



Town of Reading Meeting Posting with Agenda

2018-07-16 LAG

Board - Committee - Commission - Council:

Select Board

Date: 2024-01-23

Time: 7:00 PM

Building: Reading Town Hall

Location: Select Board Meeting Room

Address: 16 Lowell Street

Agenda:

Purpose: General Business

Meeting Called By: Caitlin Nocella on behalf of Chair Jackie McCarthy

Notices and agendas are to be posted 48 hours in advance of the meetings excluding Saturdays, Sundays and Legal Holidays. Please keep in mind the Town Clerk's hours of operation and make necessary arrangements to be sure your posting is made in an adequate amount of time. A listing of topics that the chair reasonably anticipates will be discussed at the meeting must be on the agenda.

All Meeting Postings must be submitted in typed format; handwritten notices will not be accepted.

Topics of Discussion:

	<p><i>This Meeting will be held in-person in the Select Board Meeting Room at Town Hall and remotely on Zoom. It will also be streamed live on RCTV as usual.</i></p> <p>Join Zoom Meeting https://us06web.zoom.us/j/89822995191</p> <p>Meeting ID: 898 2299 5191</p> <p>Dial by your location</p> <ul style="list-style-type: none"> • +1 646 558 8656 US (New York) • +1 646 518 9805 US (New York) <p>Find your local number: https://us06web.zoom.us/u/kqaMN7mjz</p>	PAGE #
7:00	Overview of Meeting	
7:05	Public Comment	
7:15	Select Board Liaison & Town Manager Reports	
7:30	PUBLIC HEARING: Change of Officers/Directors for Meadow Brook Golf Club Liquor License	
7:45	Update on Meadow Brook Trail Easement	
8:00	Presentation from Edge Sports re: Symonds Way Study	

This Agenda has been prepared in advance and represents a listing of topics that the chair reasonably anticipates will be discussed at the meeting. However the agenda does not necessarily include all matters which may be taken up at this meeting.



Town of Reading Meeting Posting with Agenda

9:00	Discuss Future Agenda Items	
9:15	Approve Meeting Minutes	

**Legal Notice
(Seal)
Town of Reading**

To the Inhabitants of the Town of Reading:

Please take notice that the Select Board of the Town of Reading will hold a public hearing on January 23, 2024 at 7:00 PM in the Select Board Meeting Room at Town Hall, 16 Lowell Street, Reading, MA or also available remotely on Zoom to act on an Annual All Alcohol Club Liquor License Amendment; Change of Officers/Directors, for The Meadow Brook Golf Club Corporation of Reading, Massachusetts d/b/a Meadow Brook Golf Club at 292 Grove Street, Reading, MA.

A copy of the proposed documents regarding this topic will be in the Select Board packet on the website at www.readingma.gov

All interested parties are invited to attend the hearing in person or remotely via Zoom; or may submit their comments in writing to townmanager@ci.reading.ma.us

By order of
Matthew Kraunelis
Acting Town Manager

To the Chronicle: Please publish on Tuesday, January 9th, 2024 and January 16th, 2024

Send the bill and tear sheet to:

Brian D. McGrail, Esquire
LAW OFFICES OF BRIAN D. MCGRAIL
607 North Avenue
Door 18, Suite 1B
Wakefield, MA 01880
P-781-246-9999 X2
F-781-246-1986
Email: Brian@mcgraillaw.net

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 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: [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)

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 SUBMIT THIS APPLICATION ONCE APPROVED VIA THE ePLACE PORTAL

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 AMENDMENT

-Change of Officers, Stock or Ownership Interest

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

- Payment Receipt
- Monetary Transmittal Form
- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Officer/Directors Application
- Vote of the Entity
- CORI Authorization
- 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)

- Payment Receipt
- Monetary Transmittal Form
- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Stock Application
- Financial Statement
- Vote of the Entity
- CORI Authorization
- Purchase & Sale Agreement
- Supporting Financial Records
- Advertisement
- Business Structure Documents

Change of Ownership Interest

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

- Payment Receipt
- Monetary Transmittal Form
- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Change of Stock Application
- Financial Statement
- Vote of the Entity
- CORI Authorization
- Business Structure Documents
- Purchase & Sale Agreement
- Supporting Financial Records
- Advertisement
 - If Sole Proprietor, Business Certificate
 - If partnership, Partnership Agreement
 - If corporation or LLC, Articles of Organization from the Secretary of the Commonwealth

- 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

- Payment Receipt
- Monetary Transmittal Form
- 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

- Payment Receipt
- Monetary Transmittal Form
- DOR Certificate of Good Standing
- DUA Certificate of Compliance
- Vote of Entity
- Management Agreement

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

1. BUSINESS ENTITY INFORMATION

Entity Name	Municipality	ABCC License Number
The Meadow Brook Golf Club Corp. of Reading	Reading	00002-CL-1016

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

Change of Officers/ Directors

APPLICATION CONTACT

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

Name	Title	Email	Phone
Brian D. McGrail	Attorney	brian@mcgrailaw.net	781-246-9999 x2

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
Patrick Tompkins	[REDACTED]	[REDACTED]	[REDACTED]

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
President	n/a	Yes 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
Christopher Caruso	[REDACTED]	[REDACTED]	[REDACTED]

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Vice President	n/a	Yes 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
Robert Cruickshank	[REDACTED]	[REDACTED]	[REDACTED]

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Treasurer	n/a	Yes 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
Michelle Greenwalt	[REDACTED]	[REDACTED]	[REDACTED]

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Clerk	n/a	Yes 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
Trevor Bloom	[REDACTED]	[REDACTED]	[REDACTED]

Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen	MA Resident
Director	n/a	Yes 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
Deborah M. Masse	[REDACTED]	[REDACTED]	[REDACTED]

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

Additional pages attached? Yes No

CRIMINAL HISTORY

Has any individual listed in question 2, 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

2. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST(Continued...)

List all proposed 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.).

Entity Name

The Meadow Brook Golf
Club Corporation of
Reading, Massachusetts

Percentage of Ownership in Entity being Licensed
(Write "NA" if this is the entity being licensed)

Name of Principal	Residential Address	SSN	DOB
Charlie Johnson	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director	US Citizen
Director	n/a	<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
Daniel McCarthy	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director	US Citizen
Director	n/a	<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
Brian Paulson	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director	US Citizen
Director	n/a	<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
Peter Verrier	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director	US Citizen
Director	n/a	<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
Maura Sweeney	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director	US Citizen
Director	n/a	<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
Sean Quinn	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director	US Citizen
Director	n/a	<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
Title and or Position	Percentage of Ownership	Director	US Citizen
		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
MA Resident			<input type="radio"/> Yes <input type="radio"/> No

CRIMINAL HISTORY

Has any individual identified above 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

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
Trevor Bloom	Director	n/a
Patrick Tompkins	President	n/a
Michael Gallugi	Treasurer	n/a
Michelle Greenwalt	Clerk	n/a
Daniel McCarthy	Director	n/a
Kate Coppins	Director	n/a

4. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 2, 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

5. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified identified in question 2, 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

6. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 4 or 5 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

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

3. CURRENT OFFICERS, STOCK OR OWNERSHIP INTEREST (Continued)

List the individuals and entities of the current ownership.

Name of Principal	Title/Position	Percentage of Ownership
Charlie Johnson	Director	n/a
Name of Principal	Title/Position	Percentage of Ownership
Christopher Caruso	Vice President	n/a
Name of Principal	Title/Position	Percentage of Ownership
Brian Paulsen	Director	n/a
Name of Principal	Title/Position	Percentage of Ownership
Peter Verrier	Director	n/a
Name of Principal	Title/Position	Percentage of Ownership
Maura Sweeney	Director	n/a
Name of Principal	Title/Position	Percentage of Ownership
Sean Quinn	Director	n/a
Name of Principal	Title/Position	Percentage of Ownership
Name of Principal	Title/Position	Percentage of Ownership

7. FINANCIAL DISCLOSURE

Associated Cost(s): (E.g. Costs associated with License Transaction including but not limited to: Property price, Business Assets, Renovations costs, Construction costs, Initial Start-up costs, Inventory costs, or specify other costs):”

Associated Cost(s):

N/A

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.

APPLICANT'S STATEMENT

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

of The Meadow Brook Golf Club Corporation of Reading, MA
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.

X

Signature:



Date:

10/8/23

Title:

President



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: DCO2-CL-1016 LICENSEE NAME: Meadow Brook Golf Corp of Reading CITY/TOWN: Reading

APPLICANT INFORMATION

LAST NAME: Tompkins FIRST NAME: Patrick MIDDLE NAME: Joseph
 MAIDEN NAME OR ALIAS (IF APPLICABLE): _____ PLACE OF BIRTH: Boston
 DATE OF BIRTH: [REDACTED] SSN: [REDACTED] ID THEFT INDEX PIN (IF APPLICABLE): _____
 MOTHER'S MAIDEN NAME: [REDACTED] DRIVER'S LICENSE #: [REDACTED] STATE LIC. ISSUED: Massachusetts
 GENDER: MALE HEIGHT: 5 10 WEIGHT: 200 EYE COLOR: Brown
 CURRENT ADDRESS: [REDACTED]
 CITY/TOWN: Reading STATE: MA ZIP: 01867
 FORMER ADDRESS: [REDACTED]
 CITY/TOWN: Reading STATE: MA ZIP: 01867

PRINT AND SIGN

PRINTED NAME: Patrick Tompkins APPLICANT/EMPLOYEE SIGNATURE: Patrick Tompkins Digitally signed by Patrick Tompkins Date: 2023.08.03 15:13:02 -04'00'

NOTARY INFORMATION

On this 8/4/23 before me, the undersigned notary public, personally appeared Patrick Tompkins
 (name of document signer), proved to me through satisfactory evidence of identification, which were Drivers 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.

[Signature]
NOTARY



DIVISION USE ONLY

REQUESTED BY: _____
 SIGNATURE OF CELESTINE ALBERTINI
The DCA, during their index PIN number is to be completed by those applicants that have been issued an identity theft PIN number by the DCA. (1819c) agencies are required to provide all applicants the opportunity to provide 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 DCA via email or by mail to (617) 860-6844.



JEAN M. LORIZIO, ESQ.
CHAIRMAN

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

CORI REQUEST FORM

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ABCC LICENSE INFORMATION

ABCC NUMBER: <small>(IF EXISTING LICENSE)</small>	0002-CL-1016	LICENSEE NAME:	Meadow Brook Golf Corporation of Reading Mass	CITY/TOWN:	Reading
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APPLICANT INFORMATION

LAST NAME:	Caruso	FIRST NAME:	Christopher	MIDDLE NAME:	
MAIDEN NAME OR ALIAS (IF APPLICABLE):		PLACE OF BIRTH:	Woburn, MA		
DATE OF BIRTH:		SSN:		ID THEFT INDEX PIN (IF APPLICABLE):	
MOTHER'S MAIDEN NAME:		DRIVER'S LICENSE #:		STATE LIC. ISSUED:	Massachusetts
GENDER:	MALE	HEIGHT:	5 10	WEIGHT:	180
EYE COLOR: Brown					
CURRENT ADDRESS:					
CITY/TOWN:	Reading	STATE:	MA	ZIP:	01867
FORMER ADDRESS:					
CITY/TOWN:	North Easton	STATE:	MA	ZIP:	02356

PRINT AND SIGN

PRINTED NAME:	Christopher Caruso	APPLICANT/EMPLOYEE SIGNATURE:	
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NOTARY INFORMATION

On this 08/16/2023 before me, the undersigned notary public, personally appeared Christopher Caruso
(name of document signer), proved to me through satisfactory evidence of identification, which were MADL exp 01/05/2025
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.

ALLISON ABATE
Notary Public, Commonwealth of Massachusetts
My Commission Expires November 7, 2025

DIVISION USE ONLY

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

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) 860-6614.



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

CORI REQUEST FORM

DEBORAH B. GOLDBERG
TREASURER AND RECEIVER GENERAL

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: 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 DCJL Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identify Theft PIN Number by the DCJL. 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 DCJL via mail or by fax to (617) 660-4614.



EVA M. GRIZZELL
Notary Public
Commonwealth of Massachusetts
My Commission Expires
July 28, 2028



JEAN M. LORIZIO, ESQ.
CHAIRMAN

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

CORI REQUEST FORM

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ABCC LICENSE INFORMATION

ABCC NUMBER: <small>(IF EXISTING LICENSEE)</small>	0002-CL-1016	LICENSEE NAME:	Meadow Brook Golf Corporation of Reading Mass	CITY/TOWN:	Reading
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APPLICANT INFORMATION

LAST NAME:	Greenwalt	FIRST NAME:	Michelle	MIDDLE NAME:	Renee			
MAIDEN NAME OR ALIAS (IF APPLICABLE):	[REDACTED]	PLACE OF BIRTH:	Peoria, IL					
DATE OF BIRTH:	[REDACTED]	SSN:	[REDACTED]	ID THEFT INDEX PIN (IF APPLICABLE):				
MOTHER'S MAIDEN NAME:	[REDACTED]	DRIVER'S LICENSE #:	[REDACTED]	STATE LIC. ISSUED:	Massachusetts			
GENDER:	FEMALE	HEIGHT:	5	11	WEIGHT:	220	EYE COLOR:	Brown
CURRENT ADDRESS:	[REDACTED]							
CITY/TOWN:	Reading	STATE:	MA	ZIP:	01867			
FORMER ADDRESS:	[REDACTED]							
CITY/TOWN:	Irvine	STATE:	CA	ZIP:	92614			

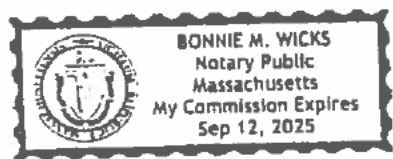
PRINT AND SIGN

PRINTED NAME:	[REDACTED]	APPLICANT/EMPLOYEE SIGNATURE:	[REDACTED]
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NOTARY INFORMATION

On this August 8, 2023 before me, the undersigned notary public, personally appeared Michelle Renee Greenwalt
(name of document signer), proved to me through satisfactory evidence of identification, which were Driver's 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.

Bonnie M. Wicks
NOTARY



DIVISION USE ONLY

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

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) 680-4614.



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: <small>(IF EXISTING LICENSE)</small>	0002-CL-1016	LICENSEE NAME:	Meadow Brook Golf Corp of Reading MA	CITY/TOWN:	Reading
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APPLICANT INFORMATION

LAST NAME:	Bloom	FIRST NAME:	Trevor	MIDDLE NAME:	John
MAIDEN NAME OR ALIAS (IF APPLICABLE):		PLACE OF BIRTH:	Glen Ridge, NJ		
DATE OF BIRTH:	[REDACTED]	SSN:	[REDACTED]	ID THEFT INDEX PIN (IF APPLICABLE):	
MOTHER'S MAIDEN NAME:	[REDACTED]	DRIVER'S LICENSE #:	[REDACTED]	STATE LIC. ISSUED:	Massachusetts
GENDER:	MALE	HEIGHT:	6	WEIGHT:	230
				EYE COLOR:	Hazel
CURRENT ADDRESS:	[REDACTED]				
CITY/TOWN:	Reading	STATE:	MA	ZIP:	01867
FORMER ADDRESS:	[REDACTED]				
CITY/TOWN:	Reading	STATE:	MA	ZIP:	01867

PRINT AND SIGN

PRINTED NAME:	Trevor Bloom	APPLICANT/EMPLOYEE SIGNATURE:	[Signature]
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NOTARY INFORMATION

On this 9th of August, 2022 before me, the undersigned notary public, personally appeared Trevor Bloom
(name of document signer), proved to me through satisfactory evidence of identification, which were MDL
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.



DAWN M. BOYLE
Notary Public
Commonwealth of Massachusetts
My Commission Expires
January 19, 2029

Dawn M. Boyle
NOTARY

DIVISION USE ONLY

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

The DCI Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identify Theft PIN Number by the DCI. Careful attention is 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 email or by fax to (617) 860-4834.



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: 0002-CL-1016 LICENSEE NAME: Meadow Brook Golf Corporation of Reading MA CITY/TOWN: Reading

APPLICANT INFORMATION

LAST NAME: MASSE FIRST NAME: DEBORAH MIDDLE NAME: MAUREEN

MAIDEN NAME OR ALIAS (IF APPLICABLE): [REDACTED] PLACE OF BIRTH: LOWELL, MA

DATE OF BIRTH: [REDACTED] SSN: [REDACTED] ID THEFT INDEX PIN (IF APPLICABLE): N/A

MOTHER'S MAIDEN NAME: [REDACTED] DRIVER'S LICENSE #: [REDACTED] STATE LIC. ISSUED: Massachusetts

GENDER: FEMALE HEIGHT: 5 7 WEIGHT: 175 EYE COLOR: HAZEL

CURRENT ADDRESS: [REDACTED]

CITY/TOWN: READING STATE: MA ZIP: 01867

FORMER ADDRESS: [REDACTED]

CITY/TOWN: READING STATE: MA ZIP: 01867

PRINT AND SIGN

PRINTED NAME: DEBORAH M MASSE APPLICANT/EMPLOYEE SIGNATURE: [Signature]

NOTARY INFORMATION

On this 21st day of December, 2016, before me, the undersigned notary public, personally appeared Deborah M. Masse

(name of document signer), proved to me through satisfactory evidence of identification, which were MA 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.

[Signature] **KAREN A. SYMOND**
Notary Public
Commonwealth of Massachusetts
My Commission Expires
September 27, 2030

DIVISION USE ONLY

REQUESTED BY: [REDACTED]
SIGNATURE OF CORI-AUTHORIZED EMPLOYEE: [REDACTED]

The DCI Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identify 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] 660-4814.



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: <small>(IF EXISTING LICENSE)</small>	0002-CL-1016	LICENSEE NAME:	Meadow Brook Golf Corporation of Reading Mass	CITY/TOWN:	Reading
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APPLICANT INFORMATION


LAST NAME:	Johnson	FIRST NAME:	Charles	MIDDLE NAME:	ROHAN			
MAIDEN NAME OR ALIAS (IF APPLICABLE):		PLACE OF BIRTH:	HARTFORD, CT					
DATE OF BIRTH:	[REDACTED]	SSN:	[REDACTED]	ID THEFT INDEX PIN (IF APPLICABLE):				
MOTHER'S MAIDEN NAME:	[REDACTED]	DRIVER'S LICENSE #:	[REDACTED]	STATE LIC. ISSUED:	MA			
GENDER:	MALE	HEIGHT:	6	10	WEIGHT:	175	EYE COLOR:	BLUE
CURRENT ADDRESS:	[REDACTED]							
CITY/TOWN:	Reading	STATE:	MA	ZIP:	01867			
FORMER ADDRESS:	[REDACTED]							
CITY/TOWN:		STATE:		ZIP:				

PRINT AND SIGN

PRINTED NAME:	CHARLES R JOHNSON	APPLICANT/EMPLOYEE SIGNATURE:	<i>Charles Johnson</i>
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NOTARY INFORMATION

On this 8/8/23 before me, the undersigned notary public, personally appeared Charles R. Johnson (name of document signer), proved to me through satisfactory evidence of identification, which were MA 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.



Kevin J. Johnson
NOTARY PUBLIC
Commonwealth of
Massachusetts
My Commission Expires
3/31/2028

Kevin Johnson

NOTARY

DIVISION USE ONLY

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

The DCI (Identify Theft) Index PIN Number is to be completed by those applicants that have been issued an Identify 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 OCR via mail or by fax to (617) 860-6614.



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: <small>(OF EXISTING LICENSES)</small>	0002-CL-1016	LICENSEE NAME:	Meadow Brook Golf Corporation of Reading Mass	CITY/TOWN:	Reading
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APPLICANT INFORMATION

LAST NAME:	McCarthy	FIRST NAME:	Daniel	MIDDLE NAME:	John			
MAIDEN NAME OR ALIAS (IF APPLICABLE):		PLACE OF BIRTH:	Winchester, MA					
DATE OF BIRTH:	[REDACTED]	SSN:	[REDACTED]	ID THEFT INDEX PIN (IF APPLICABLE):				
MOTHER'S MAIDEN NAME:	[REDACTED]	DRIVER'S LICENSE #:	[REDACTED]	STATE LIC. ISSUED:	MA			
GENDER:	MALE	HEIGHT:	5	10	WEIGHT:	210	EYE COLOR:	Blue
CURRENT ADDRESS:	[REDACTED]							
CITY/TOWN:	Reading	STATE:	MA	ZIP:	01867			
FORMER ADDRESS:	[REDACTED]							
CITY/TOWN:		STATE:		ZIP:				

PRINT AND SIGN

PRINTED NAME:	Daniel J. McCarthy	APPLICANT/EMPLOYEE SIGNATURE:	[Signature]
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NOTARY INFORMATION

On this 24 day of August 2023 before me, the undersigned notary public, personally appeared Daniel J. McCarthy (name of document signer), proved to me through satisfactory evidence of identification, which were MARS 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.

[Signature]
NOTARY

KAREN A. SYMOND
Notary Public
Commonwealth of Massachusetts
My Commission Expires
October 12, 2023

DIVISION USE ONLY

REQUESTED BY:	[REDACTED]
	SIGNATURE OF CORI-AUTHORIZED EMPLOYEE

The DCI Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identify 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) 540-4614.



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

JEAN M. LORIZIO, ESQ.
CHAIRMAN

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: <small>(IF EXISTING LICENSE)</small>	0002-CL-1016	LICENSEE NAME:	Meadow Brook Golf Corporation of Reading Mass	CITY/TOWN:	Reading
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APPLICANT INFORMATION

LAST NAME:	Paulsen	FIRST NAME:	Brian	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:	MA
GENDER:	MALE	HEIGHT:	6' 0"	WEIGHT:	270
				EYE COLOR:	Brown
CURRENT ADDRESS:					
CITY/TOWN:	Reading	STATE:	MA	ZIP:	01867
FORMER ADDRESS:					
CITY/TOWN:		STATE:		ZIP:	

PRINT AND SIGN

PRINTED NAME:	Brian Paulsen	APPLICANT/EMPLOYEE SIGNATURE:	<i>[Signature]</i>
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NOTARY INFORMATION

On this 22nd day of August 2023 before me, the undersigned notary public, personally appeared Brian Paulsen (name of document signer), proved to me through satisfactory evidence of identification, which were MA Driver 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.

[Signature]

NOTARY



DIVISION USE ONLY

REQUESTED BY:	
	<small>SIGNATURE OF DCB AUTHORIZED EMPLOYEE</small>

The DCB Identity Theft Alert PIN Number is to be completed by those applicants that have been issued an Identity Theft PIN Number by the DCB. 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 DCB via mail or by fax to (617) 860-6514.



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: 0002-C2-1016 LICENSEE NAME: Reading Bank Golf Corp. Reading, MA CITY/TOWN: Reading

APPLICANT INFORMATION

LAST NAME: Verrier FIRST NAME: Peter MIDDLE NAME: F

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

DATE OF BIRTH: [REDACTED] SSN: [REDACTED] ID THEFT INDEX PIN (IF APPLICABLE): _____

MOTHER'S MAIDEN NAME: [REDACTED] DRIVER'S LICENSE #: [REDACTED] STATE LIC. ISSUED: Massachusetts

GENDER: MALE HEIGHT: 5 10 WEIGHT: 180 EYE COLOR: Hazel

CURRENT ADDRESS: [REDACTED]

CITY/TOWN: Reading STATE: MA ZIP: 01867

FORMER ADDRESS: _____

CITY/TOWN: _____ STATE: _____ ZIP: _____

PRINT AND SIGN

PRINTED NAME: Peter F. Verrier APPLICANT/EMPLOYEE SIGNATURE: [Signature]

NOTARY INFORMATION

On this August 8, 2023 before me, the undersigned notary public, personally appeared Peter F. Verrier
(name of document signer), proved to me through satisfactory evidence of identification, which were driver's 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.

[Signature]
NOTARY

DIVISION USE ONLY

REQUESTED BY: _____
SIGNATURE OF CSB-AUTHORIZED EMPLOYEE: _____

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 security 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) 450-4414.



EVA M. GRIZZELL
Notary Public
Commonwealth of Massachusetts
My Commission Expires
July 28, 2028



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: 0002-CL-1016 LICENSEE NAME: Mendow Brook Golf Corp. of Reading Ma CITY/TOWN: Reading

APPLICANT INFORMATION

LAST NAME: Sweeney FIRST NAME: Maura MIDDLE NAME: Davis
 MAIDEN NAME OR ALIAS (IF APPLICABLE): [REDACTED] PLACE OF BIRTH: Hartford, CT
 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: Massachusetts
 GENDER: MALE HEIGHT: 5 7 WEIGHT: 165 EYE COLOR: Blue
 CURRENT ADDRESS: [REDACTED]
 CITY/TOWN: Reading STATE: MA ZIP: 01867
 FORMER ADDRESS: [REDACTED]
 CITY/TOWN: Reading STATE: MA ZIP: 01867

PRINT AND SIGN

PRINTED NAME: Maura D. Sweeney APPLICANT/EMPLOYEE SIGNATURE: M D Sweeney

NOTARY INFORMATION

On this Wednesday, 16 August, 2023 before me, the undersigned notary public, personally appeared MAURA D. SWEENEY
 (name of document signer), proved to me through satisfactory evidence of identification, which were MA DRIVER'S 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.
[Signature]
 NOTARY



MANDY L. WRAY
Notary Public
Commonwealth of Massachusetts
My Commission Expires
August 24, 2023

DIVISION USE ONLY

REQUESTED BY: [REDACTED]
 SIGNATURE OF COM-AUTHORIZED EMPLOYEE: [REDACTED]
The DCJ Theft Index PIN Number is to be completed by those applicants that have been issued an Identity 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) 680-6614.



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: 0002-CL-1016 LICENSEE NAME: Meadow Brook Golf Corporation of Reading Mass CITY/TOWN: Reading

APPLICANT INFORMATION

LAST NAME: Quinn FIRST NAME: Sean MIDDLE NAME: []
 MAIDEN NAME OR ALIAS (IF APPLICABLE): [] PLACE OF BIRTH: PHILADELPHIA, PA
 DATE OF BIRTH: [] SSN: [] ID THEFT INDEX PIN (IF APPLICABLE): []
 MOTHER'S MAIDEN NAME: [] DRIVER'S LICENSE #: [] STATE LIC. ISSUED: MA
 GENDER: MALE HEIGHT: 6' 0" WEIGHT: 205 EYE COLOR: BLUE
 CURRENT ADDRESS: []
 CITY/TOWN: Reading STATE: MA ZIP: 01867
 FORMER ADDRESS: []
 CITY/TOWN: READING STATE: MA ZIP: 01867

PRINT AND SIGN

PRINTED NAME: SEAN QUINN APPLICANT/EMPLOYEE SIGNATURE: [Signature]

NOTARY INFORMATION

On this August 30, 2023 before me, the undersigned notary public, personally appeared Sean Quinn
 (name of document signer), proved to me through satisfactory evidence of identification, which were Drivers 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.
 [Signature] NOTARY

DIVISION USE ONLY

RECEIVED BY: []
 SIGNATURE OF COMMISSIONER/ACTING COMMISSIONER
 This form is provided by the ABCC. It is not to be completed by those applicants that have been issued an identity theft protection number by the FBI. Certified agencies are required to provide all applicants the opportunity to make the 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 OLS via mail to by the 10/31/2023.



EVA M. GRIZZELL
Notary Public
Commonwealth of Massachusetts
My Commission Expires
July 28, 2028

We, Philimon P. Carleton President, Clarence C. Brown Treasurer,
and Le Roy Todd and Ernest D. Richmond

Meadow Brook Golf Club Corporation of Reading, Massachusetts
The

being a majority of the Directors of the Meadow Brook Golf Club Corporation of Reading, Massachusetts in compliance with the requirements of the fourth section of chapter one hundred and fifteen of the Public Statutes, do hereby certify, that the following is a true copy of the agreement of association to constitute said Corporation, with the names of the subscribers thereto:—

"We, whose names are hereto subscribed, do, by this agreement, associate ourselves with the intention to constitute a Corporation, according to the provisions of the one hundred and fifteenth chapter of the Public Statutes of the Commonwealth of Massachusetts, and the Acts in amendment thereof and in addition thereto.

The name by which the Corporation shall be known is

The Meadow Brook Golf Club Corporation of Reading, Massachusetts.

The purpose for which the Corporation is constituted is the encouragement of athletic exercise.

Continued on separate sheet

File

January 20, 1925

Per Secretary

Public Statutes, Chap. 115, Sect. 4, and Revised Laws, Chap. 125, Sect. 6.

Edw.

The place within which the Corporation is established or located, is the Town of Reading within said Commonwealth.

The amount of its capital stock is _____ dollars. The par value of its shares is _____ dollars. The number of its shares is _____.

In Witness Whereof, we have hereunto set our hands, this first day of May in the year thousand and one.

- | | |
|-----------------------------|-------------------------------|
| <u>Edward R. Drake</u> | <u>Rebecca Louise Ruggles</u> |
| <u>Walter G. Ruggles</u> | <u>William R. Guinnors</u> |
| <u>William O. Steves</u> | <u>Archer R. Prentiss</u> |
| <u>James W. Jones</u> | <u>Marion A. Howe</u> |
| <u>Winthrop D. Parker</u> | |
| <u>Arthur W. Mansfield</u> | |
| <u>Clarence C. Brown</u> | |
| <u>Philimon P. Carleton</u> | |
| <u>Edward W. Bancroft</u> | |
| <u>Le Roy W. Todd</u> | |
| <u>Ernest D. Richmond</u> | |
| <u>Richard W. Francis</u> | |

25X 171

5321

That the first meeting of the subscribers to said agreement was held on the eighteenth
day of May in the year nineteen hundred and one

In Witness Whereof, we have hereunto signed our names, this twentieth
day of May in the year nineteen hundred and one

Le Roy W. Todd
Ernest D. Richmond
Clarence C. Brown
Philemon P. Carlton

CORPORATORS OF MASSACHUSETTS, Middlesex ss. May 20 1901

Then personally appeared the above-named Le Roy W. Todd, Ernest D. Richmond,
Clarence C. Brown and Philemon P. Carlton

and severally made oath that the foregoing certificate, by them subscribed, is true, to the best of their knowledge and
belief. Before me,

Edward W. Bancroft
Justice of the Peace.

I hereby certify that it appears upon an examination of the whole-written certificate and the records of the corpora-
tion duly submitted to my inspection, that the incorporation of sections one, two and three of chapter one hundred and
twenty-five and sections thirteen, fourteen, fifteen and sixteen of chapter one hundred and thirty of the Public Statutes, have
been complied with, and I hereby approve said certificate, this twenty-third
day of January A.D. nineteen hundred and five

William D. F. Jeffrey Commissioner of Corporations.

Charter issued January 30, 1902, to The Meadow Brook Golf Club, Corpora-
tion of Reading, Massachusetts as a new Corporation, No. 9296
a copy of which charter, or certificate of incorporation, is recorded in Charter Book, No. 147
Page 9296 Fee, \$5.00, paid.

25 X 107



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

Maura Healey
GOVERNOR
Kim Driscoll
LT. GOVERNOR



432417987

Lauren E. Jones
SECRETARY
Katie Dishnica
DIRECTOR

MEADOW BROOK GOLF CLUB
292 GROVE STREET
READING, MA 01867

EAN: 39471110
August 04, 2023

Certificate Id:73167

The Department of Unemployment Assistance certifies that as of 8/4/2023 ,MEADOW BROOK GOLF CLUB 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.

Katie Dishnica, Director

Department of Unemployment Assistance



Commonwealth of Massachusetts
Department of Revenue
Geoffrey E. Snyder, Commissioner

mass.gov/dor

Letter ID: L0708640032
Notice Date: August 4, 2023
Case ID: 0-002-132-217



CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



MEADOW BRK GOLF CLUB
292 GROVE ST
READING MA 01867-1208

000012

Why did I receive this notice?

The Commissioner of Revenue certifies that, as of the date of this certificate, MEADOW BRK GOLF CLUB 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

February 6, 2024		Tuesday	
	Overview of Meeting	McCarthy	7:00
	Public Comment	Board	7:05
	SB Liaison & Town Manager Reports	Board	7:15
	Preview Warrant for April Town Meeting	Board	7:30
	Discuss Future Agendas	Board	9:15
	Approve Meeting Minutes	Board	9:30
February 27, 2024		Tuesday	
	Overview of Meeting	McCarthy	7:00
	Public Comment	Board	7:05
	SB Liaison & Town Manager Reports	Board	7:15
	Vote to Close Warrant for April Town Meeting	Board	7:30
	Vote to Close Warrant for Local Election		7:45
	Vote to Close Warrant for Presidential Primary		8:00
	Discussion and Vote on CPA Study Committee		
	Discuss Future Agendas	Board	9:15
	Approve Meeting Minutes	Board	9:30
March 5, 2024	PRESIDENTIAL PRIMARY & LOCAL ELECTION		
March 12, 2024		Tuesday	
	Overview of Meeting		7:00
	Board Reorganization		7:05
	Public Comment		7:15
	Select Board Liaison and Town Manager Reports		7:20
March 26, 2024		Tuesday	
	Overview of Meeting		7:00
	Public Comment		7:05
	Select Board Liaison and Town Manager Reports		7:15
April 9, 2024		Tuesday	
April 22, 2024	ANNUAL TOWN MEETING		
April 25, 2023	ANNUAL TOWN MEETING		
April 29, 2023	ANNUAL TOWN MEETING		
May 2, 2024	ANNUAL TOWN MEETING		
May 7, 2024		Tuesday	
May 21, 2024		Tuesday	
June 4, 2024		Tuesday	

June 18, 2024		Tuesday	
July 16, 2024		Tuesday	
August 20, 2024		Tuesday	
September 10, 2024	STATE PRIMARY		
September 17, 2024		Tuesday	
October 8, 2024		Tuesday	
October 29, 2024		Tuesday	
November 5, 2024	STATE ELECTION		
November 12, 2024	SUBSEQUENT TOWN MEETING		
November 14, 2024	SUBSEQUENT TOWN MEETING		
November 18, 2024	SUBSEQUENT TOWN MEETING		
November 19, 2024		Tuesday	
November 21, 2024	SUBSEQUENT TOWN MEETING		
December 3, 2024		Tuesday	
December 4, 2024		Wednesday	
December 10, 2024		Tuesday	

Select Board Draft Minutes

January 9, 2024

CB via Zoom

Public Comment

Peter Kramer expressed his dissatisfaction with the DPW's job snowplowing this past storm.

Liaison Reports

Herrick noted there is a Killam kick-off community meeting this Thursday. She explained the next steps in the MSBA process including upcoming important dates. She attended a meeting to get a BID update this morning at Whitelam Books. She visited the Council on Aging.

Haley noted the School Committee met last week and went over the FY25 budget. Reading Field Hockey Champions were there. The Charter Review Committee met last night and has completed their first pass through the entire Charter. They will meet again at the end of January and will look to start scheduling a public forum to get more input.

Dockser noted that ReCalc has brought the architect up to speed. They are working on planning a bunch of public meetings. PAIR had a meeting in late December where the new Director of Equity got to meet everyone and see what the group does. He noted on Monday, the Towns' annual Martin Luther King Jr. Day celebration breakfast will take place at the Highschool.

Bacci had no updates for this meeting.

McCarthy thanked DPW and first responders for their ongoing work during the storm this weekend. CPDC met last night and approved a sign for the Dollar Tree and the McDonalds renovations. They continued their hearing on the Pinevale development project. Staff is hosting MBTA Communities informational session tomorrow and will have a few more. The Governor announced budget cuts which we will have to keep an eye on to see if/ how it will affect Readings aid. The Town Manager screening committee met with candidates last week and they will announce the finalists at a special Select Board meeting next week.

Town Manager Report

Acting Town Manager Matt Kraunelis noted he reached out to the Delegation about the budget cuts and it looks like Reading's earmarks are safe at the moment but we will see the final budget soon. He also mentioned the Killam Community meeting this Thursday and the MLK breakfast on Monday. Reading received more than 10" of snow between Saturday and Sunday; DPW has been out working diligently to get roads and sidewalks cleaned up as fast as possible. Because of the duration of the storm, some staff were out for over 24 hours and delayed some sidewalk clean ups. He is working on finalizing union contracts; two of which are scheduled for Executive session tonight.

New Liquor License Application

The town received a new liquor license application for 136 Haven Street for 1917 POST; a new steakhouse that will be opening in the spring. Attorney AJ Capano and Owner Jason Carron were present and explained their plans for the restaurant.

Mark Dockser explained that the board takes alcohol compliance very seriously and he hopes this new establishment will as well.

Herrick moved to close the hearing regarding the new liquor license application. The motion was seconded by Dockser and approved with a unanimous roll call vote.

Herrick moved to approve the annual all alcohol liquor license for Parc Restaurant Group d/b/a POST 1917 at 136 Haven Street, Reading, MA. The motion was seconded by Dockser and was approved with a unanimous roll call vote.

Edge Sports Presentation

This has been postponed until a further meeting.

Update from the Council on Aging

Nancy Ziemplak gave the board a presentation with updates on what the Council on Aging has been working on. The presentation can be found in the Select Board packet on the town website.

Future Agendas

The board discussed future agenda items.

Minutes

Herrick moved to approve the meeting minutes from December 12th, 2023 as written. The motion was seconded by Dockser and approved with a roll call vote.

Executive Session

At 8:11 PM, Herrick moved that the board go into Executive Session including staff members Matt Kraunelis, Jane Kinsella, Chris Cole, Sharon Angstrom, Sean Donahue, and Caitlin Nocella; and previous Town Manager Fidel Maltez, to discuss strategy with respect to collective bargaining and approve contracts for the Public Works - AFSCME Council 93, Local 1703 and Public Works Supervisory Union, AFSCME Council 93, Local 1703. Further the Chair declares that an open meeting could have a detrimental effect on the bargaining position of the body; and the board will NOT reconvene in open session. The motion was seconded by Dockser and approved with a unanimous roll call vote.

Select Board Draft Minutes

January 16, 2024

JM & CB via Zoom

Bernie Lynch from Community Paradigm gave the board an update on the process of hiring a new Town Manager. He went through a PowerPoint to bring the board up to speed on what they have done, where they are and the next steps.

They received 19 applications which is about average at the moment although on the lighter side. Eleven were viable applicants with municipal experience. Seven candidates were selected for interviews and four finalists were selected for a final interview with the entire Select Board and other staff members. The finalists will also partake in a Reading immersion event to meet staff and tour the Town.

Mr. Lynch revealed the four finalists as:

Antonio Barletta, current Town Administrator in Nahant, MA.

Matthew Coogan, current Town Administrator in Boxford, MA.

Matthew Kraunelis, current Assistant Town Manager and acting Town Manager here in Reading.

Clancy Main, current Assistant Town Manager in Billerica, MA.

The four finalists will be interviewed by the full Select Board on Saturday, January 27th.

Herrick made a motion to adjourn, with a second by Dockser the motion was approved at 8:07 PM with a unanimous roll call vote.