



CITY OF DOUGLAS

PAWNBROKER'S LICENSE APPLICATION, TERM

OF March 1, 2024 thru February 28, 2025

INFORMATION REGARDING APPLICANT:

1. Full Name: <u>ShERRI Beene</u>		
2. Social Security #: <u>399-52-6072</u>	3. Home Phone #: <u>307-359-8013</u>	
4. Address of Premise (City/State/ZIP): <u>815 E. Richards 234 UNIT Douglas WY 82633</u>		
5. Address of Residence (City/State/ZIP): <u>28 A Tower Rd Douglas WY 82633</u>		
6. Driver's License #: <u>106148596</u>	7. State: <u>WY</u>	8. Expiration Date: <u>9-3-2024</u>

INFORMATION REGARDING COMPANY:

9. Company Name: <u>DOUGLAS Pawn</u>	
10. Company Address (City/State/ZIP): <u>815 E. Richards Unit 234 Douglas WY 82633</u>	
11. Company TIN/SSN: <u>83-0323323</u>	12. Company Phone #: <u>307-358-9318</u>
13. Has a license been obtained from Wyoming uniform credit code? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	15. Date Received: <u>10-16-1998</u>
14. License #: <u>PB-131</u>	16. Expiration Date: <u>N/A</u>

IF PARTNERSHIP OR CORPORATION, LIST NAME & ADDRESS (ES)

17. Name/Title: <u>TERRY Beene PO Box 1235</u> Address (City/State/ZIP): <u>28 A Tower Rd Douglas WY 82633</u>
18. Name/Title: <u>ShERRI Beene PO Box 1235</u> Address (City/State/ZIP): <u>28 A Tower Rd Douglas WY 82633</u>
19. Name/Title: <u>Jodie Beene PO Box 255</u> Address (City/State/ZIP): <u>28 B Tower Rd Douglas WY 82633</u>
20. Name/Title: <u>Nerweth Beene PO Box 255</u> Address (City/State/ZIP): <u>28 B Tower Rd Douglas WY 82633</u>

21. Have you, any partner, or corporation ever been convicted of a felony or violation of the laws of the state of Wyoming relating to stolen property? YES NO

22. If "YES", state name of person & felony. _____

I hereby certify the above information to be true and correct to the best of my knowledge. I understand that you may deny or revoke my application if the information is false. I hereby authorize you to check all the above information in processing this application.

Sherrí Beene
SIGNATURE OF APPLICANT

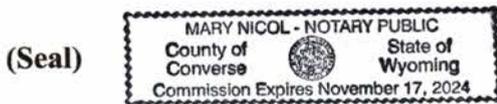
2-21-2024
DATE OF APPLICATION

STATE OF WYOMING)
)
COUNTY OF CONVERSE)

Before me personally appeared Sherrí Beene, as member of Douglas Pawn Brokers, known to me to be the person whose name is subscribed to this instrument, and

acknowledged that he/she executed the same for the purposes therein expressed this 21 day of February, 2024.

Witness my hand and official seal.



Mary Nicol
NOTARY PUBLIC

TO BE COMPLETED BY CITY CLERK

Date Received: <u>2/21/2024</u>	Date of Council meeting: Feb. 8, 2016	License # issued:
License Fee (Renewal): \$250.00	Receipt #: <u>3614551</u>	Term of License: March 1, 2016 - Feb. 28, 2017 <u>25 24</u>



CITY OF **DOUGLAS** WYOMING
HOME OF THE JACKALOPE.

Permits & Licenses Staff Approval Form

City Administrator: _____

Administrative Services Director: _____

City Clerk: _____

Chief of Police: _____

Public Works Director: _____

Community Development Director: _____

Chief of Fire (Special Event Permits Only): _____

Additional Comments: _____