WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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STATE OF WISCONSIN

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5/21/2013

CATHLEEN BARBER 712 MARINETTE AVE MARINETTE WI 54143

ORDER 0002482.

Re: Case number 13BAC005

ADDENDUM TO CITATION FOR ADMINISTRATIVE FORFEITURE PAYMENT PLAN

Dear Ms. Barber:

1

You have received two 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 Investigator Douglas Austin at the address listed above.
- You must also include a partial payment of 25% (\$275) of the total amount due on the citations when returning this document.
- You must return a copy of the citation(s) with this document.
- Subsequent payments of 25% of the total amount 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 to the Department Monitor at the address above. In order to assure each payment is credited properly all payments must reference the case number (listed 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.

Signature of Licensee or Establishment Owner	6 - 4 - 13 Date	_
		_
So Ordered:		
Gerri Renter	4/22/14	
A Member of the Barbering and Cosmetology	Date'	
Examining Board		