

☞ **09hr\_SC-HHIPTRR\_Appt\_Lowe\_pt01**



Gretchen Lowe

(FORM UPDATED: 08/11/2010)

## WISCONSIN STATE LEGISLATURE ... PUBLIC HEARING - COMMITTEE RECORDS

### 2009-10

(session year)

### Senate

(Assembly, Senate or Joint)

### Committee on ... Health, Health Insurance, Privacy, Property Tax Relief, and Revenue (SC-HHIPTRR)

### COMMITTEE NOTICES ...

- Committee Reports ... **CR**
- Executive Sessions ... **ES**
- Public Hearings ... **PH**

### INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL

- Appointments ... **Appt** (w/Record of Comm. Proceedings)
- Clearinghouse Rules ... **CRule** (w/Record of Comm. Proceedings)
- Hearing Records ... bills and resolutions (w/Record of Comm. Proceedings)  
(**ab** = Assembly Bill)                      (**ar** = Assembly Resolution)                      (**ajr** = Assembly Joint Resolution)  
(**sb** = Senate Bill)                              (**sr** = Senate Resolution)                      (**sjr** = Senate Joint Resolution)
- Miscellaneous ... **Misc**

Senate

Record of Committee Proceedings

**Committee on Health, Health Insurance, Privacy, Property  
Tax Relief, and Revenue**

**Lowe, Gretchen**, of Madison, as a member of the Board of Nursing, to serve for the term ending July 1, 2013.

December 01, 2009 Referred to Committee on Health, Health Insurance, Privacy, Property Tax Relief, and Revenue.


January 13, 2010 **EXECUTIVE SESSION HELD**

Present: (7) Senators Erpenbach, Carpenter, Robson, Lassa, Lazich, Kanavas and Darling.  
Absent: (0) None.

Moved by Senator Carpenter, seconded by Senator Lassa that **Lowe, Gretchen** be recommended for confirmation.

Ayes: (7) Senators Erpenbach, Carpenter, Robson, Lassa, Lazich, Kanavas and Darling.  
Noes: (0) None.

CONFIRMATION RECOMMENDED, Ayes 7, Noes 0

  
\_\_\_\_\_  
Kelly Becker  
Committee Clerk

Health

## State of Wisconsin Government Accountability Board

Ethics & Accountability Division  
P.O. Box 7984  
212 E. Washington Ave, 3<sup>rd</sup> Floor  
Madison, WI 53707-7984  
Phone (608) 266-8005  
Fax (608) 264-9319  
E-mail: GABEthics@wi.gov



KEVIN J. KENNEDY  
Director and General Counsel

12/2/2009

Senate Committee Members:

The attached Statement of Economic Interests is provided with regard to the individual's nomination to a State Public Office by Governor Jim Doyle.

Sincerely,  
STATE OF WISCONSIN GOVERNMENT  
ACCOUNTABILITY BOARD

Nominee: **Lowe, Gretchen R.**  
Nomination Date: 11/30/2009

# Statement of Economic Interests

Filed in 2009 for calendar year 2008 by

**Lowe, Gretchen R.**

Nursing, Board of  
Member

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TEW GOVERNMENT  
ACCOUNTABILITY BOARD

FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS SEE THE INSTRUCTIONS OR VISIT OUR WEBSITE AT <http://ethics.state.wi.us>.  
Still have questions? For priority service send an e-mail to: [ethics@ethics.state.wi.us](mailto:ethics@ethics.state.wi.us); otherwise leave a detailed message at (608) 266-8123.  
ATTACH ADDITIONAL PAGES AS NEEDED/PLEASE SEE INSTRUCTIONS

**Part A**

**As of December 31, 2008**

**1. INVESTMENTS**

**a) WISCONSIN DEFERRED COMPENSATION PROGRAM** If you held an investment in a fund available within the Wisconsin Deferred Compensation Program, please place a checkmark next to each fund in which you held \$5,000 or more, whether held privately or through the Program.

	\$5,000 to \$50,000	More than \$50,000		\$5,000 to \$50,000	More than \$50,000		\$5,000 to \$50,000	More than \$50,000
<b>Profile Series</b>			<b>Small Cap</b>			<b>Bond</b>		
Vanguard Retirement 2045	<input type="checkbox"/>	<input type="checkbox"/>	BGI Russell 2000 Index	<input type="checkbox"/>	<input type="checkbox"/>	BGI US Debt Index	<input type="checkbox"/>	<input type="checkbox"/>
Vanguard Retirement 2035	<input type="checkbox"/>	<input type="checkbox"/>	DEFA US Micro-Cap Portfolio	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Federated US Government Securities 2-5yr	<input type="checkbox"/>	<input type="checkbox"/>
Vanguard Retirement 2025	<input type="checkbox"/>	<input type="checkbox"/>	<b>Mid Cap</b>			Vanguard Long-term Investment Grade Adm	<input type="checkbox"/>	<input type="checkbox"/>
Vanguard Retirement 2015	<input type="checkbox"/>	<input type="checkbox"/>	BGI Mid Cap Equity Index	<input type="checkbox"/>	<input type="checkbox"/>	<b>Money Market</b>		
Vanguard Target Retirement Income	<input type="checkbox"/>	<input type="checkbox"/>	T Rowe Price Mid Cap Growth	<input type="checkbox"/>	<input type="checkbox"/>	Vanguard Admiral Treasury Money Market	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>International</b>			<b>Large Cap</b>			<b>Fixed Returns for the Quarter</b>		
American Euro Pacific Growth	<input type="checkbox"/>	<input type="checkbox"/>	Calvert Social Investment Equity	<input type="checkbox"/>	<input type="checkbox"/>	Stable Value	<input type="checkbox"/>	<input type="checkbox"/>
BGI EAFE Equity Index	<input type="checkbox"/>	<input type="checkbox"/>	Fidelity Contrafund	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FDIC Bank Option	<input type="checkbox"/>	<input type="checkbox"/>
			Vanguard Institutional Index Plus	<input type="checkbox"/>	<input type="checkbox"/>			
			Vanguard Wellington Admiral Shares	<input type="checkbox"/>	<input type="checkbox"/>			

**b) OTHER INVESTMENTS** List stocks, bonds, limited partnerships, Wisconsin governmental securities, and mutual and money market funds in which you and your family's interest was valued at \$5,000 or more.

	(check one)	\$5,000 to \$50,000	More than \$50,000
<b>MUTUAL OR MONEY MARKET FUND</b>			
American Funds Balanced	<input checked="" type="checkbox"/>		<input type="checkbox"/>
Capital Income Builder	<input checked="" type="checkbox"/>		<input type="checkbox"/>
Oppenheimer Main Street <i>Global Fund</i>	<input checked="" type="checkbox"/>		<input type="checkbox"/>
Tamarack Investment Funds Prime	<input checked="" type="checkbox"/>		<input type="checkbox"/>
Van Kampen Equity Income <i>Goldman Sachs Growth &amp; Income</i>	<input checked="" type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
<b>STOCKS/OPTIONS/FUTURES</b>			
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
<b>BONDS</b>			
GS Short duration government C	<input checked="" type="checkbox"/>		<input type="checkbox"/>
Oppenheimer Strat Inc.	<input checked="" type="checkbox"/>		<input type="checkbox"/>

**6. OFFICERS AND DIRECTORS** List organizations of which you or a family member was an officer or director (unless already listed in item 2).

Business or organization	City	State	Position
AFSCME	Madison	WI	Treasurer, Vice President
AFSCME	Madison	WI	President
AFSCME Retirees	Madison	WI	President
<del>AFSCME Retirees</del>	<del>Madison</del>	<del>WI</del>	<del>Secretary</del>
<del>United Way Community Services SCFL</del>	<del>Madison</del>	<del>WI</del>	<del>Chair</del>

**7. AGENT, REPRESENTATIVE OR SPOKESPERSON** List organizations that authorized you or a family member to represent them in their dealings with others as an attorney-at-law, agent, spokesperson, or representative (unless already listed in item 2, 3 or 6).

Business or organization	City	State

**8. CREDITORS** List creditors to which you or your family owed \$5,000 or more. (check one)

Creditor	City	State	\$5,000 to \$50,000	More than \$50,000
State of WI - Department of Veterans Affairs	Milwaukee	WI	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Union Plus Credit Card	<i>Carol Stream</i>	<i>IL</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

**Part B** For calendar year 2008

**9. EMPLOYERS** List your and your family's EMPLOYERS (\$1,000 or more of income) in 2008.

Name of employer (if State of Wisconsin, also identify agency or institution)	City	State	Nature of employer's business
AFSCME	Madison	WI	Union

**10. ADDITIONAL SOURCES OF INCOME** List other sources from which you or your family received income of \$1,000 or more in 2008.

Source of Income	City	State
Social Security Administration	Washington	DC
State Street Retiree Services	Boston	MA
Wisconsin Retirement System	Madison	WI

**11. ENTERTAINMENT AND GIFTS** List individuals and organizations that provided you with entertainment or gifts (more than \$50) in 2008.

Name of provider	City	State



**JIM DOYLE**  
**GOVERNOR**  
**STATE OF WISCONSIN**

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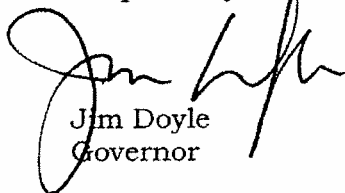
November 30, 2009

To the Honorable, the Senate:

I am pleased to nominate and with the advice and consent of the Senate, do reappoint Gretchen Lowe to be a public member on the Board of Nursing to serve a term expiring July 1, 2013.

Ms. Lowe will be available to the Senate for hearings and my staff will assist in any way they can.

Respectfully submitted,



Jim Doyle  
Governor



**JIM DOYLE**  
**GOVERNOR**  
**STATE OF WISCONSIN**

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November 30, 2009

Ms. Gretchen R. Lowe  
205 Crystal Lane  
Madison, Wisconsin 53714

Dear Ms. Lowe:

I am pleased to reappoint you to the Board of Nursing, effective November 30, 2009. Your experience, knowledge, and dedication continue to be a true asset to my administration and a great benefit to the people of Wisconsin.

I look forward to working with you to find creative ways of delivering services and implementing positive change for the citizens of our state.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jim Doyle', written over a printed name and title.

Jim Doyle  
Governor



**JIM DOYLE**  
GOVERNOR  
STATE OF WISCONSIN

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GOVERNOR'S APPOINTMENT

**NAME:** Gretchen Lowe

**MAILING ADDRESS:** 205 Crystal Lane  
Madison, WI 53714

**E-MAIL ADDRESS:** gdlowe@inxpress.net

**RESIDES IN:** Madison, WI

**TELEPHONE:** (608) 249-5693 (h)

**APPOINTED TO:** Board of Nursing  
public member 1

**TERM:** A term to expire July 1, 2013

**SUCCEEDS:** Herself

**SENATE CONFIRMATION:** YES

**DATE OF APPOINTMENT:** November 30, 2009

**DATE OF NOMINATION:** November 30, 2009