

**SPOUSAL AFFIDAVIT OF  
NON PARTICIPATION INSERT**

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

Office Use

I acknowledge that I am the spouse of a liquor license holder. My signature below confirms that I will not have any interest, directly or indirectly in the operation of the business (§53-125(13)) of the Liquor Control Act. I will not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent myself as the owner or **in any way participate in the day to day operations of this business in any capacity.** The penalty guideline for violation of this affidavit is cancellation of the liquor license.

I acknowledge that I am the applicant of the non-participating spouse of the individual signing below. I understand that my spouse and I are responsible for compliance with the conditions set out above. If, it is determined that my spouse has violated (§53-125(13)) the commission may cancel or revoke the liquor license.

Jill K. Staab  
Signature of **NON-PARTICIPATING SPOUSE**  
Jill K Staab  
Print Name

David W. Staab  
Signature of **APPLICANT**  
David W. Staab  
Print Name

State of Nebraska, County of Hall

State of Nebraska, County of Hall

The foregoing instrument was acknowledged before me  
this 2-25-2026 (date)

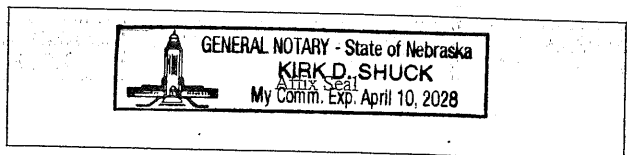
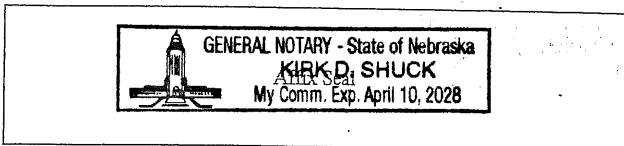
The foregoing instrument was acknowledged before me  
this 2-25-2026 (date)

by Jill K Staab  
Name of person acknowledged  
(Individual signing document)

by David W. Staab  
Name of person acknowledged  
(Individual signing document)

Kirk D. Shuck  
Notary Public Signature

Kirk D. Shuck  
Notary Public Signature



In compliance with the ADA, this spousal affidavit of non participation is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.