

## WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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#### Please read this agreement prior to viewing the Decision:

- The Reports of Decisions is designed to contain copies of all orders issued by credentialing authorities within the Department of Safety and Professional Services from November, 1998 to the present. In addition, many but not all orders for the time period between 1977 and November, 1998 are posted. Not all orders issued by a credentialing authority constitute a formal disciplinary action.
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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>

- Records not open to public inspection by statute are not contained on this website.

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**Correcting information on the DSPS website:** An individual who believes that information on the website is inaccurate may contact [DSPS@wisconsin.gov](mailto:DSPS@wisconsin.gov)



# 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](mailto:dsps@wisconsin.gov)  
Web: <http://dsps.wi.gov>

May 1, 2013

OASIS SALON & SPA  
ATTN DAWN R JEANSON  
620 CHURCH STREET  
WATERTOWN WI 53094

**ORDER 0002459**

**Re: Case Number 12 BAC 108**

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

Dear Ms. Jeanson:

Enclosed please find one Citation, an Addendum for a Citation Payment Plan and a letter explaining the reason for the issuance of the Citation. By returning the original signed copy of this letter along with a partial payment and a copy of the Citation I previously issued, you accept the forfeiture imposed on the Citation 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 Addendum below and return the original to Willie E. Garrette by May 22, 2013.
- 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.
- Three 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 of \$1,000.00 is paid in full. Each subsequent payment must be sent with a copy of the Citation and this document to: Department of Safety and Professional Services, Division of Legal Services and Compliance, ATTN Candace Bloedow, Department Monitor, PO Box 8935, Madison, WI 53708-8935.
- 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]*  
Signature of Licensee or Establishment Owner

*x 5/21/13*  
Date

So Ordered:

*[Signature]*  
A Member of the Cosmetology Examining Board

*6-24-13*  
Date

*1st print.*

# 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

1st pmnt  
rec'd.  
WEG 05/3/13

## BARBERING AND COSMETOLOGY EXAMINING BOARD

### CITATION FOR ADMINISTRATIVE FORFEITURE

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>12 BAC 108</u>	<input type="checkbox"/> FINAL DECISION AND ORDER LS # <u>ORDER 0002459</u>
<u>Dawn R. Jeanson</u> <input type="checkbox"/> Individual Credential Holder Name License # <u>23221-81</u>	<u>Oasis Salon &amp; Spa</u> <input checked="" type="checkbox"/> Establishment Name License # <u>39979-80</u>

620 South Church Street, Watertown 53094  
Street City Zip  
Thursday 03/21/2013 Approx 10:08 AM  
Day of Week Date Time

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

Amber N. Weisser, an unlicensed person was  
observed providing cosmetology services to  
a patron.

In violation of Section BC 2.04 (1) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code  
Mike E. Garrelle Investigator 04/04/2013  
Signature of Investigative Staff Title Date  
x Dawn R. Jeanson ☒ Licensee OR ☒ Establishment Owner x 5/21/13  
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 \$ 1000.00 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.