WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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There may be discrepancies between the online copies and the original document. Original documents should be consulted as the definitive representation of the order's content. Copies of original orders may be obtained by mailing requests to the Department of Safety and Professional Services, PO Box 8935, Madison, WI 53708-8935. The Department charges copying fees. All requests must cite the case number, the date of the order, and respondent's name as it appears on the order.

Reported decisions may have an appeal pending, and discipline may be stayed during the appeal. Information about the current status of a credential issued by the Department of Safety and

Professional Services is shown on the Department's Web Site under "License Lookup."

The status of an appeal may be found on court access websites at:

http://ccap.courts.state.wi.us/InternetCourtAccess and http://www.courts.state.wi.us/wscca.

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Correcting information on the DSPS website: An individual who believes that information on the website is inaccurate may contact the webmaster at web@drl.state.wi.gov

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STATE OF WISCONSIN

Department of Safety and Professional Services 1400 E Washington Ave. Madison WI 53703

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Secretary Dave Ross Governor Scott Walker

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September 29, 2011

KELLY J WERBELOW 696 KOHLER RD WEST BEND WI 53090

ORDER 0001267

Re: Case number 11 BAC 143/Kelly J. Werbelow #81 31450 (Manager license)

ADDENDUM TO CITATION FOR ADMINISTRATIVE FORFEITURE -PAYMENT PLAN

Dear Ms. Werbelow:

You have received one or more citations for violations of the Barbering & Cosmetology rules and have requested the opportunity to enter into a payment agreement to resolve those citations. By returning an original signed copy of this letter along with partial payment, you accept the forfeitures imposed on the citations you received and agree to pay the forfeiture amounts in full. To enter into this agreement and to accept the payment plan below:

- You must sign and date this document below and return the original to Michelle Krisher at the address listed above.
- You must also include a partial payment of \$150 when returning this document.
- You must return a copy of the citation(s) with this document.
- Subsequent payments of \$150 are due every 60 days following the date of the previous payment due date until the full amount has been paid and must be sent by addressing to Department Monitor at the address above.
- You agree that if you fail to timely submit payment of the forfeiture as set forth above, your license may, in the discretion of the board or its designee, be SUSPENDED, without further notice or hearing, until you have complied with payment of the forfeiture.

I hereby accept the forfeitures imposed by the attached citations and the terms set forth above.

Werklou

Signature of Licensee or Establishment Owner

So Ordered:

A Member of the Barbering and Cosmetology **Examining Board**

10 - 4 - 11 Date