WISCONSIN STATE LEGISLATURE COMMITTEE HEARING RECORDS

1997-98

(session year)

Senate

(Assembly, Senate or Joint)

Committee on Education (SC-Ed)

COMMITTEE NOTICES ... Committee Hearings ... CH (Public Hearing Announcements) Committee Reports ... CR Executive Sessions ... ES Record of Comm. Proceedings ... RCP INFORMATION COLLECTED BY COMMITTEE CLERK FOR AND AGAINST PROPOSAL Appointments ... Appt > 97hr_SC-Ed_Appt_Caulkins_pt01 Name: Jenna Caulkins Clearinghouse Rules ... CRule Hearing Records ... HR (bills and resolutions)

Miscellaneous ... Misc

Committee Clark

CALVIN J. POTTER State Senator



Wisconsin State Senate

MEMO

TO:

Education Committee Members

FROM:

Cal Potter

RE:

Hearing August 27, 9:30 a.m.

DATE:

August 20, 1997

Here is some material for our hearing next week, including background information on two appointees, Toby Marcovich and Jenna Caulkins. I'm planning to take executive action immediately after the public testimony so please try to be there promptly at 9:30.

Also, please bring your copy of CHR 97-081 which was distributed prior to August 13 hearing. If you need another copy contact Committee Clerk Paul Rusk.

This will be a relatively long hearing with the bills heard in the order listed on the hearing notice. We will work through the lunch hour.

PLEASE REMEMBER THAT OUR SEPTEMBER HEARING WILL BE HELD SEPTEMBER 10 AT UW-MILWAUKEE.

As always, please let us know if you have questions or need assistance.



STATE OF WISCONSIN \ ETHICS BOARD

James R. Morgan
Chairman
Paul M. Holzem
David L. McRoberts
Robert G. Borgwardt
Joanne R. Orr
Dorothy C. Johnson

On the capitol square at: 44 EAST MIFFLIN STREET MADISON, WISCONSIN 53703-2800

phone: 608 266-8123

fax: 608 264-9309 -mail: ethics@mail.state.wi.us

R. Roth Judd

Executive Director

NOMINEE:

Jenna H. Caulkins

POSITION:

Member, Wisconsin Technical College System Board

(Student Representative)

STATUTORY REFERENCE:

15.94 Technical college system board; creation.

* * The board shall be composed of:

(1m) The state superintendent of public instruction or the superintendent's designee.

(2) The secretary of workforce development or the secretary's designee.

(2m) The president, or by his or her designation another member, of the board of regents of the university of Wisconsin system.

(3) One employer of labor, one employe who does not have employing or discharging power, one person whose principal occupation is farming and who is actually engaged in the operation of farms and 6 additional members appointed for 6-year terms.

(4) One student enrolled at least half-time and in good academic standing at a technical college who is at least 18 years old and a resident of this state, for a 2-year term. The governor may not appoint a student member from the same technical college in any 2 consecutive terms. If the student member loses the status upon which the appointment was based, he or she shall cease to be a member of the board.

8/25/97 (2)

SENATE COMMITTEE ON EDUCATION: Senators Potter, (Chair), Jauch, Shibilski, Grobschmidt, Darling, Huelsman and Roessler.

WI ETHICS BOARD

Mail or Fax to:

Wisconsin Ethics Board 44 E. Mifflin St., Suite 601 Madison, WI 53703-2800 Fax: (608) 284 9309



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Information must be current as of this Appointment/Nomination date:

Print logibly in black ink or type

Statement of Economic Interests



NAME Jenna H. Coulting STATE POSITION Board Menter WI Technical College System

ABOUT THIS FORM: This Statement of Economic Interests has been prescribed by the Wisconsin Ethics Board pursuant to §19.44, Wisconsin Statutes. The Statement is divided into saveral parts. Most parts ask for information about you as well as immediate family members. The information requested concerns the previous calendar year and, for some items, requires a snapshot of economic interests held on a specified date.

Part 1 of this Statement asks you to identify your family's employers. Part 2 asks for information about your family's ownership interests in businesses and enterprises. Part 3 asks you to identify your family's real estate holdings. Part 4 asks you to identify certain of the clients, customers, and tenants of the businesses and real estate you listed in Parts 2 and 3. Part 5 asks you to identify sources from which you received business entertainment and other gifts. Part 6 asks you to identify sources from which you received honoraria or payment of expenses. Part 7 asks you to identify all other sources from which you or your fundly received income. Part 8 asks you to identify securities which your family owned either directly or indirectly. Part 8 asks you to identify certain organizations in which you or an immediate family member was an officer or director. Part 10 asks you to identify certain organizations of which you or your family was an authorized representative or legal agent. Finally, Part 11 asks you to identify certain of your family's creditors.

Complete each part of this Statement. If any item does not apply, check (/) the box marked "None or Not Applicable."

Attach additional pages if necessary.

Definitions: "Income" means gross income before deductions and depreciation, from whatever source derived, as defined by the Internal Revenue Code, but excludes dividends and interest. "Immediate family member" means your spouse, and any child, step-child, parent, or parent-in-law who receives more than one-half of his or her support from you or from whom you receive more than one-half of your support. A "lobbyist" is an individual whose duties include trying to influence legislation or administrative rules in Wisconsin by communicating with an elected state official, agency official, or legislative employee on another's behalf for pay.

- · Questions about completing this form? Call (608) 256-8115.
- Other inquiries (608) 266-8128.

Part 1. Employers.

List each employer from which you are an immediate family member received income of \$1,000 or more in 1996. You do not have to identify any source of income from which you or an immediate family member received less than \$1,000. You do not have to identify any smployer who is an individual unless the income you or your family received came from the individual's operation of a business or the individual was a lobbyist.

Name of employer		City and state	Ceneral nature of husinous
State of Wisconsin, identif	y agency or institution)		

**************************************	* *************************************		
art 2. Ownersh	ip interesta in	businesses.	
nich you or an immed ntrolled at least a 10% mpanies, sales and service imber was self-employed, b l'ert 4. If you or an imn	late family member, Interest on the Appe operations, real estate r out did not operate under acdiate family member s	directly or indirectly, interest Date. Busine ental, and professional professional mane, merely was sugged in renting r	ie, or other business or enterprisa separately or together, awnod- isses can include farms, manufacturi ractices. If you or an immediate fam list the business's customers and clis- real estate, but did not operate under t 4, the commercial tenants.
Check (/) if None or ?	ot Applicable		
Name of husiness	City and state	(Icnoral nature of business	Form of business organization (service corporation, subchapter S or C corporation, partnership, prescionership, atc.)
Name of business	City and state		(acceice corporation, subshapter
Name of business	City and state		(service corporation, subabapter 8 or C corporation, partnership,
Name of business	City and state		(service corporation, subahapter S or C corporation, partnership,
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Name of business	City and state		(service corporation, subshaptor S or C corporation, partnership,
		of husiness	(service corporation, subshaptor S or C corporation, parlmership, propriotorship, #10.)
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Identify all roal estate located in Wisconsin in which you or an immediate family member held at least a 10% interest valued at \$5,000 on the Appointment Date. Include real estate you or your family owned directly or through: (a) a partnership; (b) a corporation; (c) a trust; or (d) other enterprise. Do not list your principal residence unless you used it for the conduct of a business or for rental purposes.

Location of property (street address or fire number, municipality, and county)	Type of property (e.g., farm, recreational, commercial, ren(al)	Nature of interest (own, lease, option, casement, land contract)	
 *			
		· · ·	
^ ^			

Part 4. Customers, clients, and tenants (other than individuals*).

Identify every source of income of \$1,000 or more in 1990 of every business that you listed in Part 2, except a C corporation, and for every property listed in Part 3. This means identify each customer, client, tonant, and other source of income.

*Do not identify an Individual unless the individual was a lobbyist.

If your business received income from a third-party payer (such us a fee, commission, or insurance psyment received by a realier, travel agent, in medical practice), list the third-party payer as well as the evetomer, client, or tenant.

You do not have to list:

- * a corporation's sources of income if the corporation was not a service corporation or an "S" corporation under the Internal Revenue Code
- sources of income of a business in Part 2 or property in Part 3 from which you or an immediate family momber received less than \$1,000.
- * an individual who was not a lubbyist
- a demident's estate.

Customer, client, or tenant	City and state
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Part 5. Business entertainment and other gifts.

List all individuals and organizations from which you received, in 1996, entertainment or gifts having a total value of more than \$50. Include tickets to sporting or theatrical events, golfing fees, prizes, samples and promotional items, items from sales representatives or as part of business promotions, and similar items. You do not have to report gifts received by immodiate family members if they were not intended for you. A 'gift' includes any money, property, favor, service, entertainment, travel, or payment furnished without valuable consideration. A "gift" does not include political contributions reported to the Elections Board, or meals, boverages, or ladging that an

Check (V) if Nune or Not Applicable	
Name of giver	City and state
Part 6. Honoraria and payment of expense	
List each individual or organization from which you received, in expenses, or honoraria having a total value of more than \$50, for a of a talk, participation in a meeting, or for a published work and government or state agencies. Honoraria you or an immediate family a issues should be accounted for in Part 7.	ittoudance at a conference, proscutation out issues initiated by or affecting state nember received that were unrelated to state
You do not have to list information about ludging, transportation, moals, a (1) if you returned it within 30 days; (2) if you received it from the agency of fyou received it from a source listed in Part 1 or Part 4; or (4) if you alros as a fatter of public record. **Check**(**\subset*) if None or Not Applicable	of which your state public utlice is a part; (3)
Payer Approximate Amount of value of expenses honorarit	
Part 7. Other sources of income.	
Identify any other sources, not previously identified, from white received income (other than dividends or interest) of \$1,000 or mo reported, Social Security payments, retirement benefits, directors' fees, estate, and the like. You do not have to list insurance benefits, inherits were required in return), or Wisconsin Rottroment Fund benefits. You securities unless you know the purchaser's identity. You do not have to lobbyist	re in 1996. Include henoraria not alsowher commissions, proceeds from the sale of vos mees, scholarships (if no teaching or service do not have to list proceeds from the sale o
Identify any other sources, not previously identified, from whice received income (other than dividends or interest) of \$1,000 or mo reported, Social Security payments, refirement benefits, directors' fees, estate, and the like. You do not have to list insurance benefits, inherits were required in return), or Wisconsin Rottrement Fund benefits. You securities unless you know the purchaser's identity. You do not have to	re in 1996. Include henoraria not alsowher commissions, procreds from the sale of roa mess, scholarships (if no teaching or service do not have to list proceeds from the sale o

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Name						
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Part 8. Stocks, bonds, mutual funds, and the like.

List securities, as explained below, that you and your immediate family owned on the Appointment Date whose value was \$5,000 or more on that date.

List the following types of scenrities:

- · stocks
- · bonds
- · mutual funds
- · money market funds
- * Accurition issued by the
- State of Wisconein
- · securities issued by governmental ontities within Wisconein
- · limited partnerships
- · commodity futures contracts

Do not list:

- may accurity in which your family's interest was less than \$5,000 on the Appointment Date
- * AAVinga accounts
- · checking accounts
- cortificates of deposit
- · aunuities
- ' inaurance contracta
- . any security issued by the fodoral government or
- a government outside Wisconsin
- any security issued by an organization that does not do business in Wisconsia

Be sure to include securities held for you or your family in:

- · a deferred compensation plan, profit-sharing plan, or ponsion plan whose investments you or your family directs
- · an individual retirement account (IRA)
- a corporation, partnership, or other entity which you or your family controls.

List the security by name Be specific. For example, list "Fidelity Privitan Fund - mutual fund" and "IBM Corporation - stock." Do not list "deferred compensation plan" or "IRA" or "Merrill Lynch account," since these terms do not identify the actual underlying securities.

For each security you list, place a check in one of the columns at the right to indicate the value of your family's interest in the security on the Appointment Date.

Name of security

Type of security

Value \$50,000 or less

Value \$50,000

Part 9. Offices and directorships.

List each business, labor union, association, comporative, or other organization of which you or an immediate family member was, on the Appointment Date, an officer or director. You do not have to identify any charitable organizations (antities to which a contribution is tax deducable); political organizations (antities whose primary purpose is to influence voting); non-profit social or community service organizations; trusts; or federal, state, or local governments or governmental agencies.

Business or organization	City and state	Position
STUDENT SENATE	MADISON, WI	PRESIDENT
)

Signature of person filing

Part 10. Representation of organizations.

List each business, labor union, association, cooperative, partnership, or other organization of which you or an immediate family member was, on the Appointment Date, an authorized representative or legal agent. List any organization which you or an immediate family member represented in the organization's dealings with others or on whose bohalf you or an immediate family member was authorized to speak. Include husiness clients for which you or an immediate family member provided legal representation in dealings with other parties. organizations on whose behalf you or an immediate family member publicly appeared, and partnerships in which you or an immediate family member was a general partner. You do not have to identify any charitable organizations (entities to which a contribution is tax deductible); political organizations (entities whose primary purpose is to influence voting); non-profit social or community service organizations; trusts; federal, state, or local governments or governmental thich your offerts did not include representation to third parties. You do not have to list

Creditor City and state \$50,000 More the	Check (/) If None or Not Applicable Business or organization	City and state	The state of the s	
ist each creditor to whom you or immediate family members, individually or together, ewed \$5,000 more on the Appointment Date. For each creditor listed, place a chack in one of the columns at the right indicate the amount ewed. Include husiness creditors if you or an immediate family member was personally in the debt. Include your portion of any partnership debts. Check (J) if None or Not Applicable Creditor City and state: Amount Amount \$50,000 More the \$50,000 or less \$50,000 More the \$50,000 more than \$5				
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contifu that the information contained in this Statement Of Economic Interests is to the				
omplete, and correct to the best of my knowledge, information, and belief.	cortify that the information contained	in this Statement of Econo	mic Interest	s is true,
	omplete, and correct to the best of my	knowledge, information, an	d behef.	
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Statements of Economic Interests are open for public inspection. The Rebics Board will notify you of the identity of any person who examines your Statement. In accordance with \$16.04(1Xm), Wiscousin Statutes, the Ethics Board states that no parsonally identifiable information is likely to be used for purposes other than those for which it is collected. Failure to file a completed form may result in a forforture of up to \$500

> Office Review 8 25 97



Beverly S. Simone President

August 22, 1997

The Honorable Calvin J. Potter Senate Education Committee Member P. O. Box 7882 Madison, WI 53707-7882

Dear Senator Potter:

Madison Area Technical College (MATC) is honored to have Ms. Jenna Caulkins, MATC Student Senate President, nominated for the position of Student Representative on the Wisconsin Technical College System Board (WTCSB). We have had the opportunity to observe and work with Ms. Caulkins related to legislative and student government issues and feel she would bring maturity, insight and ability to the WTCSB.

Ms. Caulkins is a currently enrolled in the MATC College Transfer Program. She is industrious, and highly motivated with exceptional communication skills. Ms. Caulkins is able in impromptu and formal situations to be at ease and successfully articulate her ideas. She listens well to others, is able to synthesize information, and contributes to oral and written discussions. Ms. Caulkins has a strong determination and perseverance to succeed in her career goals. She is interested in pursuing a future career in politics.

If selected for the WTCSB, Ms. Caulkins would bring analytical skills, impartial analysis of facts, keen listening and speaking skills, and a strong commitment to team work. Ms. Caulkins has demonstrated these strengths and abilities as Student Senate President and in representing the college at the Wisconsin Vocational Association legislative seminar, at other political candidate forums hosted by MATC, and at various meetings throughout the institution and community. At our college legislative breakfasts, Ms. Caulkins competently and assertively represented the interests of the MATC student body. Her comments were very cogent and pertinent to the topics being discussed. As a single parent and student she was able to represent many others regarding the complex implementation issues surrounding Wisconsin Works.

We are confident that she would offer valuable contributions to WTCSB discussions on complex and critical issues affecting our system. Ms. Caulkins would not only bring a student's perspective to the WTCSB, she would also bring maturity, enthusiasm, and necessary skills to become an active, articulate and committed member. Madison Area Technical College solidly endorses the confirmation of Ms. Jenna Caulkins to the WTCS Board.

Sincerely,

Beverly S. Simone, Ed.D.

Beverly Simone

President

Manuel Lugo

MATC District Board Chair