

MINUTES - CITY COUNCIL

DATE: April 28, 2026
TIME: 6:00 P.M.
LOCATION: City Council Chambers, Kiel City Hall
621 Sixth St., Kiel, Wis.
MEMBERS: Mayor Hennings, Alderpersons Jeremy Fromm,
Tyler Guell, John Brocker, Jason Nett, Bill Krueger,
and Alice Achter

- 1) Mayor Bob Hennings called the meeting to order at 6:00 pm
- 2) Pledge of Allegiance
- 3) Roll Call was taken with all members present. Also present were CA Pafford and citizens Jaxon Guell, Dawn Buchholz, and Monica Grunewald.
- 4) Alder Krueger moved, Alder Achter seconded to approve the minutes of the April 21, 2026, City Council Meeting. The motion passed unanimously.
- 5) Public Comment- Dawn Buchholz spoke during public comment regarding agenda item 11 and spoke in favor of Ms. Grunewald's appeal, citing the acknowledgment of mistakes made and claiming responsibility if needed for
- 6) Alder Guell moved, Alder Brocker seconded to approve resolution 2026-3, raising Municipal Court Fees from \$38 to \$48. Voting Aye were Alders; Fromm, Guell, Brocker, Nett, Krueger, and Achter. The motion passed 6-0
- 7) Alder Fromm moved, Alder Achter seconded approval of a temporary Alcohol Beverage License for Badger Tri County VFW Post 6707, May 25, 2026. (Memorial Day Brat Fry). Voting Aye were Alders; Fromm, Guell, Brocker, Nett, Krueger, and Achter. The motion passed 6-0.
- 8) Alder Guell moved, Alder Nett seconded, approval of a Special Event Application for Kiel Area Chamber of Commerce. June 12, 2026. Voting Aye were Alders; Fromm, Guell, Brocker, Nett, Krueger, and Achter. The motion passed 6-0

- 9) Alder Brocker moved, Alder Krueger seconded, approval of a Temporary Alcohol Beverage License for the Kiel Chamber of Commerce, June 12, 2026. (German Day). Voting Aye were Alders; Fromm, Guell, Brocker, Nett, Krueger, and Achter. The motion passed 6-0
- 10) Alder Fromm moved, Alder Brocker seconded a Special Event Application, August 9th, 2026. (Kiel Parade). Voting Aye were Alders; Fromm, Guell, Brocker, Nett, Krueger, and Achter. The motion passed 6-0
- 11) Alder Brocker moved, Alder Guell seconded to grant an appeal of Operator License for Monica Grunewald. A discussion was held regarding the original application and the denial letter. CA Pafford was advised by Council to look into the possibility of a probationary period for a license and how it aligns with State Statute. Voting Aye were Alders; Fromm, Guell, Brocker, Nett, Krueger, and Achter. The motion passed 6-0
- 12) Alder Guell moved, Alder Brocker seconded to accept the generous donation in the amount of \$2,034.93 Kiel Optimist Club for Kiel Ambulance. The motion passed unanimously.
- 13) Alder Krueger moved, Alder Fromm seconded to approve receipts and disbursements. The motion passed unanimously.
- 14) Alder Krueger moved, Alder Fromm seconded to approve the payment of the bills. Voting Aye were Alders; Fromm, Guell, Brocker, Nett, Krueger, and Achter. The motion passed 6-0
- 15) Alder Guell moved, Alder Nett seconded to adjourn the meeting of the City Council. The motion passed unanimously. The meeting was adjourned at 6:11 pm.

Bob Hennings, Mayor,
Prepared by Ryan Pafford, City Administrator



CITY OF KIEL

621 Sixth Street / P.O. Box 98
 Kiel, WI 53042
 Phone (920) 894-2909

SPECIAL EVENT / OUTDOOR EVENT PERMIT APPLICATION

ORGANIZATION INFORMATION			
NAME OF BUSINESS <i>Alice's Stress Management</i>			
MAILING ADDRESS <i>625 Fremont St</i>		CITY <i>Kiel</i>	STATE <i>WI</i>
PHONE NUMBER <i>920-894-7161</i>	WEBSITE ADDRESS		
CONTACT PERSON <i>Alice Manier</i>			
MAILING ADDRESS <i>W 4774 Cty Rd mm</i>		CITY <i>Elkhart Lake</i>	STATE <i>WI</i>
HOME PHONE	WORK PHONE	CELL PHONE <i>920-254-6211</i>	
EMAIL ADDRESS <i>alice.manier.65@gmail.com</i>			

Application must be filed with city staff a minimum of 45 days prior to the special event.

VENUE INFORMATION	
NAME OF THE EVENT <i>Poker Run to Benefit Daniel Coffin</i>	DATE(S) OF THE EVENT <i>June 6th</i>
EVENT START TIME(S) <i>10:00 AM</i>	EVENT END TIME(S) <i>9:00 PM</i>
LOCATION OF THE EVENT <i>Bar and Backyard of Bar MaryAnn's yard</i>	
A. Please attach a detailed map/sketch of your outdoor event indicating the specific location and layout of your event.	
B. Generally, describe your event and its purpose. Please attach additional sheets or use "Additional Notes and Information" on next page if more room is needed. <i>Dan had a liver transplant has lots of medical + needs help for living expenses didn't work for mo. because in and out of hospitals for medical stuff</i>	
C. Estimated number of participants: _____ *Must not exceed fire and building code limits	
D. Does the event's location border residential property? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If yes, est. distance to nearest property? _____	
E. What zoning is the event location located in? <i>B-1</i> *Contact City Hall staff if information is not known	
F. Is there a plan for post-event clean up of litter and debris? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
G. Are there designated entry and exit points including emergency exits? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If yes, show on diagram	
H. Does your business/organization have liability insurance for this event/activity? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
I. Is outdoor lighting appropriately shielded to prevent distractions to nearby traffic and properties? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
J. Is there adequate parking onsite or available nearby for attendees to legally park vehicles? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

OTHER INFORMATION

A. Do you understand that all sales of alcohol are governed by local ordinance and Wis. Ss. (Chapter 125) including need for properly licensed operators (bartenders) on premise? YES NO

Please list the number of City of Kiel licensed bartenders that will be on site: 5

B. Does your event involve amplified music? YES NO / If Yes: Band DJ Other

Hours when amplified music will be played: 4:00 to 8:00? *End times after 10pm require council approval

Do you agree to work cooperatively with the Kiel Police Department to resolve loud noise complaints? YES NO

CITY SERVICES

Will you need barricades provided by the City of Kiel for your event? YES NO

If yes, how many? _____ Date Needed: _____ Time Needed: _____

C. What other assistance do you foresee needing from the City of Kiel (personnel, materials, equipment, etc.)?

D. Have you reviewed a copy of the City of Kiel Ordinance # 12.061 "Special Events" and do you understand that **you may be charged for City Services**? YES NO

PERMIT FEE

For a non-profit organization, there is no charge, for a for-profit organization

Non-profit/civic organization For-profit organization

\$100.00 Date Paid: _____ / Check #: _____

**Fee is non-refundable. If permit denied, and re-submitted, fee required for each submittal*

DEPOSIT REQUIREMENTS

For events using city buildings/properties, the applicant may be required to submit to the City Clerk-Treasurer's Office a cleaning/damage deposit of \$200 for each scheduled day of the event (or portion thereof) two weeks prior to the starting date of the event. That deposit shall be refunded to the applicant, if, upon inspection, all is in order, or a prorated portion thereof as may be necessary to reimburse the City for loss or cleaning costs. The City reserves the right to retain the entire deposit if cleanup is not completed satisfactorily in the time frame as specified in the permit. Unless otherwise stated in the permit, the applicant shall be fully responsible for all necessary cleanup associated with the permitted event to be completed within 24 hours after the conclusion of the event.

ADDITIONAL NOTES AND INFORMATION

Emergency Revocation and Termination of Special Events:

By signing this document, applicant clearly understands that a permit issued may be immediately terminated and revoked including while an event is in progress if the Police Chief, and/or Fire Chief or their designees determine that the activities for which the permit was issued:

- endangers the health, safety or general welfare of the public
- violates conditions which formed the basis of issuing the permit;
- violates city ordinances, WI state laws, or other unforeseen emergency or catastrophe concerns due to weather, fire, riot, or other public safety hazard.

By signing this form, the applicant certifies authorization to act on behalf of their business/organization, and hereby agrees to abide by all ordinances of the City of Kiel and laws of the State of Wisconsin related to their business operations, including the special and/or outdoor events listed on this application. The applicant further agrees to cooperate with city staff to address any unforeseen issues that may arise as a result of the event and activities for which this permit was issued.

Signature of Applicant <i>Alice Mamei</i>	Date <i>5-5-26</i>
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FOR CITY STAFF USE OFFICE USE ONLY

Application forwarded to and approved by (provide comments if necessary):

Public Works: *[Signature]*

Fire Department: *[Signature]*

Police Department: *[Signature]*

Kiel Utilities: *[Signature]*

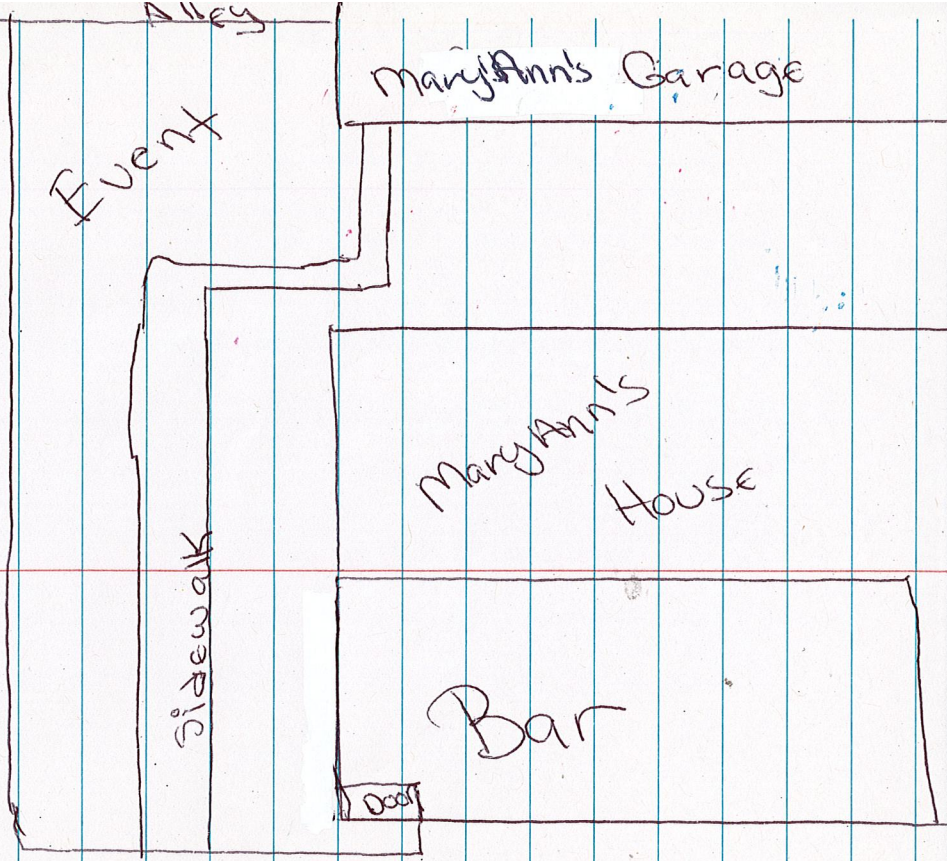
City Administrator: *[Signature]*

COUNCIL ACTION AND REQUIREMENTS

Date Reviewed By City Council: _____ Approved By City Council: YES NO

ADDITIONAL INFORMATION / REQUIREMENTS / DIRECTIVES FROM CITY COUNCIL

DATE APPLICANT NOTIFIED: _____ BY: _____ (NAME) _____ (TITLE)



Event

MaryAnn's Garage

MaryAnn's House

Bar

sidewalk

Main Street

Door



CITY OF KIEL

621 Sixth Street
P.O. Box 98
Kiel, WI 53042

Katrina Weir, City Clerk-Treasurer

Phone (920) 894-2909 Email: katrina.weir@kielwi.gov

SPECIAL EVENT PERMIT APPLICATION

Application must be filed a minimum of 45 days prior to the special event.

ORGANIZATION INFORMATION			
NAME OF ORGANIZATION O'Reilly Auto Parts Store			
MAILING ADDRESS 1211 State Hwy 67	CITY Kiel	STATE Wi	ZIP 53042
PHONE NUMBER 920-797-4015	WEBSITE ADDRESS		
EVENT CONTACT PERSON Mitchell Kinas			
MAILING ADDRESS 3732 Elevator Rd	CITY Reedsville	STATE WI	ZIP 54230
HOME PHONE —	WORK PHONE 920-797-4015	CELL PHONE 920-254-5625	
EMAIL ADDRESS MGR6555@oreillyauto.com			

EVENT INFORMATION	
NAME OF THE EVENT O'Reilly Auto Car Show	DATE(S) OF THE EVENT Aug 8 th / 9 th 2026
EVENT START TIME 10 am	EVENT END TIME 4 pm
LOCATION OF THE EVENT O'Reilly Auto Kiel wi: 1211 State Hwy 67 Kiel wi 53042	
<p>A. A detailed map/sketch of your event indicating the specific location and the layout of your event, and the direction of the route, including all turns and the number of traffic lanes to be used must be included or your application will not be accepted.</p>	
<p>B. Generally describe your event and its purpose. Car Show for Car, Truck and motorcycles and Brat fry to help promote the business + the city of Kiel</p>	
<p>C. Estimated number of participants 100+ cars, Truck and motorcycles in hopes</p>	

OTHER INFORMATION

A. Is there an outdoor bar that will serve alcohol? <i>If yes, temporary Class B beer and/or wine (picnic) and operator (bartender) licenses are necessary under separate application.</i>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Please list the number of City of Kiel licensed bartenders that will be on site: <i>None</i>	
B. Does your event involve amplified music?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
If yes, will the amplified music be a:	<input type="checkbox"/> Band <input checked="" type="checkbox"/> DJ <input type="checkbox"/> Other
Hours when amplified music will be played: <i>10am - 4pm</i>	
C. Will you need barricades provided by the City of Kiel for your event?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
If yes, how many?	
D. What other assistance do you foresee needing from the City of Kiel (personnel, materials, equipment, etc.)?	
<i>Not Sure may need traffic directing.</i>	
E. Have you reviewed a copy of the City of Kiel Ordinance on special events and do you understand that you may be charged for City Services?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

PERMIT FEE

For a non-profit organization, there is no charge, for a for-profit organization, the fee is \$100.

Non-profit/civic organization - \$0

For-profit organization - \$100

Total \$ _____

DEPOSIT REQUIREMENTS

The applicant may be required to submit to the City Clerk-Treasurer's Office a cleaning/damage deposit of \$200 for each scheduled day of the event (or portion thereof) two weeks prior to the starting date of the event. That deposit shall be refunded to the applicant, if, upon inspection, all is in order, or a prorated portion thereof as may be necessary to reimburse the City for loss or cleaning costs. The City reserves the right to retain the entire deposit if cleanup is not completed satisfactorily in the time frame as specified in the permit. Unless otherwise stated in the permit, the applicant shall be fully responsible for all necessary cleanup associated with the permitted event to be completed within 24 hours after the conclusion of the event.

By signing this form, the applicant certifies authorization to act on behalf of their organization, and hereby agrees to hold the City of Kiel its officers, agents, employees, and contractors harmless against all claims, liability, loss, damage or expense (including but not limited to actual attorney fees) incurred by the City for any damage or injury to person or property caused by or resulting directly or indirectly from the activities for which the permit is granted.

Signature of Applicant <i>Mitchell Kinas</i>	Date <i>4-27-26</i>
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Emergency Revocation and Termination of Special Events:

By signing this document, applicant clearly understands that a permit issued may be immediately terminated and revoked including while an event is in progress if the Police Chief, and/or Fire Chief or their designees determine that the activities for which the permit was issued:

- endangers the health, safety or general welfare of the public
- violates conditions which formed the basis of issuing the permit;
- violates city ordinances, WI state laws, or other unforeseen emergency or catastrophe concerns due to weather, fire, riot, or other public safety hazard.

By signing this form, the applicant certifies authorization to act on behalf of their business/organization, and hereby agrees to abide by all ordinances of the City of Kiel and laws of the State of Wisconsin related to their business operations, including the special and/or outdoor events listed on this application. The applicant further agrees to cooperate with city staff to address any unforeseen issues that may arise as a result of the event and activities for which this permit was issued.

Signature of Applicant	Date
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FOR CITY STAFF USE OFFICE USE ONLY

Application forwarded to and approved by (provide comments if necessary):

Public Works: *[Signature]*

Fire Department: *[Signature]*

Police Department: *[Signature]*

Kiel Utilities: *[Signature]*

City Administrator: *[Signature]*

COUNCIL ACTION AND REQUIREMENTS

Date Reviewed By City Council: _____ Approved By City Council: YES NO

ADDITIONAL INFORMATION / REQUIREMENTS / DIRECTIVES FROM CITY COUNCIL

DATE APPLICANT NOTIFIED: _____ BY: _____ (NAME) _____ (TITLE)

Hwy 67

Round about

Endries

Box
Fly

20-25-200
100-100



Car
Parking
for
Show

Motorcycle
Parking
for Show

O'Reilly
Store



Gas
Station

Show cars to come in here

Piggley
Wissler



CITY OF KIEL

621 Sixth Street / P.O. Box 98
 Kiel, WI 53042
 Phone (920) 894-2909

SPECIAL EVENT / OUTDOOR EVENT PERMIT APPLICATION

ORGANIZATION INFORMATION			
NAME OF BUSINESS Stacy's Rustic Treasures LLC			
MAILING ADDRESS 13426 Meggers Rd #	CITY Kiel	STATE WI	ZIP 53042
PHONE NUMBER (920) 838-1535	WEBSITE ADDRESS N/A		
CONTACT PERSON Stacy Senkbeil			
MAILING ADDRESS 13426 Meggers Rd	CITY Kiel	STATE WI	ZIP 53042
HOME PHONE NA	WORK PHONE NA	CELL PHONE (920) 838-1535	
EMAIL ADDRESS Stasenkbeil@gmail.com			

Application must be filed with city staff a minimum of 45 days prior to the special event.

VENUE INFORMATION	
NAME OF THE EVENT Kiel Kraftacular	DATE(S) OF THE EVENT Setup Fri Aug 14 + Event Sat Aug 15
EVENT START TIME(S) Sat Aug 15 2026 10 Am	EVENT END TIME(S) Sat Aug 15 2026 3pm
LOCATION OF THE EVENT Kiel City Park	
A. Please attach a detailed map/sketch of your outdoor event indicating the specific location and layout of your event.	
B. Generally, describe your event and its purpose. Please attach additional sheets or use "Additional Notes and Information" on next page if more room is needed. <u>Craft Fair with Food trucks</u>	
C. Estimated number of participants: <u>200 people Approx</u> *Must not exceed fire and building code limits	
D. Does the event's location border residential property? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, est. distance to nearest property? _____	
E. What zoning is the event location located in? _____ *Contact City Hall staff if information is not known	
F. Is there a plan for post-event clean up of litter and debris? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
G. Are there designated entry and exit points including emergency exits? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If yes, show on diagram	
H. Does your business/organization have liability insurance for this event/activity? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
I. Is outdoor lighting appropriately shielded to prevent distractions to nearby traffic and properties? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
J. Is there adequate parking onsite or available nearby for attendees to legally park vehicles? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

OTHER INFORMATION

A. Do you understand that all sales of alcohol are governed by local ordinance and Wis. Ss. (Chapter 125) including need for properly licensed operators (bartenders) on premise? YES NO

Please list the number of City of Kiel licensed bartenders that will be on site: 0 No Alcohol

B. Does your event involve amplified music? YES NO / If Yes: Band DJ Other

Hours when amplified music will be played: 10 Am to 3pm *End times after 10pm require council approval

Do you agree to work cooperatively with the Kiel Police Department to resolve loud noise complaints? YES NO

CITY SERVICES

Will you need barricades provided by the City of Kiel for your event? YES NO

If yes, how many? 4 on alley of 5th Date Needed: 8/14 + 8/15 Time Needed: Fri morning

C. What other assistance do you foresee needing from the City of Kiel (personnel, materials, equipment, etc.)?

See Attachment

D. Have you reviewed a copy of the City of Kiel Ordinance # 12.061 "Special Events" and do you understand that **you may be charged for City Services**? YES NO

PERMIT FEE

For a non-profit organization, there is no charge, for a for-profit organization

Non-profit/civic organization For-profit organization

\$100.00 Date Paid: 5-1-26 / Check #: 1083

**Fee is non-refundable. If permit denied, and re-submitted, fee required for each submittal*

DEPOSIT REQUIREMENTS

For events using city buildings/properties, the applicant may be required to submit to the City Clerk-Treasurer's Office a cleaning/damage deposit of \$200 for each scheduled day of the event (or portion thereof) two weeks prior to the starting date of the event. That deposit shall be refunded to the applicant, if, upon inspection, all is in order, or a prorated portion thereof as may be necessary to reimburse the City for loss or cleaning costs. The City reserves the right to retain the entire deposit if cleanup is not completed satisfactorily in the time frame as specified in the permit. Unless otherwise stated in the permit, the applicant shall be fully responsible for all necessary cleanup associated with the permitted event to be completed within 24 hours after the conclusion of the event.

ADDITIONAL NOTES AND INFORMATION

NEEDS

lawn mowing + grooming before Friday

Blow out pavilions

Bathrooms cleaned + Stocked

4 barricades on alley where 5th St intersects

10 garbage barrels (we will haul away trash)

12 picnic tables (usually in pavilions)

No Parking signs posted by PD on 6th + Paine on Friday afternoon (we will pull + return them once the show is underway)

Emergency Revocation and Termination of Special Events:

By signing this document, applicant clearly understands that a permit issued may be immediately terminated and revoked including while an event is in progress if the Police Chief, and/or Fire Chief or their designees determine that the activities for which the permit was issued:

- endangers the health, safety or general welfare of the public
- violates conditions which formed the basis of issuing the permit;
- violates city ordinances, WI state laws, or other unforeseen emergency or catastrophe concerns due to weather, fire, riot, or other public safety hazard.

By signing this form, the applicant certifies authorization to act on behalf of their business/organization, and hereby agrees to abide by all ordinances of the City of Kiel and laws of the State of Wisconsin related to their business operations, including the special and/or outdoor events listed on this application. The applicant further agrees to cooperate with city staff to address any unforeseen issues that may arise as a result of the event and activities for which this permit was issued.

Signature of Applicant <i>Stacy M Senkebeil</i>	Date 4-17-26
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FOR CITY STAFF USE OFFICE USE ONLY

Application forwarded to and approved by (provide comments if necessary):

Public Works: *[Signature]*

Fire Department: *[Signature]*

Police Department: *[Signature]*

Kiel Utilities: *[Signature]*

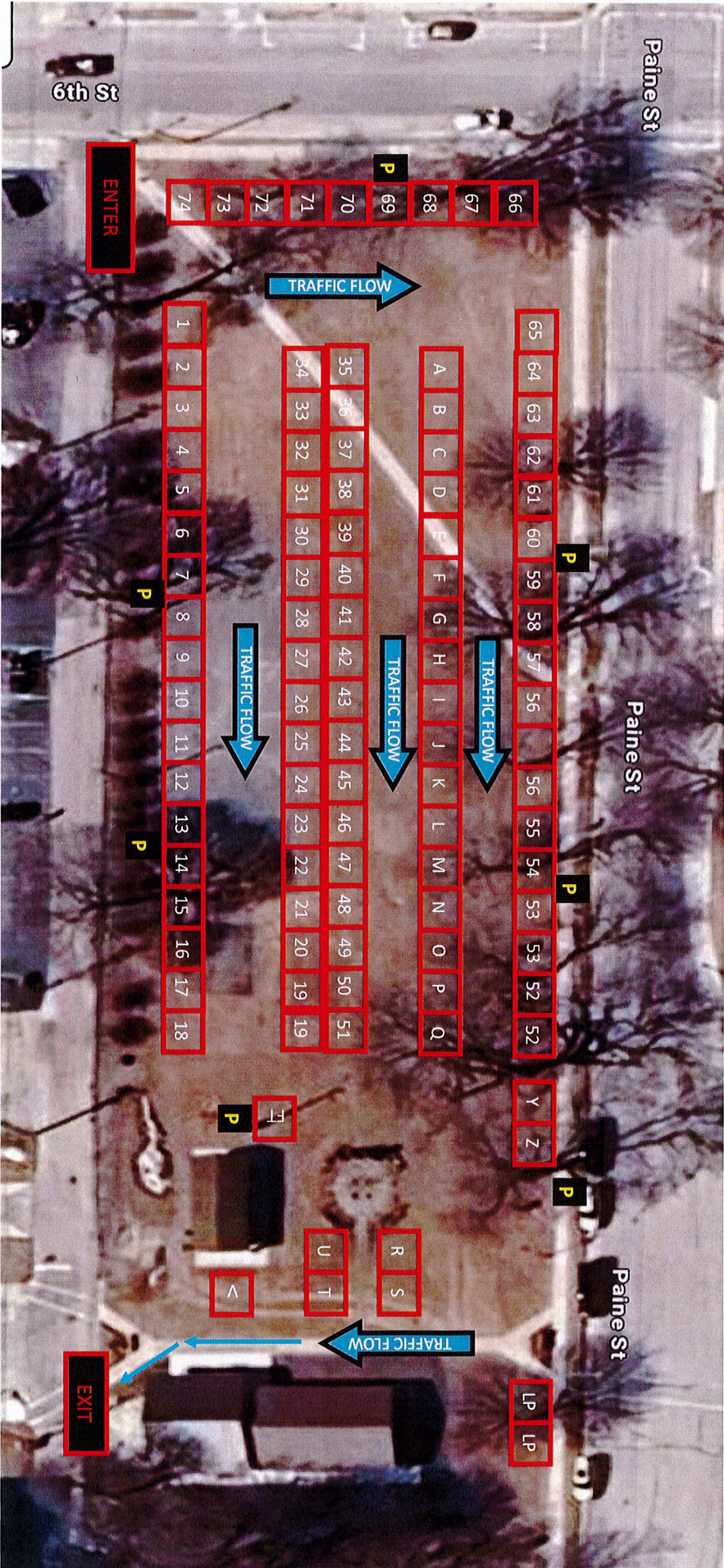
City Administrator: *[Signature]*

COUNCIL ACTION AND REQUIREMENTS

Date Reviewed By City Council: _____ Approved By City Council: YES NO

ADDITIONAL INFORMATION / REQUIREMENTS / DIRECTIVES FROM CITY COUNCIL

DATE APPLICANT NOTIFIED: _____ BY: _____ (NAME) _____ (TITLE)



Paine St

6th St

ENTER

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EXIT

Report Criteria:

Report type: Summary
 Check.Check number = {SQL} (tblCheck.CheckNumber in (SELECT c.CheckNumber
 FROM dbo.tblCheck c INNER JOIN
 dbo.tblCheckDetail cd ON c.ID = cd.tblCheckID
 GROUP BY c.CheckNumber
 HAVING (SUM(cd.Amount) >= 5000)))
 Check.Type = {<>} "Adjustment"

Vendor Number	Payee	Check Issue Date	Check Number	Amount	
2893	WI DEPT OF TRANSPORTATION	05/08/2026	23381	5,904.52	SERVICES
222	BRIARWOOD BLDG SERVICES LLC	05/08/2026	23318	6,908.50	APRIL SERVICES
2700	PROS 4 TECHNOLOGY INC	05/08/2026	23367	10,193.15	WIRING & SETUP
3005	MSA PROFESSIONAL SERVICES INC	05/08/2026	23359	17,033.44	SERVICES
500	ENERGENECS	05/08/2026	23331	21,442.62	LIFT STATION SUPPLIES
1963	WISCONSIN PUBLIC SERVICE	05/08/2026	23389	32,621.42	NATURAL GAS
3045	GFL ENVIRONMENTAL	05/08/2026	23338	36,748.23	GARBAGE CITY CONTRACT
Grand Totals:				<u>130,851.88</u>	

Report Criteria:

Report type: Summary

Check.Check Issue Date = 05/08/2026

Period	Date	Check No	Vendor No	Payee	Amount
05/26	05/08/2026	23313	3572	42ND ARTISTS ENTERTAINMENT	324.00
05/26	05/08/2026	23314	3178	ACE HARDWARE	2,289.43
05/26	05/08/2026	23315	3573	BARTLEME RICHARD	5.40
05/26	05/08/2026	23316	157	BELL TAPE INC	344.15
05/26	05/08/2026	23317	207	BORDER STATES ELECTRIC SUPPLY	610.00
05/26	05/08/2026	23318	222	BRIARWOOD BLDG SERVICES LLC	6,908.50
05/26	05/08/2026	23319	257	C & R PUMPERS INC	600.00
05/26	05/08/2026	23320	2877	CARDMEMBER SERVICE	608.02
05/26	05/08/2026	23321	598	CENGAGE LEARNING INC/GALE	226.97
05/26	05/08/2026	23322	291	CENTER POINT LARGE PRINT	204.96
05/26	05/08/2026	23323	319	CINTAS LOC 443	223.27
05/26	05/08/2026	23324	3563	COLUMN SOFTWARE PBC	152.19
05/26	05/08/2026	23325	2777	COMPLETE OFFICE OF WISCONSIN I	87.17
05/26	05/08/2026	23326	2593	CORE & MAIN LP	4,417.76
05/26	05/08/2026	23327	374	CZ AWARDS	18.95
05/26	05/08/2026	23328	403	DEMCO INC	332.24
05/26	05/08/2026	23329	415	DIAMOND BUSINESS GRAPHICS	1,017.56
05/26	05/08/2026	23330	437	DIVERSIFIED BENEFIT SERVICES I	110.00
05/26	05/08/2026	23331	500	ENERGENECS	21,442.62
05/26	05/08/2026	23332	516	ERICSEN, REBECCA	315.45
05/26	05/08/2026	23333	522	EXCEL UNDERGROUND	4,379.70
05/26	05/08/2026	23334	525	FAIR MARKET ASSESSMENTS LLC	1,185.00
05/26	05/08/2026	23335	530	FASTENAL COMPANY	17.12
05/26	05/08/2026	23336	3487	FLORIDA STATE DISBURSEMENT UNI	253.18
05/26	05/08/2026	23337	3486	FLORIDA STATE DISBURSMENT UNIT	253.18
05/26	05/08/2026	23338	3045	GFL ENVIRONMENTAL	36,748.23
05/26	05/08/2026	23339	645	GRAINGER	1,808.33
05/26	05/08/2026	23340	2904	GREAT AMERICA FINANCIAL SERVICE	70.53
05/26	05/08/2026	23341	3553	HOPP NEUMANN HUMKE LLP	1,496.00
05/26	05/08/2026	23342	2296	IMAGETREND INC	537.57
05/26	05/08/2026	23343	3530	INGRAM LIBRARY SERVICES	1,131.39
05/26	05/08/2026	23344	2813	JAMES IMAGING SYSTEMS	140.43
05/26	05/08/2026	23345	794	JEFFERSON FIRE & SAFETY	674.88
05/26	05/08/2026	23346	3001	KIEL AMOCO	200.64
05/26	05/08/2026	23347	844	KIEL AREA SCHOOLS	709.57
05/26	05/08/2026	23348	845	KIEL AUTO	60.01
05/26	05/08/2026	23349	3437	KLEINHANS, NANCY	84.83
05/26	05/08/2026	23350	926	KRUEGER LUMBER CO INC	256.00
05/26	05/08/2026	23351	2647	KWIK TRIP INC	2,475.89
05/26	05/08/2026	23352	3571	LACAL EQUIPMENT INC	199.53
05/26	05/08/2026	23353	3046	LEAVES INSPIRED TREE NURSERY LL	1,817.00
05/26	05/08/2026	23354	1044	MANITOWOC CO TREAS-COURT FINE	1,730.37
05/26	05/08/2026	23355	1060	MANITOWOC-CALUMET LIBRARY	1,946.19
05/26	05/08/2026	23356	1101	MCMASTER-CARR SUPPLY CO	444.12
05/26	05/08/2026	23357	1141	MILLER IMPLEMENT	731.60

Period	Date	Check No	Vendor No	Payee	Amount
05/26	05/08/2026	23358	1164	MONITORING SERVICES LLC	498.00
05/26	05/08/2026	23359	3005	MSA PROFESSIONAL SERVICES INC	17,033.44
05/26	05/08/2026	23360	3463	NAPA AUTO PARTS -NH	199.99
05/26	05/08/2026	23361	1210	NATIONAL ELEVATOR INSPECTION	125.00
05/26	05/08/2026	23362	1215	NCL OF WISCONSIN INC	609.60
05/26	05/08/2026	23363	1237	NEW HOLSTEIN TRUE VALUE	1,460.59
05/26	05/08/2026	23364	1254	NORTHEAST ASPHALT INC	1,774.81
05/26	05/08/2026	23365	1259	NORTHERN LAKE SERVICE INC	1,288.15
05/26	05/08/2026	23366	2830	PRIMADATA	1,384.48
05/26	05/08/2026	23367	2700	PROS 4 TECHNOLOGY INC	10,193.15
05/26	05/08/2026	23368	3545	RBRAUN INC	713.76
05/26	05/08/2026	23369	1455	RIESTERER & SCHNELL	42.25
05/26	05/08/2026	23370	1552	SCHUETTE MFG & STEEL SALES	190.48
05/26	05/08/2026	23371	1569	SEERA	3,279.52
05/26	05/08/2026	23372	1630	STATE OF WISCONSIN COURT FINES	4,403.53
05/26	05/08/2026	23373	1666	SUPERIOR CHEMICAL CORP	2,164.47
05/26	05/08/2026	23374	3527	TIETZ'S PIGGLY WIGGLY- FIRE ACCO	277.83
05/26	05/08/2026	23375	3427	TIETZ'S PIGGLY WIGGLY-CITY ACCOU	55.33
05/26	05/08/2026	23376	1739	U.S. CELLULAR	207.07
05/26	05/08/2026	23377	3550	UNEMPLOYMENT INSURANCE UI LEV	225.00
05/26	05/08/2026	23378	3536	UNEMPLOYMENT INSURANCE - UI LE	225.00
05/26	05/08/2026	23379	1769	USA BLUE BOOK	147.95
05/26	05/08/2026	23380	1871	WEBER OIL CO	4,389.77
05/26	05/08/2026	23381	2893	WI DEPT OF TRANSPORTATION	5,904.52
05/26	05/08/2026	23382	1905	WI SCTF A	186.33
05/26	05/08/2026	23383	3358	WI SCTF B	186.33
05/26	05/08/2026	23384	3359	WI SCTF C	238.69
05/26	05/08/2026	23385	3360	WI SCTF D	238.69
05/26	05/08/2026	23386	3453	WI SCTF E	229.00
05/26	05/08/2026	23387	3454	WI SCTF F	114.50
05/26	05/08/2026	23388	1961	WISCONSIN PROFESSIONAL POLICE	318.00
05/26	05/08/2026	23389	1963	WISCONSIN PUBLIC SERVICE	32,621.42
05/26	05/08/2026	23390	3382	WITKOWSKI INSPECTION AGENCY LL	1,880.00
05/26	05/08/2026	23391	3387	ZIPPERER, SETH	223.15
Grand Totals:					192,619.73

Report Criteria:

Report type: Summary

Check.Check Issue Date = 05/08/2026