



CITY OF SAINT PAUL  
Christopher B. Coleman, Mayor

375 Jackson Street, Suite 220  
St Paul, Minnesota 55101-1806

Telephone: 651-266-8989  
Facsimile: 651-266-9124  
Web: [www.stpaul.gov/dsi](http://www.stpaul.gov/dsi)

March 5, 2012

Coale's Bar & Grill  
Contact: Paula A. Coale  
719 Dale Street North  
St. Paul, MN 55103

RE: Liquor on Sale – 101-180 Seats (Second Half) License

Dear Paula A. Coale:

Our records indicate that your account is past due. Please note that **your total bill is now \$ 3,539.00** including late fees. This payment must be received in this office by March 26, 2012 or we will submit your unpaid account to the City Attorney's office for adverse action against your license.

**Please submit all information requested on the bottom of the invoice at the time of payment.**

For your convenience, a copy of the invoice and a return envelope is enclosed. If you are no longer working within the City of Saint Paul please advise our office of that information in writing.

If you have questions regarding this notice, please contact our office between the hours of 8:00 a.m. to 4:30 p.m. at 651-266-8989.

Sincerely,

*Maxine Linston*  
Office Assistant



# Renewal Invoice

**CITY OF SAINT PAUL**

Check this box if making any name, mailing address or phone # corrections. Please write the changes on this form. If your business license address is changing, please request a new business license application

Department of Safety and Inspections  
 375 Jackson Street, Suite 220  
 Saint Paul, MN 55101-1806  
 PHONE: (651) 266-8989  
 FAX: (651) 266-9124  
 An Equal Opportunity Employer

March 5, 2012

COALE INC  
 COALE'S BAR & GRILL  
 CONTACT: PAULA A COALE  
 719 DALE ST N  
 ST PAUL MN 55103

**Invoice # : 799092**

Invoice Due Date : Upon Receipt

Account Balance: \$3,539.00

**Pay this Amount: \$3,539.00**

HOME PHONE: 651-426-6785 BUSINESS PHONE: 651-487-5829

| Transaction Description  | Transaction Total |
|--|-------------------|
| Inv: 773268 10003019 Liquor On Sale - 101-180 Seats (Second Half)<br>@ 719 DALE ST N | 2,527.00          |
| Inv: 779228 Late Fee 7-30 days late (10%)  | 253.00            |
| Inv: 783073 Late Fee 31-60 days late (10%)   | 253.00            |
| Inv: 793023 Late Fee 61-90 days late (10%)   | 253.00            |
| Late Fee 91-120 days late (10%)  | 253.00            |

|              |                                       |
|--------------|---------------------------------------|
| Requirements | <b>Invoice Amount Due: \$3,539.00</b> |
|--------------|---------------------------------------|

Your account is overdue. Please mail payment today!!  
 Please complete the following information for your First Half renewal (disregard if invoice is for the 2nd half payment):  
 Company & DBA Names (if different than above): \_\_\_\_\_  
 Business Phone #s (include fax, cell, & pager if applicable): \_\_\_\_\_  
 Applicant Name, Date of Birth, Home Address, & Phone #'s: \_\_\_\_\_  
 Manager Name, Date of Birth, Address & Phone #'s: \_\_\_\_\_  
 Liquor is served in the following rooms: \_\_\_\_\_  
 Signature & Title of Applicant: \_\_\_\_\_

Submit with First Half payment only:  
 \*State renewal certificate  
 \*Proof of current liquor liability insurance (expiration must coincide with your license expiration date)

Please Give Us Your Email Address: \_\_\_\_\_

Please Return this invoice with your payment!