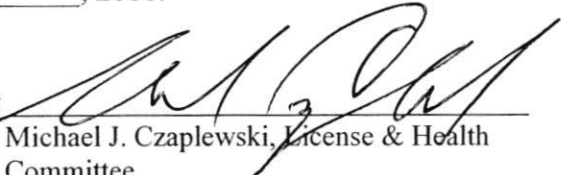


sections 125.17, 125.32(2), and 125.68(2) of the Wisconsin Statutes.

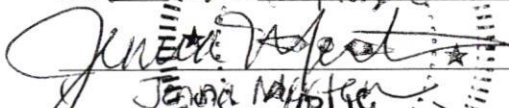
5. That on October 6, 1993; February 11, 2000; July 2, 2006; and August 10, 2009, Susan Morgese did operate a motor vehicle while under the influence of an intoxicant, contrary to section 346.63(1)(A), Wis. Stats., and was subsequently convicted of said offenses.
6. That on August 10, 2009, Susan Morgese did operate a motor vehicle after revocation, contrary to 343.44(1)(b), Wis. Stats., and was subsequently convicted of said offense.
7. That the conduct of Susan Morgese described in paragraphs 5 and 6 substantially relates to the alcohol beverage licensed activity contrary to 125.04(5)(b), so as to disqualify Susan Morgese from obtaining, keeping, or renewing a Class "I" Operator's License.

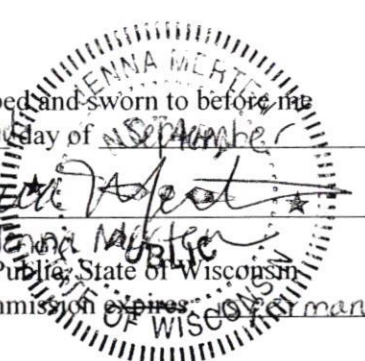
WHEREFORE, Michael J. Czaplewski requests that Susan Morgese be summoned to appear before the License and Health Committee of the West Allis Common Council to answer this complaint and, if the material allegations of the complaint are denied, that a hearing be held to determine whether the Operator's License issued to Susan Morgese should be suspended, revoked or not renewed.

Dated at this 22 day of SEPTEMBER, 2011.

By: 
Michael J. Czaplewski, License & Health
Committee
West Allis Common Council

Subscribed and sworn to before me
this 22nd day of September, 2011.


Jenna Myster
Notary Public, State of Wisconsin
My Commission expires: Permanent



State of Wisconsin

Municipal Court

City of West Allis

Affidavit of Process Server

Court/Appearance Date: 10/04/11
City of West Allis

Case Number _____
Susan Morgese

Vs

I the undersigned am an adult resident of the state and not a party to the action. I hereby swear that on September 29, 2011 at 10:50 a.m. I duly served/or attempted to serve, (see non service section)

NAME Susan Morgese

- | | | | | | |
|--------------------------|---------------------|--------------------------|------------|--------------------------|-----------------------|
| <input type="checkbox"/> | DEFENDANT | <input type="checkbox"/> | PETITIONER | <input type="checkbox"/> | OTHER ATTEMPTED DATES |
| <input type="checkbox"/> | GARNISHEE DEFENDANT | <input type="checkbox"/> | RESPONDENT | | |
| <input type="checkbox"/> | PLAINTIFF | <input type="checkbox"/> | WITNESS | | |

By serving Susan Morgese at _____
 Name Title/Relationship
 Home 4702 W. Cleveland Ave. Apt B City of Milwaukee Wisconsin
 Business _____ Wisconsin

Manner of Service:

- Personal Service
 Corporate Service: by leaving, during office hours, copies at the office of the person/entity being served, leaving same with the person apparently in charge thereof.
 After diligent search and inquiry, having made _____ attempts by leaving true & correct copies of the above documents with a competent occupant of the residence over the age of 14, and informed that person of the contents thereof. (See other Attempt Dates)
 By posting copies in a conspicuous manner to the address of the person/entity being served. (Use only for evictions)
 Copies of the documents were mailed by prepaid, first class mail on: _____ DATE _____ FROM _____

NonService: after due search, careful inquiry and diligent attempts at the address(s). listed above, I have been unable to effect process upon the person/entity being served because of the following reason(s):

- | | | | | | |
|--------------------------|-------------------------|--------------------------|-------------------------------------|--------------------------|---|
| <input type="checkbox"/> | Unknown at address | <input type="checkbox"/> | Moved no forwarding | <input type="checkbox"/> | Refuses to cooperate in acceptance |
| <input type="checkbox"/> | Address does not exist | <input type="checkbox"/> | Evading | <input type="checkbox"/> | Service cancelled by litigant |
| <input type="checkbox"/> | Not home three attempts | <input type="checkbox"/> | Unable to serve in a timely fashion | <input type="checkbox"/> | Search was conducted, whereabouts unknown |

Type of Documents:

- | | | | |
|-------------------------------------|-------------------------------------|--------------------------|---|
| <input checked="" type="checkbox"/> | SUMMONS & COMPLAINT | <input type="checkbox"/> | ORDER TO SHOW CAUSE & AFFIDAVIT |
| <input type="checkbox"/> | AUTHENTICATED SUMMONS & COMPLAINT | <input type="checkbox"/> | GARNISHEE SUMMONS & COMPLAINT EARNINGS – NON EARNINGS |
| <input type="checkbox"/> | EVICITION: SUMMONS & COMPLAINT | <input type="checkbox"/> | SUBPOENA – SUBPOENA DUCES TECUM |
| <input type="checkbox"/> | NOTICE OF MOTION & MOTION/AFFIDAVIT | <input type="checkbox"/> | SUMMONS AND PETITION |
| <input type="checkbox"/> | OTHER: _____ | <input type="checkbox"/> | NOTICE OF/TERMINATING TENANCY/PAY OR QUIT |
| | | <input type="checkbox"/> | WRITTEN INTERROGATORIES & REQUEST FOR PRODUCTION OF DOCUMENTS |

At the time of service, I did place upon it the date, time, and my name, leaving a true and correct copy thereof, and that the server knew the person so served to be the defendant (or other) mentioned and named therein.

NUMBER OF ATTEMPTS _____	NUMBER OF ADDRESSES ATTEMPTED (if more than one) _____
SERVICE FEE \$ <u>22.00</u>	WITNESS FEE \$ _____
FILING FEE \$ _____	SEARCH FEE \$ _____
TOTAL FEE \$ <u>22.00</u>	MILEAGE \$ _____

Server's Name Carlton W. Manske Server's Signature Carlton W. Manske
 (Print)

Subscribed and sworn to before me
This 4th day of October, 2011

NOTARY PUBLIC, State of Wisconsin
My Commission expires 2014

RECEIVED

OCT 4 2011

CITY OF WEST ALLIS
CLERK/TREASURER