

WISCONSIN STATE  
LEGISLATURE  
COMMITTEE HEARING  
RECORDS

1997-98

(session year)

Senate

(Assembly, Senate or joint)

Committee on  
Education  
(SC-Ed)

File Naming Example:

Record of Comm. Proceedings ... RCP

- 05hr\_AC-Ed\_RCP\_pt01a
- 05hr\_AC-Ed\_RCP\_pt01b
- 05hr\_AC-Ed\_RCP\_pt02

NOTICES ...

➤ Committee Hearings ... CH (Public Hearing Announcements)

➤ \*\*

➤ Executive Sessions ... ES

➤ \*\*

➤ Committee Reports ... CR

➤ \*\*

➤ Record of Comm. Proceedings ... RCP

➤ \*\*

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INFORMATION COLLECTED BY COMMITTEE  
CLERK FOR AND AGAINST PROPOSAL

➤ Appointments ... Appt

➤ **97hr\_SC-Ed\_Appt\_pt11**

Name: Margaret Humleker

➤ Clearinghouse Rules ... CRule

➤ \*\*

➤ Hearing Records ... HR (bills and resolutions)

➤ \*\*

➤ Miscellaneous ... Misc

➤ \*\*



STATE OF WISCONSIN  
**ETHICS BOARD**



James R. Morgan  
Chairman  
Paul M. Holzem  
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On the capitol square at:  
44 EAST MIFFLIN STREET, STE 601  
MADISON, WISCONSIN 53703-2800  
phone: 608/266-8123  
fax: 608/264-9309  
ethics@mail.state.wi.us

Roth Judd  
Director

NOMINEE: Margaret B. Humleker

POSITION: Member, State Historical Society Board of Curators  
(Governor's appointee)

STATUTORY  
REFERENCE:

**15.70 Historical society.** There is continued the state historical society of Wisconsin initially organized under chapter 17, laws of 1853, to be known for statutory purposes as the historical society, under the direction and supervision of a board of curators. The board of curators is not subject to s. 15.07. The board of curators shall consist of:

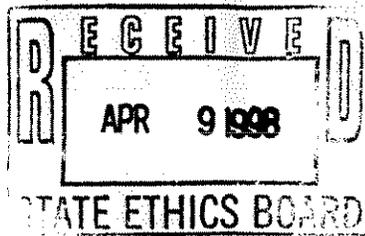
\* \* \*

(4) Three members nominated by the governor and with the advice and consent of the senate appointed for staggered 3-year terms.

4/22/98 cw  
SENATE COMMITTEE ON EDUCATION AND FINANCIAL INSTITUTIONS: Senators  
Darling, (Chair), Huelsman, Lazich, Welch, Drzewiecki, C. Potter, Jauch,  
Shibilski and Grobschmidt.

Mail or Fax to:

Wisconsin Ethics Board  
44 E. Mifflin St., Suite 601  
Madison, WI 53703-2800  
Fax: (608) 264-9309



Filed in 1998 for calendar year 1997

Print legibly in black ink or type

## Statement of Economic Interests

NAME: **Humleker, Margaret**  
Historical Society  
STATE POSITION: **Member**  
HELD OR SOUGHT: **Board of Curators**

**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 several 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 family received income. Part 8 asks you to identify securities which your family owned either directly or indirectly. Part 9 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) 266-8115.
- Other inquiries (608) 266-8123.

## Part 1. Employers.

List each employer from which you or an immediate family member received income of \$1,000 or more in 1997. 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 employer 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.

Check (✓) if None or Not Applicable

| Name of employer<br>(If State of Wisconsin, identify agency or institution) | City and state | General nature of business |
|---|----------------|----------------------------|
|   |                |                            |
|   |                |                            |
|   |                |                            |
|   |                |                            |
|   |                |                            |

## Part 2. Ownership interests in businesses.

List each partnership (general, limited or limited liability), corporation (regardless of tax status and including service corporations), proprietorship, limited liability company, firm, franchise, or other business or enterprise in which you or an immediate family member, directly or indirectly, separately or together, owned or controlled at least a 10% interest on December 31, 1997. Businesses can include farms, manufacturing companies, sales and service operations, real estate rental, and professional practices. If you or an immediate family member was self-employed, but did not operate under a business name, merely list the business's customers and clients in Part 4. If you or an immediate family member was engaged in renting real estate, but did not operate under a business name, merely list, in Part 3, the address of the real estate and, in Part 4, the commercial tenants.

Check (✓) if None or Not Applicable

| Name of business | City and state | General nature of business | Form of business organization<br>(service corporation, subchapter S or C corporation, partnership, proprietorship, etc.) |
|------------------|----------------|----------------------------|--|
|                  |                |                            |  |
|                  |                |                            |  |
|                  |                |                            |  |
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|                  |                |                            |  |

For the businesses listed above, your identification must be sufficient to enable a person to identify: (a) for a corporation, its officers and directors; (b) for a limited liability company, its managers or members; and (c) for any other business, its owners. Because limited partnerships, limited liability companies, and corporations created or registered to do business in Wisconsin file this information with the Department of Financial Institutions as a matter of public record, no further information is required about them. For other types of businesses, identify the owners and partners below, or explain where such information is available as a public record.

Check (✓) if None or Not Applicable

| Business | Name of owners or partners | City and state |
|----------|----------------------------|----------------|
|          |                            |                |
|          |                            |                |
|          |                            |                |
|          |                            |                |
|          |                            |                |

Name Myrad B. Humlek

### Part 3. Real estate.

Identify all real estate located in Wisconsin in which you or an immediate family member held at least a 10% interest valued at \$5,000 on December 31, 1997. 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.

Check (✓) if None or Not Applicable

| Location of property<br>(street address or fire number,<br>municipality, and county) | Type of property<br>(e.g., farm, recreational,<br>commercial, rental) | Nature of interest<br>(own, lease, option, easement,<br>land contract) |
|--|---|--|
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### Part 4. Customers, clients, and tenants (other than individuals\*).

Identify every source of income of \$1,000 or more in 1997 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, tenant, 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 as a fee, commission, or insurance payment received by a realtor, travel agent, or medical practice), list the third-party payer as well as the customer, 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 member received less than \$1,000.
- an individual who was not a lobbyist
- a decedent's estate.

Check (✓) if None or Not Applicable

| 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 1997, 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 immediate 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, beverages, or lodging that an individual offers as hospitality at his or her own expense, and not as a business expense, for reasons unrelated to your holding state public office. You do not have to report gifts from your spouse, child, parent, brother, sister, grandchild, grandparent, aunt, uncle, niece, nephew, fiancé(e), parent-in-law, grandparent-in-law, brother-in-law, or sister-in-law.

Check (✓) if None or Not Applicable

| Name of giver | City and state |
|---------------|----------------|
|               |                |
|               |                |
|               |                |
|               |                |

## Part 6. Honoraria and payment of expenses.

List each individual or organization from which you received, in 1997, lodging, transportation, meals, expenses, or honoraria having a total value of more than \$50, for attendance at a conference, presentation of a talk, participation in a meeting, or for a published work about issues initiated by or affecting state government or state agencies. Honoraria you or an immediate family member received that were unrelated to state issues should be accounted for in Part 7.

You do not have to list information about lodging, transportation, meals, money or any other thing of pecuniary value: (1) if you returned it within 30 days; (2) if you received it from the agency of which your state public office is a part; (3) if you received it from a source listed in Part 1 or Part 4; or (4) if you already reported the payment to the Ethics Board as a matter of public record.

Check (✓) if None or Not Applicable

| Payer | Approximate value of expenses | Amount of honorarium | Circumstances of receipt |
|-------|-------------------------------|----------------------|--------------------------|
|       |                               |                      |                          |
|       |                               |                      |                          |
|       |                               |                      |                          |
|       |                               |                      |                          |

## Part 7. Other sources of income.

Identify any other sources, not previously identified, from which you or an immediate family member received income (other than dividends or interest) of \$1,000 or more in 1997. Include honoraria not elsewhere reported, Social Security payments, retirement benefits, directors' fees, commissions, proceeds from the sale of real estate, and the like. You do not have to list insurance benefits, inheritances, scholarships (if no teaching or services were required in return), or Wisconsin Retirement Fund benefits. You do not have to list proceeds from the sale of securities unless you know the purchaser's identity. You do not have to list individuals, unless the individual was a lobbyist.

Check (✓) if None or Not Applicable

| Source of income                    | City and state      |
|-------------------------------------|---------------------|
| SOCIAL SECURITY                     | FOND DU LAC, WI     |
| TRUST DISTRIBUTIONS:                |                     |
| GEORGE BANTA JR. TRUST FOR MARGARET |                     |
| BANTA HUMLEKER 8-10-66              | WEST PALM BEACH, FL |
| GEORGE BANTA JR. 1972 TRUST FOR     |                     |
| MARGARET BANTA HUMLEKER             | WEST PALM BEACH, FL |

Name Margaret B. Hummel

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

List securities, as explained below, that you and your immediate family owned on December 31, 1997 whose value was \$5,000 or more on that date.

List the following types of securities:

- stocks
- bonds
- mutual funds
- money market funds
- securities issued by the State of Wisconsin
- securities issued by governmental entities within Wisconsin
- limited partnerships
- commodity futures contracts

Do not list:

- any security in which your family's interest was less than \$5,000 on December 31, 1997
- savings accounts
- checking accounts
- certificates of deposit
- annuities
- insurance contracts
- any security issued by the federal government or a government outside Wisconsin
- any security issued by an organization that does not do business in Wisconsin

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

- a deferred compensation plan, profit-sharing plan, or pension 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 Puritan 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 December 31, 1997.

Check (✓) if None or Not Applicable

| Name of security                               | Type of security        | Value \$50,000 or less | Value More than \$50,000 |
|--|-------------------------|------------------------|--------------------------|
| BANTA CORPORATION                              | COMMON STOCK            |                        | X                        |
| FIRSTAR TRUST CO -- SHORT TERM INVESTMENT FUND | COMMON STOCK TRUST FUND |                        | X                        |
|  |                         |                        |                          |
|  |                         |                        |                          |
|  |                         |                        |                          |

### Part 9. Offices and directorships.

List each business, labor union, association, cooperative, or other organization of which you or an immediate family member was, on December 31, 1997, an officer or director. 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; or federal, state, or local governments or governmental agencies.

Check (✓) if None or Not Applicable

| Business or organization | City and state | Position |
|--------------------------|----------------|----------|
|                          |                |          |
|                          |                |          |
|                          |                |          |
|                          |                |          |
|                          |                |          |

### 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 December 31, 1997, 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 behalf you or an immediate family member was authorized to speak. Include business 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 agencies; or organizations for which your efforts did not include representation to third parties. You do not have to list organizations already identified in Parts 1, 2, or 9.

Check (✓) if None or Not Applicable

| Business or organization | City and state |
|--------------------------|----------------|
|                          |                |
|                          |                |
|                          |                |

### Part 11. Creditors.

List each creditor to whom you or immediate family members, individually or together, owed \$5,000 or more on December 31, 1997. For each creditor listed, place a check in one of the columns at the right to indicate the amount owed. Include business creditors if you or an immediate family member was personally liable for the debt. Include your portion of any partnership debts.

Check (✓) if None or Not Applicable

| Creditor     | City and state | Amount \$50,000 or less | Amount More than \$50,000 |
|--------------|----------------|-------------------------|---------------------------|
| FIRSTAR BANK | MILWAUKEE, WI  |                         | X                         |
|              |                |                         |                           |
|              |                |                         |                           |

### Part 12. Information as of date office assumed.

Your Statement must identify significant changes in your economic interests that occurred between the end of 1997 and the date of your appointment/nomination. List any reportable economic interests acquired or relinquished between 12/31/97 and 3/18/98 and indicate the part to which it pertains.

Check (✓) if None or Not Applicable

|  |
|--|
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|  |

Before signing, please review your Statement to be sure that for each part, you have listed the required information or checked the box for "None or Not Applicable."

I certify that the information contained in this Statement of Economic Interests is true, complete, and correct to the best of my knowledge, information, and belief.

Margaret B. Hummel                      4-1-98                      920-921-3609  
 Signature of person filing                      Date                      Daytime telephone number

Statements of Economic Interests are open for public inspection. The Ethics Board will notify you of the identity of any person who examines your Statement. In accordance with §15.04(1)(m), *Wisconsin Statutes*, the Ethics Board states that no personally 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 forfeiture of up to \$500.

Office Review  
 ip 4/22/98