

WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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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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Wisconsin Department of Safety and Professional Services

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COSMETOLOGY EXAMINING BOARD

00037 54

CITATION FOR ADMINISTRATIVE FORFEITURE

pd. RRD 128/15

DLSC CASE FILE # <u>13 BAC 127</u>	FINAL DECISION AND ORDER
<u>Lora J. Howard</u>	ORDER # <u>Lora's Divine Hair Appointments</u>
☒ Individual Credential Holder Name	☒ Establishment Name
License # <u>28147-81</u>	License # <u>33545-80</u>

227 N. Teutonia Ave. Milwaukee, WI 53209
Street City Zip
Wednesday 4/24/2013 10:15 a.m.
Day of Week Date Time

On the above stated time, date and location, an investigation/inspection has disclosed the following violation^s which ~~must~~ ^{were} be corrected.

Respondent Howard disclosed in a phone call to DSPS that she participated in the unlicensed practice of cosmetology during 4/1/2013 thru 4/24/2013, when her cosmetology manager license was expired. Ms. Howard practiced cosmetology outside of a licensed establishment by doing services in her salon from 4/1/2011 thru 4/24/2013 when the establishment license was expired. Lora's Divine Hair Appointments salon participated in the unlicensed practice of cosmetology from 4/1/2011 thru 4/24/2013, and Ms. Howard assisted in the salon's unlicensed practice.

In violation of Sections Cos 2.04(1) + 2.045(1) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code

Ralph Draeger Consumer Protection Investigator 1-8-2015
Signature of Division Investigative Staff Title Date
Lora Howard and 1/24/15
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.

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 SAFETY & PROFESSIONAL SERVICES, DIVISION OF LEGAL SERVICES & COMPLIANCE, 1400 E. WASHINGTON AVENUE, PO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION IS ISSUED TO BOTH AN INDIVIDUAL CREDENTIAL HOLDER AND AN ESTABLISHMENT, ONE HALF OF THE FORFEITURE IS DEEMED TO BE ASSESSED AGAINST EACH CREDENTIAL. 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.

[Signature]
A Member of the Board

2/18/15
Date

#3053DLSC (11/14)
Ch.454, Stats.

Committed to Equal Opportunity in Employment and Licensing