

WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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- 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/wsccl>.
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STATE OF WISCONSIN

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

Governor Scott Walker

Secretary Dave Ross

Mail to
PO Box 893
Madison WI 53708-893

Email: dsps@wisconsin.gov
Web: <http://dsps.wi.gov>

Voice: 608-266-2112 • FAX: 608-266-2264 • TTY: 608-267-2416

March 29, 2012

Via electronic transmission only to:
Mendozatuck@msn.com

XPRESSIONS
ATTN LINA PETERSON
102 NORTH IOWA STREET
DODGEVILLE WI 53533

ORDER 0001554

Re: Case number 11 BAC 170

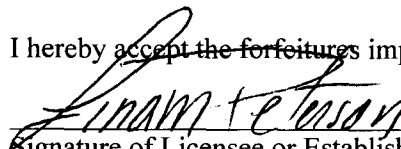
**ADDENDUM TO CITATION FOR ADMINISTRATIVE FORFEITURE -
PAYMENT PLAN**

Dear Ms. Peterson:

Attached is a citation for a violation of the Barbering & Cosmetology rules regarding my visit to Xpressions on Thursday, March 8, 2012, regarding the complaint that the Department received against you. As you recall, I advised you that a citation would be issued because you were operating the salon without a current establishment permit. At that time you requested an opportunity to enter into a payment agreement to resolve the citation and I told you I would send some information to you about a payment plan. By returning an original signed copy of this letter along with partial payment and a copy of the citation attached, you accept the forfeiture imposed on the citation you received and you agree to pay the forfeiture amount 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 Willie E. Garrette at the address listed above by April 6, 2012.
- You must also include a partial payment of 25% (\$250.00) of the total amount due on the citation when returning this document.
- You must return a copy of the citation with this document.
- ***Subsequent payments of 25% (\$250.00) of the total amount are due every 60 days following the date of the previous payment due date until the full amount is paid and must be sent to the Department Monitor at the address above with a copy of the citation.***
- 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.

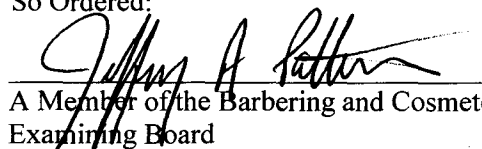


Signature of Licensee or Establishment Owner

4/1/12

Date

So Ordered:



A Member of the Barbering and Cosmetology
Examining Board

6-11-12

Date

Wisconsin Department of Regulation & Licensing

Mail To: P.O. Box 8935
Madison, WI 53708-8935

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

Partial
payment
received in
04/06/2012
wg

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>11 BAC 170</u> <u>Lina M. Peterson</u> <input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>32639-81</u>	OR	<input type="checkbox"/> FINAL DECISION AND ORDER LS # <u>ORDER 0001554</u> <u>XPRESSIONS</u> <input type="checkbox"/> Establishment Name License # <u>37030-80 37030-80</u>
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102 N. Iowa Street, Dodgeville, WI 53533
Street City Zip
Thursday, March 8, 2012 11:25 AM
Day of Week Date Time

On the above stated time, date and location, an investigation/inspection has disclosed the following violation.

That the establishment permit for
Xpression is expired and has been so
since 03/31/2011.

In violation of Section BC 2.045 of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
Willie E. Garrett CPI 03/08/2012
Signature of Investigative Staff Title Date
[Signature] ☒ Licensee OR ☐ Establishment Owner 03/08/2012
Signature of 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.

PLEASE TAKE NOTICE THAT THE CREDENTIAL HOLDER MAY DEPOSIT A FORFEITURE IN THE AMOUNT OF \$ 1,000.00 BY MAILING A CHECK OR MONEY ORDER NO LATER THAN TWENTY (20) DAYS 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, NOT TO EXCEED THE AMOUNT OF THE DEPOSIT.

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

Jeffrey A. Rath 6-11-12