



This Partnership form should be completed for original applications or for changes of partnerships, limited partnerships, limited liability partnerships, and joint ventures holding ownership in this business..
For more information contact your local TABC office or visit us at: www.tabc.texas.gov

ENTITY INFORMATION

1. Federal Employer Identification Number (FEIN)	
2. Business Entity Name	
3. Filing Number	
4. Date Filed (mm/dd/yyyy)	State

CORPORATE OWNERSHIP INFORMATION

<input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner			
Last Name	First Name	MI	Title
SSN <input type="checkbox"/> Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership or Units Held	
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CORPORATE OWNERSHIP INFORMATION *CONTINUED*

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IF YOU NEED MORE SPACE USE ADDITIONAL COPIES OF THIS PAGE