



# TOWN OF TRURO

P.O. Box 2030, Truro, MA 02666

Tel: 508-349-7004, Extension: 110 or 124 Fax: 508-349-5505

## CORPORATE VOTE

The Board of Directors or LLC Managers of \_\_\_\_\_ duly voted to apply to the Licensing Authority of \_\_\_\_\_ and the Commonwealth of Massachusetts Alcoholic Beverages Control Commission of \_\_\_\_\_.

Voted : To Authorize : \_\_\_\_\_

To sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted.

Voted to Appoint: \_\_\_\_\_

As its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of conduct of all business therein as the licensee itself could in any way have exercise if it were a natural person residing in the Commonwealth of Massachusetts.

A true copy attest,

For Corporations only

A true copy attest,

\_\_\_\_\_

Corporate Officer/LLC Manager Signature

\_\_\_\_\_

Corporate Clerk's Signature

\_\_\_\_\_

Print Name

\_\_\_\_\_

Print Name