## Full Circle Brewing Co. Ltd. LLC

## **Alcohol Industry Investor Questionnaire**

## **Requirements for all Prospective Investors**

1.	Full name: First:;				
	Middle:; Last:				
2.	Previous Name(s): (Include maiden, aka, alias, etc.):				
3.	Business Mailing Address:				
4.	. Home Address (street, city, state, zip code):				
5.	Home Telephone Number:				
6.	Mobile phone number:				
7.	Work phone number:				
8.	Email Address:				
9.	Social Security Number:				
10.	Sex: Male; Female;				
11.	Driver's License Number:				
12. State of Licensure:					
	a. Birthdate (mm/dd/yy):				
	b. Birthplace:				
13.	Describe any interest in alcoholic beverage business:				

14. Employment History – Last 3 years (begin with most recent):				
(1):				
a.	Company Name and Address:			
b.	Job Title:			
c.	From:			
d.	To:			
(2):				
a.	Company Name and Address:			
b.	Job Title:			
c.	From:			
d.	To:			
15. Other ABC license ( <i>If none, answer N/A</i> ):				
16. Employment History (Past three years, including unemployment, student, homemaker, etc.) Begin with most recent employment.				
(1):				
a.	Company Name and Address:			
b.	Job Title:			
c.	From:			
d.	To:			
(2):				
a.	Company Name and Address:			
b.	Job Title:			
c.	From:			

	a.	10:	
17.	Reside	ence History (For Last 5 years):	
	a.	Address/City/State:	
	b.	From:	
	c.	To:	
	a.	Address/City/State:	
	b.	From:	
	c.	To:	
19.	Have y	you ever been arrested for violating any other FEDERAL or STATE law?  No  please explain	
20.	D. Have you ever been convicted of any felony or misdemeanor under FEDERAL or STATE law? Yes No  If Yes, please explain		
21.	violati DISTI	you ever been compromised, by payment of penalties or otherwise, for any on of any FEDERAL law relating to Internal Revenue or Customs taxation of LLED SPIRITS, WINES, BEER, or TOBACCO PRODUCTS? Yes No	
	If Yes.	please explain	

	import	ing, or transporting alcohol, wine, or beer, has any application submitted by you isapproved of? Yes No
	If Yes,	please explain
23.	Are yo	u a U.S. citizen? Yes No
	ever be store, DENA	you as an individual or in connection with a partnership, LLC., firm or corporation een connected with a FEDERAL permit or approved notice to manufacture, use, rectify, bottle, distribute, sell, deal in, import or transport ALCOHOL, TURED SPIRITS, DISTILLED SPIRITS, BEER, WINES, or TOBACCO UCTS? Yes No
	a.	If Yes, please provide the following:
	b.	Registry or Permit Number:
	c.	Period Covered: From: To:
	d.	If discontinued, when and why?
	e.	Name and Address under which the approved permit/notice was issued:
	f.	If revoked, was settlement made of civil liabilities incurred thereunder?
		Yes No If Yes, when?
	produc	you ever been, or are you now, employed by any person, firm LLC, or corporation ing, storing, rectifying, bottling, importing, distributing, or dealing in distilled wines, beer, alcohol, or denatured spirits? Yes No
	a.	If yes, provide the following:
	b.	Period of employment: From: To:
	c.	Capacity/position:
	d.	Name of person, firm, LLC, or corporation: