WISCONSIN DEPARTMENT OF REGULATION & LICENSING



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Wisconsin I partment of Regulati & Licensing

Mail To: P.O. Box 8935

Madison, WI 53708-8935

FAX #: Phone #: (608) 266-2264 (**608**) **266-2112**

1400 E. Washington Avenue

Madison, WI 53703

E-Mail: web@drl.state.wi.us Website: http://drl.wi.gov

BARBERING AND COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

□ CITATION DOE CASE FILE # <u>○ 8 BA C ○ 3</u>	Final decision and order Ls # 08040131BAC					
Individual Credential Holder Name License # James & 1-22971	OR					
4301 W. Bradley	Rd. Brown Deeve 53223 City Zip					
Wednesday Day of Week	Date Spin					
On the above stated time, date and location, an investigation/inspection has disclosed the following violation.						
The Unlocked C.	upboard in public					
bathroom Contains "Clorox Toilet Rowle	Poisonous Substances. Leaner W/Bleach, "Comet					
Cleanser", and "meter	Mist"					
In violation of Section BC 3.01 (6)	of Wis. Stats. OR Wis. Adm. Code					
Signature of Investigative Staff	Investigator 3-5-08 Title Date					
Signature of Licensee OR	Establishment Owner Date					
Pursuant to Wis. Stat. § 454.15(3), the licensing authority is authorized to impose a forfeiture in lieu of or in addition to other disciplinary action against your license.						
AMOUNT OF \$ \(\frac{3}{2}\), \(\circ\) BY MAILING A CHE FROM THE DATE OF THIS CITATION, TOGETHER W REGULATION AND LICENSING, DIVISION OF ENFO MADISON, WI 53708. PAYMENT SHALL BE TREAT	HOLDER MAY DEPOSIT A FORFEITURE AND COSTS IN THE ECK OR MONEY ORDER NO LATER THAN TWENTY (20) DAYS WITH THE SIGNED COPY OF THIS FORM TO: DEPARTMENT OF THE VIOLATION CITED TURE PLUS COSTS, NOT TO EXCEED THE AMOUNT OF THE					

Please reference "NOTICE OF RIGHT TO CONTEST" on backside of pink copy.

#2683 (8/04) Ch. 454, Stats. Slevenie M Bush Licensing

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Wisconsin Department of Regulation & Licensing

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BARBERING AND COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

☐ CITATION DOE CASE FILE	# <u>088A</u>	1032	FINAL DEC	CISION AND C	ORDER 3AC
Individual Cree License # _ &	eSMatuseY dential Holder Name 1-22971	OR	Establishme License #	ent Name	
A301 Street	W. Bradley	Rd.	Brown De	er	Zip
Day of Week	sday		Date Date		3105pM Time
On the above stated Disinf Employ Once With	time, date and location, a rectant n	\ .	spection has disclosed	the following vi anged 5 Cho heavil	iolation. daily. anged y Contamina
In violation of Signature of Invest	Section BC 4.02	(5) of Iv	Wis. Stats. Vestigato Title	OR Z	Wis. Adm. Code 3-5-08 Date
Signature of	Licensee	OR	Establishment O	wner	Date
	Stat. § 454.15(3), the lice listing states against the lice in the lice is a state of the lice is stated as a state of the lice is a stat		is authorized to im	ipose a forfeiti	ure in lieu of or in
	TICE THAT THE CREDI				

Please reference "NOTICE OF RIGHT TO CONTEST" on backside of pink copy.

FROM THE DATE OF THIS CITATION, TOGETHER WITH THE SIGNED COPY OF THIS FORM TO: DEPARTMENT OF REGULATION AND LICENSING, DIVISION OF ENFORCEMENT, 1400 EAST WASHINGTON AVENUE, P.O. BOX 8935, MADISON, WI 53708. PAYMENT SHALL BE TREATED AS A PLEA OF NO CONTEST TO THE VIOLATION CITED ABOVE AND CONSENT TO AN ORDER OF FORFEITURE PLUS COSTS, NOT TO EXCEED THE AMOUNT OF THE

#2683 (8/04) Ch. 454, Stats.

DEPOSIT.

Jerni MBuse 4-7-08