant:

The above is a detailed list of moneys collected by me, amounting in the aggregate to:

Eighteen Thousand Five Hundred Dollars and Twenty Two Cents

for the period ending

Town Treasurer, whose receipt I hold therefor.

which I have paid to the

Signature :

Jamie Hellen, Town Administrator

Signature :

Alecia Alleyne
Alecia Alleyne, Assistant to the Town Administrator

Date: 10/26/2021

To the Departmental Officer making the Payment:

Received of ADMINISTRATION

the sum of

Eighteen Thousand Five Hundred Dollars and Twenty Two Cents

for the period ending October 26, 2021

for collection as per schedule of this date, filed in my office.

Town Treasurer

Town of Franklin

355 East Central Street
Franklin, Massachusetts 02038-1352



Phone: (508) 520-4949
www.franklinma.gov

OFFICE OF THE TOWN ADMINISTRATOR

Memorandum

October 29, 2021

To: Town Council
From: Jamie Hellen, Town Administrator

Re: Resolution 21-66: Gift Acceptance – Franklin Fire Department and Veterans' Services Department

The Fire Department and Veterans' Services Department have each received exceptionally generous donations totaling \$4,260.00.

The donations to the Fire Department were made in memory of retired Franklin Firefighter, Richard Leitch. They will be applied at the Department's discretion towards the purchase of safety and other related equipment, as well as to support various Fire Department Programs.

The donations to the Veterans' Services Department will be applied at the Department's discretion towards the Veterans' Municipal Assistance Fund and the Veterans' Gift Fund.

We would like to thank everyone for their continued support of our local services.

Donation Summary:

1. FIRE DEPARTMENT - \$965.00

- Joshua & Laura Kaushansky, Westborough MA \$ 415.00
- Karen Angrisano, Boston MA \$ 200.00
- Steven J. Dempsey, Mansfield MA \$ 100.00
- Caroline & Theodore Kozec, East Longmeadow MA \$ 100.00
- Steven & Cynthia Hanna, The Villages FL \$ 100.00
- Jose & Kristin Desousa, Milford MA \$ 50.00

Total \$ 965.00

2. VETERANS DEPARTMENT - \$3,295.00

Veterans' Municipal Assistance Fund

- Elks Riders \$ 1,000.00
- Joann & Kenneth Ogilvie \$ 500.00
- Richard & Judith Hynes \$ 200.00
- Stephen Semerjian \$ 150.00
- Ginley Funeral Home \$ 100.00

● Carol & Leonard Goldman	\$ 100.00
● Nancy Mooradian	\$ 100.00
● Warren Wright	\$ 100.00
● Donna Syngay	\$ 100.00
● The Gorski Revocable Trust	\$ 50.00
● Julie Silver	\$ 50.00
● Paula & Edward Malloy	\$ 50.00
● Ming Cheng-Wei	\$ 50.00
● Anne & Douglas Saunders	\$ 50.00
● Gina Bryda	\$ 50.00
● Elaine Anderson & Paul McFarland	\$ 50.00
● David & Mary Jane Sciortino	\$ 50.00
● John Curry & Marilyn Klauber	\$ 50.00
● Diane & James Jackson	\$ 50.00
● Druscilla Davison	\$ 50.00
● Donna Coroniti	\$ 30.00
● Karen & Robert Swenson	\$ 30.00
● Judy & Nelson Osborn	\$ 30.00
● John & Gail Potter	\$ 25.00
● Richard & Sharyn Johnson	\$ 25.00
● Rose Turco	\$ 25.00
● Linda & John Coughlin	\$ 25.00
● Daniel & Linda Hill	<u>\$ 5.00</u>

Total \$ 3,095.00

Veterans' Gift Fund

● Benevolent & Protective Order of Elks	\$ 100.00
● Jeffrey Nutting	<u>\$ 100.00</u>

Total \$ 200.00

DONATION TOTAL \$4,260.00

If you have any additional questions please feel free to ask.



**TOWN OF FRANKLIN
RESOLUTION 21-66**

**Acceptance of Gift – Fire Department, Veterans’
Service Department**

WHEREAS, The Franklin Fire Department and Veterans’ Services Department have received generous donations totaling \$4,260.00 to be used at the discretion of each respective department as follows:

Donation Summary:

FRANKLIN FIRE DEPARTMENT - \$965.00

1. Gifts received in Memory of Richard Leitch, Retired Franklin Firefighter, to support departmental programs and purchase safety and other related equipment
 - Please see attached memo dated October 29, 2021 for list of donors.

VETERANS SERVICES DEPARTMENT - \$3,295.00

1. Veterans' Municipal Assistance Fund - \$3,095.00
 - Please see attached memo dated October 29, 2021 for list of donors.
2. Veterans' Gift Fund - \$200.00
 - Please see attached memo dated October 29, 2021 for list of donors.

NOW THEREFORE, BE IT RESOLVED THAT:

The Town Council of the Town of Franklin on behalf of the Franklin Fire Department and Veterans’ Services Department gratefully accepts these generous donations to be used at the discretion of the Franklin Fire Department and Veterans’ Services Department as described above.

This resolution shall become effective according to the provisions of the Town of Franklin Home Rule Charter.

DATED: _____, 2021

VOTED: _____

UNANIMOUS: _____

A TRUE RECORD ATTEST:

YES: _____ **NO:** _____

ABSTAIN: _____ **ABSENT:** _____

RECUSED: _____

Town Clerk

Franklin Town Council