



**LA VISTA POLICE DEPARTMENT  
INTER-DEPARTMENT MEMO**

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**TO:** Pam Buethe, City Clerk

**FROM:** Acting Chief Captain D. J. Barcal

**DATE:** May 5, 2023

**RE:** Local Background Check– Manager Kwik Shop

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The La Vista Police Department has reviewed the Nebraska Liquor Control Commission Documents completed by the applicant and conducted a check of local records relating to the Manager Application for Rosalind Sells. No criminal record was located.

As with all Nebraska Retail Liquor Licenses, I am asking the applicant strictly conform to Nebraska Liquor Commission rules and regulations under Section 53-131.01, Nebraska Liquor Control Act.

**MANAGER APPLICATION  
INSERT - FORM 3c**

NEBRASKA LIQUOR CONTROL COMMISSION  
301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
FAX: (402) 471-2814  
Website: [www.lcc.nebraska.gov](http://www.lcc.nebraska.gov)

Office Use

**RECEIVED**

**MAR 09 2023**

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

**MUST BE:**

- ✓ Include copy of US birth certificate, naturalization paper or current US passport
- ✓ Nebraska resident. Include copy of voter registration card or print out document from Secretary of State website
- ✓ Fingerprinted. See form 147 for further information, read form carefully to avoid delays in processing, this form MUST be included with your application
- ✓ 21 years of age or older

**Corporation/LLC information**

Name of Corporation/LLC: **KWIK SHOP, INC.**

**Premise information**

Liquor License Number: **106676** Class Type **D** (if new application leave blank)

Premise Trade Name/DBA: **KWIK SHOP #664**

Premise Street Address: **6910 S 108TH ST**

City: **LA VISTA** County: **SARPY** Zip Code: **68046**

Premise Phone Number: **(402) 593-9286**

Premise Email address: **ROSALIND.SELLS@EG-AMERICA.COM**

**The individual whose name is listed as a corporate officer or managing member as reported on insert form 3a or 3b or listed with the Commission. To see authorized officers or members search your license information here.**

  
**SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER**  
(Faxed signatures are acceptable)

**Personal Information (Given Name)**

Last Name: Sells First Name: Rosalind MI: R

Home Address: 4572 Meredith Avenue

City: Omaha County: Douglas Zip Code: 68104 2471

Home Phone Number: 402-427-4060

Driver's License Number & State: [REDACTED]

Social Security Number: [REDACTED]

Date Of Birth: [REDACTED] Place Of Birth: Beaumont, Texas

Email address: rosalind.sells@eg-america.com

**Spouse's Information (Given Name)**

☐ YES

☒ NO

**Spouse's Information (Given Name)**

Spouses Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number & State: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_ Place Of Birth: \_\_\_\_\_

**Spouse's Information (Given Name)**

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Omaha, NE	2003	Current			



YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
1998	Current	EG America	Josh Kangley	605-595-4160
1997	1998	VonMaur	Too long ago to remember	

**1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.**

**Must be completed by both applicant and spouse, unless spouse has filed an affidavit of non-participation.**

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea, include traffic violations. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name. Commission must be notified of any arrests and/or convictions that may occur after the date of signing this application.

☐ YES ☐ NO

If yes, please explain below or attach a separate page.

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (City & State)	Description of Charge	Disposition
Rosalind Sells	09/01/2018	Omaha, NE	Moving violation	Guilty / \$1.00 fine
Rosalind Sells	03/22/2011	Omaha, NE	Speeding Ticket	Fine

2. Have you or your spouse ever been approved or made application for a liquor license in Nebraska or any other state?

☒ YES ☐ NO

To the best of my Knowledge - It has been years so may have been another store also -Kwik Shop #653, Kwik Shop #660

IF YES, list the name of the premise(s):

3. Do you, as a manager, qualify under Nebraska Liquor Control Act (§53-131.01) and do you intend to supervise, in person, the management of the business?

☒ YES ☐ NO

4. List the alcohol related training and/or experience (when and where) of the person making application.

\*NLCC Training Certificate Issued: 03/06/2022 Name on Certificate: Nebraska RBST

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Rosalind Sells	03/06/2022	Nebraska Responsible Beverage Service Training

\*For list of NLCC Certified Training Programs see training

Experience:

Applicant Name / Job Title	Date of Employment:	Name & Location of Business:
Rosalind Sells / Manager	1998-2007	Kwik Shop 9606 F Street / Kwik Shop 5929 N 72nd Street
		Both located in Omaha, NE

5. Have you enclosed form 147 regarding fingerprints?

☒ YES ☐ NO



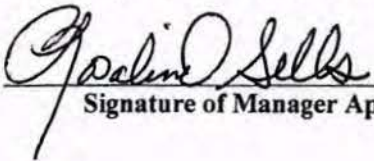
PERSONAL OATH AND CONSENT OF INVESTIGATION

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, a spousal affidavit of non-participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent.

***Applicant Notification and Record Challenge:*** Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in FBI identification record. The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.



Signature of Manager Applicant

Signature of Spouse

ACKNOWLEDGEMENT

State of Nebraska

County of

Sarpy

The foregoing instrument was acknowledged before me this

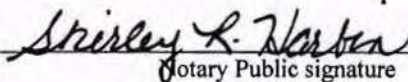
March 8, 2022

date

by

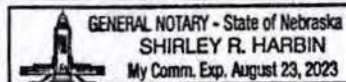
Rosalind Sells

NAME OF PERSON BEING ACKNOWLEDGED



Notary Public signature

Affix Seal

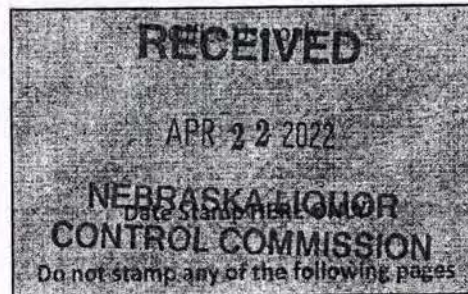


In compliance with the ADA, this application is available in other formats for persons with disabilities. A ten day advance period is required in writing to produce the alternate format.



**PRIVACY ACT STATEMENT/  
SUBMISSION OF FINGERPRINTS /  
PAYMENT OF FEES TO NSP-CID**

NEBRASKA LIQUOR CONTROL COMMISSION  
301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
FAX: (402) 471-2814  
Website: www.lcc.nebraska.gov



**THIS FORM IS REQUIRED TO BE SIGNED BY EACH PERSON BEING FINGERPRINTED:**  
**DIRECTIONS FOR SUBMITTING FINGERPRINTS AND FEE PAYMENTS:**

- **FAILURE TO FILE FINGERPRINT CARDS AND PAY THE REQUIRED FEE TO THE NEBRASKA STATE PATROL WILL DELAY THE ISSUANCE OF YOUR LIQUOR LICENSE**
- Fee payment of \$45.25 per person **MUST** be made **DIRECTLY** to the Nebraska State Patrol;  
It is recommended to make payment through the NSP PayPort online system at [www.ne.gov/go/nsp](http://www.ne.gov/go/nsp)  
Or a check made payable to **NSP** can be mailed directly to the following address:  
**\*\*\*Please indicate on your payment who the payment is for (the name of the person being fingerprinted) and the payment is for a Liquor License\*\*\***

The Nebraska State Patrol – CID Division  
4600 Innovation Drive  
Lincoln, NE 68521

- Fingerprints taken at NSP LIVESCAN locations will be forwarded to NSP – CID  
*Applicant(s) will not have cards to include with license application.*
- Fingerprints taken at local law enforcement offices may be released to the applicants;  
*Fingerprint cards should be submitted with the application.*

***Applicant Notification and Record Challenge:** Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedures for obtaining a change, correction, or updating a FBI identification record are set forth in Title 28, CFR, 16.34.*

**\*\*\*\*Please Submit this form with your completed application to the Liquor Control Commission\*\*\*\***

Trade Name Kwik Shop, Inc.

Name of Person Being Fingerprinted: Rosalind R. Sells

Date of Birth:                      Last 4 SSN                     

Date fingerprints were taken: March 9, 2022

Location where fingerprints were taken: Omaha; Troop A Headquarters

How was payment made to NSP?

☒ NSP PAYPORT ☐ CASH ☐ CHECK SENT TO NSP CK #                     

My fingerprints are already on file with the commission – fingerprints completed for a previous application less than 2 years ago? YES ☐

Rosalind R. Sells 03-09-22  
SIGNATURE REQUIRED OF PERSON BEING FINGERPRINTED

***Certificate of Achievement***

- for those who serve or sell alcohol in Nebraska

***ROSALIND RITA SELLS***

*holds a*

State Alcohol certificate

Permit # RB-0148871


Permit Expires: 03-06-2025 Amount Paid: \$



***Responsible Beverage Service Training***  
**N E B R A S K A**





General	Credential	Number	Earned	Expires
Rosalind Rita Sells 4572 meredith ave Omaha NE 68104	STATE ALCOHOL	RB-0148871	03-06-2022	03-06-2025
fbst	Nebraska	Wallet	Card	



[Back to Lookup](#) / [Registrant Detail](#)

## Rosalind R Sells

Political Party  
Democratic

Precinct  
02-15

### Election Details

05/10/2022 2022 Primary Election

### Absentee Ballot

Absentee Ballot exists for this election, but we require more information to display it.

Date of Birth

Month

Day

Year

Look Up

### Polling Location

Fontenelle Park Pavilion (Upper Edmonson Center)

4407 Fontenelle Blvd. Omaha, NE 68104



### Ballot Styles

057

### Districts

Show

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