Approved: <u>05/05/10</u> Date

MINUTES OF THE SENATE PUBLIC HEALTH AND WELFARE COMMITTEE

The meeting was called to order by Chairman Jim Barnett at 1:35 p.m. on March 2, 2010, in Room 546-S of the Capitol.

All members were present.

Committee staff present:

Nobuko Folmsbee, Office of the Revisor of Statutes Renae Jefferies, Office of the Revisor of Statutes Iraida Orr, Kansas Legislative Research Department Terri Weber, Kansas Legislative Research Department Amanda Nguyen, Intern, Kansas Legislative Research Department Jan Lunn, Committee Assistant

Others attending:

See attached list.

Chairperson Barnett called attention to follow-up information provided by Mr. Brad Smoot, Blue Cross Blue Shield of Kansas and Blue Cross Blue Shield of Kansas City, concerning **SB 136 - Patient protection act, prohibited provisions in agreement** which was heard on February 17, 2010 (Attachment 1). Questions answered related to whether Medicare is required to get the lowest possible rate; when Blue Cross Blue Shield plans began using most favored nation clauses and whether such clauses can be omitted or "negotiated away" at the request of the provider.

Confirmation Hearing - University of Kansas Hospital Authority

Senator Barnett welcomed Mr. Mark Jorgensen and Mr. Deryl Wynn, appointees of the Governor, to the University of Kansas Hospital Authority.

Mr. Jorgensen, appointed to fill an unexpired term, described his personal, educational, and professional background (<u>Attachment 2</u>). He indicated his desire to be part of the process for a National Cancer Institute designation for the University of Kansas.

Mr. Deryl Wynn, appointed to fill a four-year term, spoke about his experience as a child with a father in the military, his educational background, his experience in the military following college graduation, and his professional career representing not-for-profit entities (<u>Attachment 3</u>). He indicated he had a unique perspective related to the balance of not-for-profit and for-profit entities. Mr. Wynn commented that he welcomed the opportunity for service to the Hospital Authority.

<u>Upon a motion by Senator Schmidt and a second by Senator Haley to recommend confirmation of Mr. Mark Jorgensen and Mr. Deryl Wynn to the University of Kansas Hospital Authority by the full Senate, the motion carried.</u>

Continued discussion of <u>SB 447 - Child care</u>; <u>supervision of children and licensing and inspection of child care facilities</u>

Senator Barnett recognized Senator Kelly who submitted a balloon amendment to <u>SB 447</u>. Senator Kelly explained the documents distributed. "Insert A" will be inserted following line 37 on page 6 and contains the language required that moves a family day care home into a licensed category called "child care facility." The language provides for initial and subsequent inspections for child care facilities, and the duty of the Secretary of the Kansas Department of Health and Environment (KDHE) related to the establishment and implementation of a risk-based system to use in determination of inspection frequencies.

Senator Kelly explained additional revisions and referred to page 11 of the balloon concerning the ability of the KDHE Secretary to release names of child care facilities' licensees or applicants and their history of citations and complaints. It also establishes the ability to implement an on-line information dissemination system which will be accessible to the public. Senator Kelly indicated the availability of American Reinvestment and Recovery Act of 2009 (ARRA) funds for

CONTINUATION SHEET

Minutes of the Senate Public Health and Welfare Committee at 1:35 p.m. on March 2, 2010, in Room 546-S of the Capitol.

implementing a website resulting from collaboration between KDHE and the department of Social and Rehabilitation Services (SRS). Senator Kelly commented that in previous discussion, there was concern related to child care facilities that may continue to operate even though repeated violations have occurred and/or a child has been harmed or a death has resulted. A provision on page 5 was added in response to the concern.

Senator Haley inquired how child care facility complaints are generated and whether they are or can be anonymous. Mary Murphy, Director of Compliance and Regulation, Bureau of Child Care and Health Facilities, KDHE, responded that complaints usually come through a local health department, mail, e-mail, and by telephone; some complaints are anonymous.

Senator Haley also inquired about the definition of a serious repeat violator and stated his belief this should be defined in statute. Ms. Murphy responded the word "serious," in terms of existing statute relates to adversely affecting health and well-being including hazards, environmental dangers, lack of supervision, violation of child to staff ratios. Senator Haley supported the amendment but suggested the inclusion of further definition.

Senator Huntington asked what the current fee is for a "licensed family day care home" and for a "registered family day care home." Ms. Murphy stated the "licensed" category requires a \$15 fee and a "registered" category requires a \$5.00 fee. These are both assessed annually.

Senator Kelsey commended Senator Kelly for her hard work and requested clarification on the child/provider ratio. He provided several examples. Ms. Murphy clarified that if someone is caring for one or more child(ren) greater than 20 hours weekly for each child, they would be considered a child care provider regardless of whether payment is received and regardless of whether the child(ren) are relatives.

Senator Pilcher-Cook inquired where information (such as described above) can be obtained. Ms. Murphy responded information is available in most local health departments and on the KDHE website. In addition, Senator Pilcher-Cook asked whether child care costs would be increased as a result of this legislation. Considerable discussion was heard concerning those providers who typically provide care without either registration or licensure, and it was concluded that this legislation will not affect or change providers who choose to operate outside of registration/licensure.

Senator Barnett referred to many e-mails received that indicated the amendment would impair a provider's ability to obtain liability insurance. Ms. Murphy responded that she had no knowledge about that question since liability insurance is not required by KDHE. However, she added that nationally accredited child care facilities do carry liability insurance. For nationally accredited facilities, insurance agents may perceive increased standards as an opportunity for insurance rate increases.

Senator inquired about potential negative impact on rural Kansas. Ms. Murphy indicated that in her opinion, a negative impact would not be felt insofar as most providers in rural areas are either licensed or registered.

Senator Brungardt proposed a balloon amendment that would eliminate language on page one. Senator Schmidt commented that some of the specificity of the language on page one could be deleted, however, in her opinion, if all specificity is deleted that would negatively impact the intent of Senator Kelly's amendment to improve child care in Kansas.

Senator Barnett indicated $\underline{\textbf{SB 447}}$ would be on Thursday's (03/04/10) agenda for continued discussion; he adjourned the meeting at 2:36 p.m.

PUBLIC HEALTH AND WELFARE GUEST LIST March 2, 2010

NAME	AFFILIATION
15:11 Snow	UKHA
Levi Henry	Sundatone Group LC
Golf Turnel	
Diane Purcell	KAEVC
/	
	·
	<i>₹</i>

BRAD SMOOT

800 SW JACKSON, SUITE 808 TOPEKA, KANSAS 66612 (785) 233-0016 (785) 234-3687 (fax) bsmoot@nomb.com 10200 STATE LINE ROAD SUITE 230 LEAWOOD, KANSAS 66206

February 19, 2010

The Honorable James Barnett State Senator Capitol, Suite 234-E Topeka, KS 66612

Dear Chairman Barnett:

You and members of your committee asked three questions of me during our testimony on SB 136. The following answers are based on the best information we were able to gather thus far:

- 1. You asked whether Medicare is required to get the lowest possible rate. As you know, Medicare has a fee schedule for physicians, other providers and hospitals. There are many instances where negotiated rates of health plans or Medicaid might be below the rates set by Medicare. We can find no law or regulation which would require that Medicare get the lowest rate although most people would agree that Medicare rates are generally at the low end of the reimbursement scale. There is guidance from the federal government (CMS, HHS and OIG), however, indicating that providers who bill in excess of such entities' usual charges or costs for services may be excluded from participation in Medicaid and Medicare.
- 2. Senator Colyer inquired when BCBS plans began using most favored nations clauses. Interviews with long term employees of BCBSKS indicate that the Kansas-based plan have been using them since 1984.
- 3. Senator Colyer also inquired whether such clauses can be omitted or "negotiated away" at the request of a provider. As I indicated in response to this question, neither Blue plan uses most favored nations clauses in all of its provider contracts. BCBSKC indicates that there have been instances where such clauses have been omitted or modified by mutual agreement of the contracting parties.

I trust that this information responds to the questions raised by your committee. Thank you for giving us an opportunity to present information to your committee on this important topic and please feel free to contact me at your convenience should you or any other member of the committee have additional questions or concerns.

Sincerely,

Brad Smoot

Legislative Counsel

BCBSKS and BCBSKC

BS:jkf

Senate Public Health & Welfare Date:

Attachment:

03/02/10

Senate Confirmation Information Summary

Prepared and Submitted by the Office of Governor Mark Parkinson

Appointee: Mark R. Jorgenson

Position: Member, University of Kansas

Hospital Authority

Term Length: Four years

Expiration Date: March 15, 2012

Statutory Authority: K.S.A. 76-3304

Party Affiliation: Republican

⇒ Statutory geographic representation

Congressional District: Of the thirteen members appointed by the Governor, there shall be at least one member from each congressional district.

Requirements (insert any that apply)

County:

Size requirement (if any):

Other, specify:

⇒ Statutory party affiliation requirement:

⇒ Statutory industry or occupation requirements:

Public members shall have exhibited outstanding knowledge and leadership in the fields of finance, business, health-care management, health care providers, legal affairs, education or government.

Salary: N/A

Predecessor: Thomas Murphy

Attachment:

Board Composition Prior to Confirmation of New Appointee:

(SEE ATTACHED LIST)

University of Kansas Hospital Authority

			•		Α.				J		
Gov Appts:	13	Term Length:	Four Years	•			Co	ntact:	Bob Page, Pro	esident and CE	30
Total Appts: 19		Notes:	Reconstituted per SB642: 19 members (6 ex-officio University of					v of Kansas Hospital bow Boulevard ty, KS 66160			
Statute:	KSA 76-3304		Confirmation:	V	Gov Appt	Counts	Male/F	- emale	1st-2nd-3rd-4th	R/D/U	Board Active 🗸
Party Ratio:	N/A	Term Limi		Reg Board			9	: 3	2:2:8:1	10:2:0	Zoura Treatie [V]
	** Member fully assun	ned duties but awaits con	nfirmation by the Full S	enate							
4.4.1				County	Affiliation	<u>CD</u>	Ħ	<u>s</u>	Appointment Date	Expiration D	ate Reapt
	son, Dr. Barbara F.			Johnson		3			12/15/2003		
	0 Oak Valley Dr.		· ·							-	
De	Soto, KS 66018		Posit	ion: an ex-offic	cio member						
			Succe	eds: Deborah F	Powell						
			Appointed	By: Statute							
			Nominati								
			Statutory Rema	rks: Executive	Dean, KU M	[edical S	chool				
			Sea	at #: 010&011							
	nan, Dr. William			Wyandotte		3			5/26/1998		
	1 Rainbow										
Kan	sas City, KS 66160		Posit	ion: ex-officio	member						
,			Succe	eds: new positi	on						
			Appointed	By: Statute							
			Nominatio	ons:							
			Statutory Rema	rks: Interim Ch	ief of Staff o	f Medic	al Cent	ter			
			Sea	t#: 012							

County Affiliation CDH Appointment Date Expiration Date Reapt Honse, Mr. Robert W. Douglas R 45h 2s 6/18/2008 3/15/2010 1533 Fountain Dr. Lawrence, KS 66047 Position: Chair Succeeds: himself -- reappointed Appointed By: Governor Nominations: Statutory Remarks: Public Member Seat #: 006 Keim, Ms. Betty T. Johnson R 25h 11/9/2004 3/15/2008 3608 W. 71st Street Prairie Village, KS 66208 Position: a member bettyk@kc.rr.com Succeeds: herself -- reappointed Appointed By: Governor Nominations: Statutory Remarks: Public Member Seat #: 015 Kerr, The Honorable Dave M Reno R 101h 34s 1/8/2008 3/15/2010 72 Willowbrook Hutchinson, KS 67502 Position: a member kerr@senate.state.ks.us Succeeds: himself -- reappointed Appointed By: Governor Nominations: Statutory Remarks: Vice chair Seat #: 019 Lindenbaum, Ms. Sharon Johnson R 21h 7s 12/17/2008 3/15/2011 8501 Cherokee Place Leawood, KS 66206 Position: a member sharon.lindenbaum@twcable.com Succeeds: herself -- reappointment Appointed By: Governor Nominations: Statutory Remarks: Public Member

Seat #: 017

	<u>Co</u>	unty	<u>Affiliation</u>	<u>CD</u>	<u>H</u>	<u>s</u>	Appointment Date	Expiration Date	Reapt
Chapman, Mr. Edward J. Jr.	Leave	enworth	R	2	41h	5s	8/5/2005	3/15/2009	
1315 S. Broadway									
Leavenworth, KS 66048-0915	Position:	a member							
ejc@echapmanlaw.com	Succeeds:	himself r	eappointed						
	Appointed By:	Governor							
•	Nominations:								
	Statutory Remarks:	Public Mer	mber						
	Seat #:	001							
Farha, Dr. George J.	Sed	gwick	R	4	83h	30s	12/20/2007	3/15/2010	
300 N. Terrace									
Wichita, KS 67208-3944	Position:	a member							
mneel@gj.kscoxmail.com	Succeeds:	himself 1	reappointed						
	Appointed By:	Governor				•			
	Nominations:								
	Statutory Remarks:								
	Seat #:								
Gaunce, Ms. Patricia A.	Wya	andotte	D	3	36h	4s	12/20/2007	3/15/2011	
7300 Waverly									
Kansas City, KS 66109		a member							
pgaunce@kc.rr.com			appoinment						
	Appointed By:	Governor							
	Nominations:		•						
	Statutory Remarks: Seat #:	010							
Graves, Mr. Gregory M		nson	D	า	271-	27-	12/17/2008	2/15/2011	
5085 W 177th Terrace	J ()	HISOH	D	3	27h	37s	12/17/2008	3/15/2011	
Stilwell, KS 66085	Dogition	a member							
ggraves@burnsmcd.com		Robert Ho	nga						
ggraves(courtistited,com	Appointed By:		1120						
	Nominations:							•	
	Statutory Remarks:		ng 3rd CD					•	
	Seat #:	-	~						

County Affiliation $\overline{\mathbf{H}}$ Appointment Date Expiration Date Reapt Miller, Dr. Karen Johnson D 3 25h 7s 5/26/1998 5507 Fairway Road Shawnee Mission, KS 66205 Position: ex-officio member Succeeds: new position Appointed By: Statute Nominations: Statutory Remarks: Dean of KU School of Nursing Seat #: 013 R Johnson Murphy, Mr. Thomas E. III 3 38h 9s 8/5/2005 3/15/2008 1000 W 58th Terrace Resign Note: Kansas City, MO 64113 Position: a member Tom.Murphy@sprint.com Succeeds: Clay Edmands Appointed By: Governor Nominations: Statutory Remarks: Public Member Seat #: 005 Page, Robert 0 3901 Rainbow Boulevard Kansas City, KS 66160 Position: Ex-Officio Succeeds: Irene Cumming Appointed By: Nominations: Statutory Remarks: CEO University of Kansas Hospital Seat #: 014 28h Payne, Mr. John B. Johnson R 11s 11/9/2004 3/15/2008 9900 NE 114th Circle VanCouver, WA 98662 Position: a member Succeeds: himself -- reappointed John.Payne@banfield.net Appointed By: Governor Nominations: Statutory Remarks: Public Member

Seat #: 004

	<u>Co</u>	unty	Affiliation	<u>CD</u>	<u>H</u>	<u>s</u>	Appointment Date	Expiration Date	Reapt
Regnier, Mr. Robert	Joh	nson	R	3	28h	4s	10/16/2007	3/15/2009	
3400 119th St									
Leawood, KS 66209	Position:	member							
bregnier@bankbv.com	Succeeds:	Eric Jager							
	Appointed By:	Governor							
•	Nominations:								
	Statutory Remarks:	Public Me	mber						
	Seat #:	002							
Sunderland, Mr. Charles T. 10209 W. 139th Terr	Jok	nson	R	3	48h	37s	5/5/2005	3/15/2009	
Overland Park, KS 66221	Position:	a member							
charlie.sunderland@ashgrove.com	Succeeds:	himself	reappointed						
	Appointed By:	Governor							
	Nominations:								
	Statutory Remarks:	Public Me	mber					,	
	Seat #:	800							
Vacant, Position				0			7/15/2009		
	Position:	ex officio							
	Succeeds:								
	Appointed By:								
	Nominations:								
	Statutory Remarks:	Research I	Institutions re	presen	tative				
	Seat #:	009							
Warren, Dr. Linda MD	Wasl	nington		1	106h	21s	1/8/2008	3/15/2010	
P.O. Box 38, 205 S. Hanover									
Hanover, KS 66945	Position:								
ldwarren@bluevalley.net	Succeeds:		tinson						
	Appointed By:	Governor							
	Nominations:								
	Statutory Remarks:								
	Seat #:	003							

MARK R. JORGENSON BIOGRAPHICAL SUMMARY

Home Address:

10607 West 50th Terrace

Business Address:

U. S. Bank

Shawnee Mission, KS 66203

9900 West 87th Street Overland Park, KS 66212

Family:

Married, four children

Education

Coe College, Cedar Rapids, Iowa (1979)

Graduated with Magna Cum Laude and Phi Beta Kappa honors

Economics and Business double major

Washington University, St. Louis, Missouri (1981)

Masters in Business Administration

Banking Career

Mark Twain Bancshares - 1981-1997

Assistant to the President, Mark Twain Empire Bank (1981)

Vice President, Mark Twain Empire Bank (4/82 – 8/82)

President, Mark Twain Independence Bank (9/82 – 12/85)

President, Mark Twain Plaza Bank (1986 – 1991)

Kansas Regional President, Mark Twain Kansas City Bank (1992 – 7/97)

Mercantile Bank - 7/97-9/99

President, Kansas Commercial Banking Group

Firstar Bank/U. S. Bank - 9/99-1/03

Regional President, Kansas City Middle Market Group

U. S. Bank

Regional President and Chief Executive Officer, Kansas City (2/03 to present)

Civic Involvement

Civic Council of Kansas City---Board Member 2006 to present, Treasurer/Secretary 2008/09

Greater Kansas City Chamber of Commerce Board Member 2005 to present

KCADC Board Member 2006 to present, Co-Chair 2008/09

Heart of America Boy Scouts---Board Member 2004 to present, Finance Chair 2007/08

KU Edwards Campus---Advisory Board Member 2006 to present

KU Medical Center Advancement Board---2007 to present

Honorary Chair-Harvester's Chefs Classic-2007

Park University---Chair, Board of Visitors-2006 to present

Ozanam Board Member, Co-Chair Ozanam Gala—2004, 2005

Shawnee Mission Education Foundation—Co-Chair Library Capital Campaign—2005-08

Heart of America United Way Campaign---Major Firms Chair---2007; Leadership Chair---2009

Great American Basketball League/Johnson County Girls' Athletic Association - Basketball Coach – 15+ years

Great American Basketball League Board Member (2000-2006), Chair of GABL Fdn.--2006

Kansas Venture Capital, Inc. Board Member (1998-present), past Chairman of the Board

Johnson County Business Council (2003 to present)

Chairman of the Board, Kansas/Western Missouri Chapter March of Dimes (1996 to 1998)

1999 Walk America Chairman, Executive Committee, Former Finance Chair, and other

committee involvement

Milburn Golf and Country Club - President (1997-1998), Executive Committee (1996-1998),

Board of Governors (1996-1999), Former Treasurer, other committee involvement

Southminster Presbyterian Church – Elder, recently serving fourth of four three-year terms, Pastor Nominating Committee (1998-1999), Stewardship Committee and other committee involvement

Founding Board Member Entrepreneur Assistant Corporation (1985-1996) Certified Master Builder Board (1990-1992)

Co-Chair of 2003 Celebrate Success event benefiting SM Education Fdn.



CONFIRMATION OVERSIGHT COMMITTEE

Acknowledgment of Release of Tax and Criminal Records Information Form

	I, MANK R. JORGENSON acknowledge that as part of the (print name)
	Senate Confirmation Oversight Committee process I will:
	 be subject to a criminal records background investigation by the Kansas Bureau of Investigation; and
	• have my tax records released by the Kansas Department of Revenue.
	Such information will not be released to the general public, but will be made available for review at the appropriate time by:
	Myself;
	My appointing authority;
	• The Vice Chair of the Senate Confirmations Oversight Committee.
<u></u>	By signing the "Authorization and Certification" section (on page 8) of the Senate Confirmation Oversight Committee questionnaire, the Kansas Department of Revenue will be authorized to release my tax information and the Kansas Bureau of Investigation will be authorized to conduct a criminal background investigation on me and provide that information to the appropriate individuals.
	Signature Date 18/5/09
	Form, 08/08



Full Name:	Mark Richard Jorgenson					•
	(please include title and middle	name along with any names pr	eviously used)			
	•					
·		•				
Home Address:	10607 West 50th Terrace	· -	Shawnee,	KS	662 <u>0</u> 3	
	(Street Address)	•		(City,	State, Zip)	
Driver's License N	lumber: <u> </u>	_ Social Security Nu	imber: '			· · · · · · · · · · · · · · · · · · ·
Position to which A	Appointed KU Hospital	Authority			·	
Appointing Author	Governor of the St	ate of Kansas				
•		•			•	

^{*} Information on this page will not be made public but is used by the KBI and Department of Revenue.

-	(for Committee use only)	•	
	KBI Check: N/A	In-Process	Complete
-	DOR Check: N/A	In-Process	Complete

This Questionnaire is to be fully completed by each appointee appearing before the Senate Confirmation Oversight Committee (Committee) and returned to the Committee Chairman's Office. A meeting of the Committee to consider an appointee will not be scheduled until a completed questionnaire and other forms are received by the Chairman. Please answer each question completely to the best of your knowledge. Should a question not be applicable, please so state. Hand-written responses are strongly discouraged. If filling out this form electronically, "\sum " should be replaced with "X" by the appropriate response on the form. Please contact your appointing authority if you have questions when completing the form.

Full Name:	Mark Richard Jorgenson	
- Tun 14amo.	Mark Richard Jorgenson (please include title and middle name a	ong with any names previously used)
Position to which A	Appointed: KU Hospital Authority	7
	ity:	
	•	
Home Address:	10607 West 50th Terrace (Street Address)	Shawnee, KS 66203 (City, State, Zip)
Business Name:	U. S. Bank	
	•	Overland Park, KS 66212
	(Ctract Address)	(City, State, Lip)
Position Title:	President and CEO - Kansas Cit	y Market
		52-5150 Cell Phone:913-645-8278
		ddress: mark.r.jorgenson@usbank.com
Kansas resident?	☑Yes / ☐No Date of Birth: 7/24/	57 Place of Birth: <u>Hastings</u> , NE
Registered Voter?	Yes Party A	ffiliation: Republican
		Kansas Representative District: 18
Congressional Dist	nct: Kansas Senate District.	Kamas Koptosottau (o Dibatos.
Do you have the leg	gal right to live and work in the United	States? EYes / DNo

Please answer the following questions numbered 1 – 43. Each question <u>MUST BE ANSWERED ON THIS ORIGINAL FORM</u>. If the answers the question are provided on your resume, please state "See Resume" or if you supply additional attachment(s) with answers, please state "See Attachment(s)" on this form.

- 1. What is your educational background? See Biographical Summary
- 2. Describe your employment experience. Include any expertise related to the position to which you were appointed. See Biographical Summary

	·
3.	List any professional licenses that you have obtained and include the number for each license. N/A
industry in Ka	Why do you feel you are a good candidate for the position to which you have been appointed in my position Bank, I have had a great deal of exposure to issues confronting the healthcare ansas. I believe my past civic and charitable service has prepared me well for this what do you see as the purpose of mission of the role to which you have been appointed. position ber, my role would be to help facilitate and support the delivery of
6.	Ithcare to the citizens of Kansas and to encourage the proliferation of medical and Military Service: List rank, date and type of discharge from active service health sciences education and research.
7.	Government Experience: List any experience or association with local, state or federal government (exclusive of elective public office but including advisory, consulting, honorary, appointed or other part-time service or positions) and include dates of service. None
8.	Elective Public Office: List all elective public offices sought and/or held with dates of service. None
9.	Campaigns: Have you ever played a role or held a position in a political campaign? If so, please identify the candidate(s), the dates of the campaign and describe your involvement. No Yes Johnson County Research Triagle Fundraising Committee, Fall 2008
10. •	Honors and Awards: List all scholarships, fellowships, honorary degrees, honorary society memberships and any other special recognition for outstanding service or achievements. UNone See attached biography.
11.	Organization Affiliations: List all civic, cultural, educational, charitable, or work-related organizations that you have been associated with in the past ten years. Include any position held in the organization and the dates of service. None See attached biography.
12.	Organization Restrictions: To your knowledge, is any organization listed above restricted on the basis of race, color, religion, sex, national origin, disability, marital status or veteran status? If so, please describe.
13.	Issues: Have you ever been publicly identified, in person or by organizational membership, with a particularly controversial national or local issue? If so, please describe. ☑No ☐Yes
14.	Submission of Views: Have you ever submitted oral or written views to any governmental authority, whether executive or legislative, or to the news media on any particularly controversial issue other than in an official governmental capacity? If so, please describe. Ano Dyes
15.	Associations: Have you ever had any association with any person, group or business venture that could be used, even unfairly, to impugn or attack your character and qualifications for the position to which you seek to be appointed? If so, please describe. No □Yes

- Opposition: Do you know of any person or group who might take overt or covert steps to attack, even unfairly, your appointment? If so, please identify and explain the basis for the potential attack. 図No □Yes
- Miscellaneous: List any factors, other than the information provided above, which particularly qualifies you or is relevant to the position to which you are seeking appointment? Include any special skills. None other than the skills and talents perhaps afforded to me by the track record of work and service described in the attached biographical summary.
- Relationship to Governmental Employees: Are you or your spouse or other close family members related to any state governmental official or employee? If so, please provide details.

 No Dyes
- Compensation: During the past five years, have you or your spouse or other close family members received any compensation or been involved in any financial transaction with the State of Kansas?

 If so, please explain.

 ☑No □Yes
- Business Relationships: Describe any business relationship, dealing or financial transaction which you have had during the last five years, whether for yourself, on behalf of a client or acting as an agent, which you believe may constitute an appearance of impropriety or result in a potential conflict of interest in the position to which you want to be appointed. If none, please so state.
- Transactions with Officials: During the past five years, have you or your spouse or other close family members received any compensation or been involved in any financial transaction with any state government official? If so, please explain.

 No Tyes
- Spouse or Other Family Members: If the nature of employment for your spouse or other close family member is related in any way to the position to which you have been appointed, please indicate the employer, the position and the length of time it has been held. If not, please so state.

 No Tyes
- Lobbying Activities: Describe any lobbying activity during the past ten years in which you and/or your spouse have engaged for the purpose of influencing the passage, defeat or modification of any legislative or administrative action. Lobbying activity includes any activity performed as an individual or agent of another individual, or of any organization that involves direct communication with an official in the executive branch of state government or any official of the legislative branch. If none, please so state. I have lobbied once to Kansas Legislators on behalf of the Civic None Council of Greater Kansas City in support of PK-12 education.
- Regulated Activities: Describe any interest that you, your spouse or other close family member may have (whether as an officer, owner, director, trustee, or partner) in any corporation, firm, partnership or other business enterprise and any non-profit organization or other institution that is regulated by or receives direct financial benefits from any department or agency of the State of Kansas. If none, please so state.

- Other: Please describe any other matter in which you are involved that is or may be incompatible or in conflict with the discharge of the duties of the position to which you have been appointed or which may impair or tend to impair your independence of judgment or action in the performance of the duties of that position. If none, please so state.
- Conflict of Interest: How would you resolve any potential conflicts of interest that, while maybe unforeseen at this point in time, could arise? I would abstain from any vote that may be construed of conduct.

 Citations: Have you ever been cited for a breach of ethics for unprofessional conduct, or been named in a complaint to any court, administrative agency, professional association, disciplinary committee, or other professional group? If so, please provide details.

 No Tyes
 - Convictions: Have you ever been convicted of or entered a plea of guilty or nolo contendere or forfeited collateral for any criminal violation other than a traffic infraction? (Please include any offenses of driving under the influence, operating while impaired, reckless driving, or the equivalent offenses in other states.) If so, please explain.

 No DYes
 - 29. U.S. Military Convictions: Have you ever been convicted by any military court? If so, please provide details.

 ☑No □Yes
 - Imprisonment: Have you ever been imprisoned, been on probation or been on parole? If so, please provide details.
 ☒No ☐Yes
 - Agency Proceedings/Civil Litigation: Are you presently, or have you ever been, a party in interest in any administrative agency proceeding or civil litigation that is related in any way to the position to which you are seeking appointment? If so, please provide details.

 Ano Tyes
 - Agency Proceedings and Civil Litigation of Affiliates and Family: a.) Is your spouse or other close family member currently, or ever been, a party in interest in any administrative agency proceeding or civil litigation that is related in any way to the position to which you are seeking appointment? If so, please provide details.
 - b.) Has any business in which you, your spouse, close family member or business associate are or were an officer, director or partner been a party to any administrative agency proceeding or civil litigation relevant to the position to which you are seeking appointment? If so, please provide details. (With respect to this question, you need only consider proceedings and litigation that occurred while you, your spouse, close family member, or business associate were an officer of that business.)

 NO TYES

33.	Other Litigation: a.) Other than the litigation described in question 32, have you or any business in which you are or were an officer, director, or partner been a plaintiff or a defendant in a civil lawsuit? If so, please describe, During my tenure as Chairman of Kansas Venture Capital, Inc. lawsuit? If so, please describe was sued by former employees for wrongful discharge. Al No Eyes charges were dismissed and Kansas Venture Capital, Inc. was exponerated. b.) Are you aware of any pending or anticipated litigation against you or any business in which you are an officer, director, or partner? If so, please describe.
34.	Drivers License: Has your driver's license ever been suspended or revoked? If so, please describe. No OYes
35.	Parking Tickets: Do you have outstanding parking tickets from any jurisdiction that have remained unpaid for more than 60 days? If so, please explain. ☑No ☐Yes
36.	Security Clearance Denial: Have you ever been denied a military or other governmental clearance? If so, please explain. No Yes
37.	Firings: a.) During the past ten years, have you been fired from a job for any reason? If so, please explain. No □Yes
	 b.) During the past ten years, have you quit a job after being told that you would be fired? If so, please explain. Elno □Yes c.) During the past ten years, did you leave a job by mutual agreement because of specific problems? If so, please explain. ☑No □Yes
38.	Alimony and Child Support: Are you now, or have you ever been, delinquent in the payment of alimony or child support? If so, please explain No Yes
39.	Consumption of Alcohol: Have you ever or are you currently abusing alcohol? If so, please explain. ☑No □Yes
40.	Controlled Substances: Have you ever or are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If so, please explain. No Tyes
41.	Physical Examination: If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test? No AYes

- Governmental Delinquencies: Are you delinquent in the payment of any obligation owed to the federal or state government or any political or taxing subdivision or any instrumentality thereof? (Include delinquencies in the payment of: Income, property, or other taxes; exactions, fees or special assessments; loans, including any defaults, on or under loans which are or were made by, guaranteed, insured or subsidized by any unit of government or instrumentality thereof; overpayment of benefits; required payments into or under governmental programs; payments under a diversion arrangement or other repayment schedule.) If applicable, please state whether such delinquency is under formal appeal.
- Other: Please provide any additional information, favorable or unfavorable, which you feel should be considered in connection with your appointment. If none, please so state.

Please include resume and completed Statement of Substantial Interest not more than twelve months old.

REFERENCES

	Tr. 1 0 c
Name: <u>Lawrence C. Gates</u>	Knows you how?: Serves on our Bank Advisory Board
Address: 9842 Rosewood	Overland Park, KS 66207
Home Phone: 913-381-9080	(City, State, Zip) Business Phone: 913-661-0222
Name: Chancellor Robert Hemenway	I have served on numerous boards Knows you how?: with him in the past.
Address:1532 Lilac Lane	
785-841-0989	785–864– ^(Gity, State, Zip) Business Phone:
	a la contrar de Mantaga Mantaga Ca
Name: R. A. Edwards c/o First National Bank of Box 913 Address:	Knows you how?: Served together on Kansas Venture Ca F Hutchison Inc. Board Hutchison, KS 67504-0913
	620–694–2224 Business Phone:
Name: Sandra A.J. Lawrence	Knows you how? Serves on our Bank Advisory Board
Address: 2809 West 117th Street	Leawood, KS 66211
913-339-9024	(City, State, Zip) 816-234-3655

Business Phone:

Home Phone:

AUTHORIZATION AND CERTIFICATION:

The facts set forth in my application are true and complete. False statements, answers, or omissions on this application shall be sufficient cause for nonconsideration or for dismissal after appointment or employment. I also recognize that my selection is based on receipt of satisfactory information from former employers and references, and upon my ability to perform the essential elements, with or without reasonable accommodations, for the position for which I am applying. I herein authorize investigation, without liability, of the information supplied by me in this application for employment or appointment including academic, occupational, health, law enforcement, and government records. I'also authorize listed employers and references, without liability, to make full response to any inquiries in connection with this application for appointment or employment. I understand and agree that the terms, conditions, compensation, benefits, hours, schedule, and duration of my appointment or employment may be determined, changed, or modified from time to time at the will of the appointing authority or designee without limitation or condition. I FURTHER CERTIFY THAT I HAVE READ THE FOREGOING PARAGRAPH AND KNOWINGLY MAKE THIS AUTHORIZATION BY SETTING FORTH MY SIGNATURE.

KNOWINGLY MAKE THIS AUTHORIZATION BY SETTING FORTH MY SIGNATURE.
I understand that if I am required to be registered, licensed, or certified by federal or state law or regulation for the position I seek, I will notify the appointing authority immediately if any investigation, limitation, or cancellation of my registration, licensure, or certification occurs. If any investigation, probation, limitation, or cancellation occurs, I
understand that my failure to notify my appointing authority as described above will result in the termination of my appointment or employment
Signature Date 4/2409



Sec. of St. bar code





KANSAS GOVERNMENTAL ETHICS COMMISSION

STATEMENT OF SUBSTANTIAL INTERESTS FORM

INST	<u>RUCTIONS.</u> This statement (pages so by law. Any individual who int statement, is subject to prosecution	entionally fails to file as required by	ndividuals who are required to do law, or intentionally files a false
	Please read the "Guide" and Defini completing sections "C" through "Commission office at 109 West 9th,	tion" section provided with this form G". If you have questions or wish as Topeka, KS or call 785-296-4219.	n for additional assistance in sistance, please contact the
A.	DENTIFICATION:	PLEASE TYPE OR PRINT	
	JOREZNEAN	MARIL	R
	Last Name	First Name	MI
	MARY C. JORGENSON Spouse's Name		
	Spouse's Name		•
	10507 W. JUTZ TERRACK		
	Number & Street Name, Apartment	Number, Rural Route, or P.O. Box	Number
	SHMUNGE. KS 66203 City, State, Zip Code		
	City, State, Zip Code		
	913-268-6414		1/2-652-1750
	Home Phone Number (include area	code) Business	Phone Number (include area code)
B.		BE FILED BECAUSE YOU ARE	<u>:</u>
	(check one or more	e <i>of the following)</i> Fovernor, Lt. Governor, Attorney Ge	neral. Commissioner of Insurance.
	State Treasurer, Secretar	ry of State, State Senator, State Repr	esentative, Member of State Board of
	Education, or District A: 2. Appointed Member of a	ttomey); State Board, Council, Commission o	or Authority;
	3. Appointed State Position	n is Subject to Senate Confirmation;	3,
	4. Employee of a State Age 5. General Counsel for State		
	6. Candidate for State Office	ce;	
	7. Other (Contractor / Men	iber of Compact).	
	ame of Agency, Board, University or	Floated Bogitian (Van may use abbr	existions but not acronyme)
LIST IN		. ^	^
	[INIVERSITY OF KANGAS H	applicable (May use acronyms)	Sando Member Position
*	Agency Division if The last four digits of your social s name on the computer list. This in	ecurity number will aid in identifyir	
, -			Rev. 3/2006
11	2110		101. 5/2000

C. OWNERSHIP INTERESTS: List any corporation, partnership, proprietorship, trust, joint venture and every other business interest, including land used for income, and specific stocks, mutual funds or retirement accounts in which either you or your spouse has owned within the preceding 12 months a legal or equitable

interest exceeding \$5,000 or 5%, whichever is less. If you or your spouse own more than 5% of a business, you must disclose the percentage held. Please insert additional page if necessary to complete this

If you have nothing to report in Section "C", check here ____ Sec A Hachment

BUSINESS NAME AND ADD	PRESS	TYPE OF BUSINESS	DESCRIPTION OF INTERESTS HELD	PERCENT OF OWNERSHIP INTERESTS	HELD BY WHOM
1.					
2.					
3.		<u>1.17</u>	 1		
4.	1720				
5.				7. %	
6.		-	-		
7.					
8.					-
9.					
10.		·			

D. <u>GIFTS OR HONORARIA:</u> List any person or business from whom you or your spouse either individually or collectively, have received gifts or honoraria having an aggregate value of \$500 or more in the preceding 12 months.

If you have nothing to report in Section "D", check here <u>K</u>.

NAME OF PERSON OR BUSINESS FROM WHOM GIFT RECEIVED		ADDRESS	RECEIVED BY:
1.			
2.	.		
3.			

- E. <u>RECEIPT OF COMPENSATION</u>: List all places of employment in the last calendar year, and any other businesses from which you or your spouse received \$2,000 or more in compensation (salary, thing of value, or economic benefit conferred on in return for services rendered, or to be rendered), which was reportable as taxable income on your federal income tax returns.
 - 1. YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR. IF SAME AS SECTION "B", CHECK HERE ____. If you have nothing to report in Section "E"1, check here ____.

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS	
1. US f	2ANYL	9900 W. 87th ST. OP.125	BANK/FALANGEN TOLSTATE	/ موا
2.		46512	/ ' '	

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
ι.	·		
2.			

F. OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position of officer, director, associate, partner or proprietor at the time of filing, irrespective of the amount of compensation received for holding such position. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "F", check here _____.

BUSINESS NAME AND ADDRESS	POSITION HELD	HELD BY WHOM
1. PRANSUS NEWTURG CAPITAL, INC. 11300 TOMAHAWIR CORRIC PARKING STE 250 LEAHOUD KS 662	LORRO MYMBER	Mrick Jorganism
2. NANSAS CITY ARCA ACUSERPMENT COUNCIL 2500 COMMERCE TOWER 911 MAIN 14C,MD 64/105-20:19	CO-CNAIR OF COARD	t _t
3. CANIC COUNCIL OF GROATER HANDS COTY 1) CO MAIN STE 230 125, MO 64/05	VICE CHAIR OF ROARD	1.
4. GREATER PLANTERS CITY CHAMPER OF COMMITTEES 2600 COMMOTICE TOWER 911 Main KC, MD CC1105	Bonno Manber	/1
5. MIDINGET RESERVELY TASTITUTE 425 VOLKER BLYD. KI, MC 64110	Trustes	11
6. PRESAVIBRIMEN WOMEN PCUSA 100 MITHERSPRON COULSVILLE, KY	BOIRD MEMBER	MARY VORGALSON
7. HOART OF AMERICA COUNCIL REV SCHUTT OF AMERICA 10210 HOLDES RA. KE, MO 64131	BEARED MENUSER	MARIC JORGENSON
8.		

If you have nothing to report in Section "G", check here X.

	NAME OF CLIENT / CUSTOMER	ADDRESS	RECEIVED BY
1.			
2.			
3.			
4.			
5.			
6.		· · · · · · · · · · · · · · · · · · ·	
7.			
8.			
9.			
10.	·		
11.			
12.			
13.			

H.	DECLARATION:
	A declare that this statement of substantial interests (including any accompanying pages and statements) has been examined by me and to the best of my knowledge and belief is true, correct and complete statement of all of my substantial interests and other matters required by law. I understand that the intentional failure to file this statement as required by law or intentionally filing a false statement is a class B misdemeanor.
iλ	Class
111	Date Signature of Person Making Statement
	R OF ADDITIONAL PAGES

Return your completed statement to the Secretary of State, Elections Division, Memorial Hall, First Floor, 120 SW 10th, Topeka, Kansas 66612-1594.



Attachment Sheet To Statement of Substantial Interest Question "C" OWENERSHIP INTERESTS (Mark R. Jorgenson)

Name:	Type:	Held by:
Vanguard	Mutual Fund	Mark Jorgenson/Mary Jorgenson
Vanguard	Mutual Fund	Mark Jorgenson/Mary Jorgenson Van
Vanguard	Mutual Fund	Mark Jorgenson/Mary Jorgenson
Ameritrade	Stock Account	Mark Jorgenson
Buffalo Funds	Mutual Fund	Mark Jorgenson/Mary Jorgenson
Morgan Stanley		
Smith Barney	Stock Account	Mark Jorgenson
Stable Asset Fund	401K	Mark Jorgenson
First American .		
Intermediate Govt. Bond	401K	Mark Jorgenson
S-Core Bond	401K	Mark Jorgenson
PIMCO Total Return	401K	Mark Jorgenson
T.Rowe Price Retirement		
2010	401K	Mark Jorgenson
First American Large Cap	401K	Mark Jorgenson
Value Fund	401K	Mark Jorgenson
Hotchikis and Wiley		
Large Cap	401K	Mark Jorgenson
Vanguard Institutional		
Index Plus	401K	Mark Jorgenson

Attachment Sheet To Statement of Substantial Interest Question "C" OWENERSHIP INTERESTS (Mark R. Jorgenson)

Name:	Type:	Held by:
First American Large Cap Opportunities Fund	401K	Mark Jorgenson
TCW Select Equity I	401K	Mark Jorgenson
First Am. American Mid Cap Value Fund	401K	Mark Jorgenson
First American Mid Cap Growth Opportunities Fund	401K	Mark Jorgenson
SSgA Active Mid Cap Series A	401K	Mark Jorgenson
First American Small Cap Value Fund	401K	Mark Jorgenson
Dreyfus/Boston Co. Small Val I	401K	Mark Jorgenson
First American Small Cap Select Fund	401K	Mark Jorgenson
First American Small Cap Growth Opportunities Fund	401K	Mark Jorgenson
SSgA International Alpha Select	401K	Mark Jorgenson
ESOP Stock Fund	4 ₀₁ K	Mark Jorgenson

(for Committee use only) KBI Check: N/A	In-Process	Complete
DOR Check: N/A	In-Process	Complete

This Questionnaire is to be fully completed by each appointee appearing before the Senate Confirmation Oversight Committee (Committee) and returned to the Committee Chairman's Office. A meeting of the Committee to consider an appointee will not be scheduled until a completed questionnaire and other forms are received by the Chairman. Please answer each question completely to the best of your knowledge. Should a question not be applicable, please so state. Hand-written responses are strongly discouraged. If filling out this form electronically, "\sum " should be replaced with "X" by the appropriate response on the form. Please contact your appointing authority if you have questions when completing the form.

Full Name:	Mark Richard Jorgenson	•
-	(please include title and middle name ale Appointed: KU Hospital Authority	ong with any names previously used)
	Covernor of the State of	
	ity:	
Home Address:	10607 West 50th Terrace (Street Address)	Shawnee, KS 66203 (City, State, Zip)
Business Name:	U. S. Bank	
Business Address:	9900 West 87th Street	Overland Park, KS 66212
Position Title:	(Street Address) President and CEO - Kansas Cit	y Market
Home Phone: <u>913-</u>	-268-6414 Business Phone: 913-6	52-5150 Cell Phone:913-645-8278
Fax Number: 913-	-652-5111 E-Mail A	ddress: mark.r.jorgenson@usbank.com
Kansas resident?	☐Yes / ☐No Date of Birth: 7/24/	57 Place of Birth: <u>Hastings, NE</u>
Registered Voter?	Yes - Party A	ffiliation: Republican
Congressional Dist	rict: Kansas Senate District:	Kansas Representative District: 18
	gal right to live and work in the United S	

Please answer the following questions numbered 1-43. Each question <u>MUST BE ANSWERED ON THIS ORIGINAL FORM</u>. If the answers the question are provided on your resume, please state "See Resume" or if you supply additional attachment(s) with answers, please state "See Attachment(s)" on this form.

- 1. What is your educational background? See Biographical Summary
- 2. Describe your employment experience. Include any expertise related to the position to which you were appointed. See Biographical Summary

- 3. List any professional licenses that you have obtained and include the number for each license. N/A
- Why do you feel you are a good candidate for the position to which you have been appointed n my positi as CEO at the Bank, I have had a great deal of exposure to issues confronting the healthcare industry in Kansas. I believe my past civic and charitable service has prepared me well for this what do you see as the purpose of mission of the role to which you have been appointed position. It is a board member, my role would be to help facilitate and support the delivery of th
 - 7. Government Experience: List any experience or association with local, state or federal government (exclusive of elective public office but including advisory, consulting, honorary, appointed or other part-time service or positions) and include dates of service.
 - 8. Elective Public Office: List all elective public offices sought and/or held with dates of service.

 None
 - Ozampaigns: Have you ever played a role or held a position in a political campaign? If so, please identify the candidate(s), the dates of the campaign and describe your involvement.

 □No ♥Yes Johnson County Research Triagle Fundraising Committee, Fall 2008
 - Honors and Awards: List all scholarships, fellowships, honorary degrees, honorary society memberships and any other special recognition for outstanding service or achievements.

 None See attached biography.
 - Organization Affiliations: List all civic, cultural, educational, charitable, or work-related organizations that you have been associated with in the past ten years. Include any position held in the organization and the dates of service.

 None See attached biography.
 - Organization Restrictions: To your knowledge, is any organization listed above restricted on the basis of race, color, religion, sex, national origin, disability, marital status or veteran status? If so, please describe.

 ☐ No □ Yes
 - Issues: Have you ever been publicly identified, in person or by organizational membership, with a particularly controversial national or local issue? If so, please describe.
 ☒No ☐Yes
 - Submission of Views: Have you ever submitted oral or written views to any governmental authority, whether executive or legislative, or to the news media on any particularly controversial issue other than in an official governmental capacity? If so, please describe.

 No Tyes
 - Associations: Have you ever had any association with any person, group or business venture that could be used, even unfairly, to impugn or attack your character and qualifications for the position to which you seek to be appointed? If so, please describe.

 No DYes

- Opposition: Do you know of any person or group who might take overt or covert steps to attack, even unfairly, your appointment? If so, please identify and explain the basis for the potential attack. 図No □Yes
- Miscellaneous: List any factors, other than the information provided above, which particularly qualifies you or is relevant to the position to which you are seeking appointment? Include any special skills. None other than the skills and talents perhaps afforded to me by the track record of work and service described in the attached biographical summary.
- Relationship to Governmental Employees: Are you or your spouse or other close family members related to any state governmental official or employee? If so, please provide details.

 No Tyes
- Compensation: During the past five years, have you or your spouse or other close family members received any compensation or been involved in any financial transaction with the State of Kansas?

 If so, please explain.

 ☑No □Yes
- Business Relationships: Describe any business relationship, dealing or financial transaction which you have had during the last five years, whether for yourself, on behalf of a client or acting as an agent, which you believe may constitute an appearance of impropriety or result in a potential conflict of interest in the position to which you want to be appointed. If none, please so state.
- Transactions with Officials: During the past five years, have you or your spouse or other close family members received any compensation or been involved in any financial transaction with any state government official? If so, please explain.

 No Tyes
- Spouse or Other Family Members: If the nature of employment for your spouse or other close family member is related in any way to the position to which you have been appointed, please indicate the employer, the position and the length of time it has been held. If not, please so state.

 No
 Yes
- Lobbying Activities: Describe any lobbying activity during the past ten years in which you and/or your spouse have engaged for the purpose of influencing the passage, defeat or modification of any legislative or administrative action. Lobbying activity includes any activity performed as an individual or agent of another individual, or of any organization that involves direct communication with an official in the executive branch of state government or any official of the legislative branch. If none, please so state. I have lobbied once to Kansas Legislators on behalf of the Civic None Council of Greater Kansas City in support of PK-12 education.
- Regulated Activities: Describe any interest that you, your spouse or other close family member may have (whether as an officer, owner, director, trustee, or partner) in any corporation, firm, partnership or other business enterprise and any non-profit organization or other institution that is regulated by or receives direct financial benefits from any department or agency of the State of Kansas. If none, please so state.

	25.	Other: Please describe any other matter in which you are involved that is or may be incompatible or in conflict with the discharge of the duties of the position to which you have been appointed or which may impair or tend to impair your independence of judgment or action in the performance of the duties of that position. If none, please so state.
		None
	26.	Conflict of Interest: How would you resolve any potential conflicts of interest that, while maybe
	a conflict	unforeseen at this point in time, could arise? I would abstain from any vote that may be construed interest and I would expect to attest annually to compliance with an ethics code
οİ	conduct. 27.	Citations: Have you ever been cited for a breach of ethics for unprofessional conduct, or been named in a complaint to any court, administrative agency, professional association, disciplinary committee, or other professional group? If so, please provide details. No Tyes
	28.	Convictions: Have you ever been convicted of or entered a plea of guilty or nolo contendere or forfeited collateral for any criminal violation other than a traffic infraction? (Please include any offenses of driving under the influence, operating while impaired, reckless driving, or the equivalent offenses in other states.) If so, please explain. No \square Yes
	29.	U.S. Military Convictions: Have you ever been convicted by any military court? If so, please provide details. ☑No □Yes
	30.	Imprisonment: Have you ever been imprisoned, been on probation or been on parole? If so, please provide details. ☑No ☐Yes
	31.	Agency Proceedings/Civil Litigation: Are you presently, or have you ever been, a party in interest in any administrative agency proceeding or civil litigation that is related in any way to the position to which you are seeking appointment? If so, please provide details. No DYes
	32.	Agency Proceedings and Civil Litigation of Affiliates and Family: a.) Is your spouse or other close family member currently, or ever been, a party in interest in any administrative agency proceeding or civil litigation that is related in any way to the position to which you are seeking appointment? If so, please provide details. No Tyes
	-	b.) Has any business in which you, your spouse, close family member or business associate are or were an officer, director or partner been a party to any administrative agency proceeding or civil litigation relevant to the position to which you are seeking appointment? If so, please provide details. (With respect to this question, you need only consider proceedings and litigation that occurred while you, your spouse, close family member, or business associate were an officer of that business.) No OYes

which you are or were an officer, director, or partner been a plantiti or a detendant in a control lawsuit? If so, plasse describe During my termine as Chairman of Kanasa Venture Capital, Inc. No		
Elno □Yes Parking Tickets: Do you have outstanding parking tickets from any jurisdiction that have remained unpaid for more than 60 days? If so, please explain. ②No □Yes Security Clearance Denial: Have you ever been denied a military or other governmental clearance? If so, please explain. ②No □Yes Firings: a.) During the past ten years, have you been fired from a job for any reason? If so, please explain. ②No □Yes b.) During the past ten years, have you quit a job after being told that you would be fired? If so, please explain. ②No □Yes c.) During the past ten years, did you leave a job by mutual agreement because of specific problems? If so, please explain. ②No □Yes Alimony and Child Support: Are you now, or have you ever been, delinquent in the payment of alimony or child support? If so, please explain. ②No □Yes Consumption of Alcohol: Have you ever or are you currently abusing alcohol? If so, please explain. ②No □Yes Controlled Substances: Have you ever or are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If so, please explain. ③No □Yes Physical Examination: If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test?	33.	which you are or were an officer, director, or partner been a plaintin of a defendant in a civil lawsuit? If so, please describe During my tenure as Chairman of Kansas Venture Capital, Inc. lawsuit? If so, please describe organization was sued by former employees for wrongful discharge. All No Yes charges were dismissed and Kansas Venture Capital, Inc. was exponerated. b.) Are you aware of any pending or anticipated litigation against you or any business in which you are an officer, director, or partner? If so, please describe.
remained unpaid for more than 60 days? If so, please explain. No Yes 36. Security Clearance Denial: Have you ever been denied a military or other governmental clearance? If so, please explain. No Yes 37. Firings: a.) During the past ten years, have you been fired from a job for any reason? If so, please explain. No Yes b.) During the past ten years, have you quit a job after being told that you would be fired? If so, please explain. No Yes c.) During the past ten years, did you leave a job by mutual agreement because of specific problems? If so, please explain. No Yes 38. Alimony and Child Support: Are you now, or have you ever been, delinquent in the payment of alimony or child support? If so, please explain No Yes 39. Consumption of Alcohol: Have you ever or are you currently abusing alcohol? If so, please explain. No Yes 40. Controlled Substances: Have you ever or are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If so, please explain. No Yes	34.	
clearance? If so, please explain. ElNo □Yes 37. Firings: a.) During the past ten years, have you been fired from a job for any reason? If so, please explain. ElNo □Yes b.) During the past ten years, have you quit a job after being told that you would be fired? If so, please explain. ElNo □Yes c.) During the past ten years, did you leave a job by mutual agreement because of specific problems? If so, please explain. ElNo □Yes 38. Alimony and Child Support: Are you now, or have you ever been, delinquent in the payment of alimony or child support? If so, please explain. ElNo □Yes 39. Consumption of Alcohol: Have you ever or are you currently abusing alcohol? If so, please explain. ElNo □Yes 40. Controlled Substances: Have you ever or are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If so, please explain. ElNo □Yes 41. Physical Examination: If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test?	35.	remained unpaid for more than 60 days? If so, please explain.
explain. ☑No ☐Yes b.) During the past ten years, have you quit a job after being told that you would be fired? If so, please explain. ⑤No ☐Yes c.) During the past ten years, did you leave a job by mutual agreement because of specific problems? If so, please explain. ☑No ☐Yes 38. Alimony and Child Support: Are you now, or have you ever been, delinquent in the payment of alimony or child support? If so, please explain ☑No ☐Yes 39. Consumption of Alcohol: Have you ever or are you currently abusing alcohol? If so, please explain. ☑No ☐Yes 40. Controlled Substances: Have you ever or are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If so, please explain. ☑No ☐Yes 41. Physical Examination: If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test?	36.	clearance? If so, please explain. No DYes
please explain. ENO □Yes c.) During the past ten years, did you leave a job by mutual agreement because of specific problems? If so, please explain. □No □Yes 38. Alimony and Child Support: Are you now, or have you ever been, delinquent in the payment of alimony or child support? If so, please explain □No □Yes 39. Consumption of Alcohol: Have you ever or are you currently abusing alcohol? If so, please explain. □No □Yes 40. Controlled Substances: Have you ever or are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If so, please explain. □No □Yes 41. Physical Examination: If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test?	37.	explain. ☑No □Yes
problems? If so, please explain. ☑No ☐Yes Alimony and Child Support: Are you now, or have you ever been, delinquent in the payment of alimony or child support? If so, please explain ☑No ☐Yes Consumption of Alcohol: Have you ever or are you currently abusing alcohol? If so, please explain. ☑No ☐Yes Controlled Substances: Have you ever or are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If so, please explain. ☑No ☐Yes Physical Examination: If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test?	•	please explain.
alimony or child support? If so, please explain No □Yes Consumption of Alcohol: Have you ever or are you currently abusing alcohol? If so, please explain. No □Yes Controlled Substances: Have you ever or are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If so, please explain. No □Yes Physical Examination: If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test?		problems? If so, please explain.
explain. No Tyes Controlled Substances: Have you ever or are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If so, please explain. No Tyes Physical Examination: If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test?	38.	alimony or child support? If so, please explain
controlled substance or abusing the use of a prescribed controlled substance? If so, please explain. No Tyes Physical Examination: If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test?	39.	explain.
you be willing to take a physical examination, which may include a drug test?	40.	controlled substance or abusing the use of a prescribed controlled substance? If so, please explain.
	41.	you be willing to take a physical examination, which may include a drug test?

- Governmental Delinquencies: Are you delinquent in the payment of any obligation owed to the 42. federal or state government or any political or taxing subdivision or any instrumentality thereof? (Include delinquencies in the payment of: Income, property, or other taxes; exactions, fees or special assessments; loans, including any defaults, on or under loans which are or were made by, guaranteed, insured or subsidized by any unit of government or instrumentality thereof; overpayment of benefits; required payments into or under governmental programs; payments under a diversion arrangement or other repayment schedule.) If applicable, please state whether such delinquency is under formal appeal. ⊠No □Yes
- Other: Please provide any additional information, favorable or unfavorable, which you feel should 43. be considered in connection with your appointment. If none, please so state. None

Please include resume and completed Statement of Substantial Interest not more than twelve months old.

REFERENCES

Name: <u>Lawrence C. Gates</u>	Knows you how?: Serves on our Bank Advisory Board
Address: 9842 Rosewood	Overland Park, KS 66207
Home Phone: 913-381-9080	(City, State, Zip) Business Phone: 913–661–0222
Name: Chancellor Robert Hemenway	I have served on numerous boardsKnows you how?:_with him in the past
Address: 1532 Lilac Lane	Lawrence, KS 66044
785-841-0989	785–864–3 ^{(Gity} , I ^{State, Zip)} Business Phone:
Name: R. A. Edwards c/o First National Bank of Box 913	Knows you how?: Served together on Kansas Venture (Hutchison Inc. Board Hutchison, KS 67504-0913
	620–694–2224 Business Phone:
Name:Sandra A.J. Lawrence	_ Knows you how?: Serves on our Bank Advisory Board
Address: 2809 West 117th Street	Leawood, KS 66211
913-339-9024 Home Phone:	(Ciry, State, Zip) 816–234–3655 Business Phone:

Home Phone:

AUTHORIZATION AND CERTIFICATION:

The facts set forth in my application are true and complete. False statements, answers, or omissions on this application shall be sufficient cause for nonconsideration or for dismissal after appointment or employment. I also recognize that my selection is based on receipt of satisfactory information from former employers and references, and upon my ability to perform the essential elements, with or without reasonable accommodations, for the position for which I am applying. I herein authorize investigation, without liability, of the information supplied by me in this application for employment or appointment including academic, occupational, health, law enforcement, and government records. I also authorize listed employers and references, without liability, to make full response to any inquiries in connection with this application for appointment or employment. I understand and agree that the terms, conditions, compensation, benefits, hours, schedule, and duration of my appointment or employment may be determined, changed, or modified from time to time at the will of the appointing authority or designee without limitation or condition. I FURTHER CERTIFY THAT I HAVE READ THE FOREGOING PARAGRAPH AND KNOWINGLY MAKE THIS AUTHORIZATION BY SETTING FORTH MY SIGNATURE.

understand that if I am required to be registered, licensed, or certified by federal or state law or regulation for the
osition I seek, I will notify the appointing authority immediately if any investigation, limitation, or cancellation of
y registration, licensure, or certification occurs. If any investigation, probation, limitation, or cancellation occurs, I
iderstand that my failure to potify my appointing authority as described above will result in the termination of my
pointment or employment
//////////////////////////////////////
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Sec. of St. bar code

STATE OF KANSAS



KANSAS GOVERNMENTAL ETHICS COMMISSION

STATEMENT OF SUBSTANTIAL INTERESTS FORM

INSTRUCTIONS. This statement (pages 1 through 4) must be completed by individuals who are required to do so by law. Any individual who intentionally fails to file as required by law, or intentionally files a false statement, is subject to prosecution for a class B misdemeanor.

IDENTIFICATION:	PLEASE TYPE OR PRINT	· R
Jarsenson Last Name	First Name	· M
MARY C. JORGEN	-40)	
Spouse's Name	0070	
MENT W. SOIT TERR	5CV	
Number & Street Name, Apar	ACC tment Number, Rural Route, or P.O. Box I	Number
CLIMINARY KS 6624	07	
SHAULAGE. KS 6624 City, State, Zip Code	''	
913-268-6414	9	12-652-1750
Home Phone Number (include	e area code) Business' l	/2-652-5750 Phone Number (include area code)
	DIO DE FILLED DECAUGE TOU AND	<u>.</u>
(check one of Check one of Chec	or of a State Board, Council, Commission of a State Board, Council, Commission of the Subject to Senate Confirmation; the Agency or University; for State Office;	neral, Commissioner of Insurance, esentative, Member of State Board o
(check one of Check one of Chec	r more of the following) rial (Governor, Lt. Governor, Attorney Generatory of State, State Senator, State Represent Attorney); r of a State Board, Council, Commission of a State Board, Council, Commission of a State Board, Council, Commission of a State Office to Senate Confirmation; the Agency or University; or State Office; de Office; Member of Compact).	neral, Commissioner of Insurance, esentative, Member of State Board of Authority;
(check one of Check one of Chec	r more of the following) stal (Governor, Lt. Governor, Attorney Gerecretary of State, State Senator, State Represent Attorney); or of a State Board, Council, Commission of State Board, Council, Commission of State State Senate Confirmation; the Agency or University; or State Office; office; Member of Compact).	neral, Commissioner of Insurance, esentative, Member of State Board of Authority; eviations but not acronyms) Adnao Member
Check one of	r more of the following) rial (Governor, Lt. Governor, Attorney Generatory of State, State Senator, State Represent Attorney); r of a State Board, Council, Commission of a State Board, Council, Commission of a State Board, Council, Commission of a State Office to Senate Confirmation; the Agency or University; or State Office; de Office; Member of Compact).	neral, Commissioner of Insurance esentative, Member of State Board r Authority; eviations but not acronyms) Single Manger Position

2-31

C. <u>OWNERSHIP INTERESTS</u>: List any corporation, partnership, proprietorship, trust, joint venture and every other business interest, including land used for income, and specific stocks, mutual funds or retirement accounts in which either you or your spouse has owned within the preceding 12 months a legal or equitable interest exceeding \$5,000 or 5%, whichever is less. If you or your spouse own more than 5% of a business, you must disclose the percentage held. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "C", check here ___ Sec A Hachment

	,				
	BUSINESS NAME AND ADDRESS	TYPE OF BUSINESS	DESCRIPTION OF INTERESTS HELD	PERCENT OF OWNERSHIP INTERESTS	HELD BY WHOM
l.					
2.		·	·		
3.					
4.					
5.					
6.	· · · · · · · · · · · · · · · · · · ·		-		
7.					
8.				,	
9.			,		
10.			. 91 J		

D. <u>GIFTS OR HONORARIA</u>: List any person or business from whom you or your spouse either individually or collectively, have received gifts or honoraria having an aggregate value of \$500 or more in the preceding 12 months.

If you have nothing to report in Section "D", check here <u>\(\infty</u>.

	NAME OF PERSON OR BUSINESS FROM WHOM GIFT RECEIVED	ADDRESS	RECEIVED BY:
. 1.			
2.			
3 . /////	A CONTRACTOR OF THE SECOND STATE OF THE SECOND		

SSI	of:	
SSI	of:	

- E. <u>RECEIPT OF COMPENSATION</u>: List all places of employment in the last calendar year, and any other businesses from which you or your spouse received \$2,000 or more in compensation (salary, thing of value, or economic benefit conferred on in return for services rendered, or to be rendered), which was reportable as taxable income on your federal income tax returns.
 - 1. YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR. IF SAME AS SECTION "B", CHECK HERE ____.

 If you have nothing to report in Section "E"1, check here ____.

					ł
	NAME OF BUSINESS		ADDRESS	TYPE OF BUSINESS	
11/5	DANIE	9	1900 W. 87TL ST. OP. 125	BANK/FINANOW PASTAUT	150
2.	TC V Cro		(66×12)	/	

2. SPOUSE'S PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR.

If you have nothing to report in Section "E"2, check here X.

	name of business	. ADI	DRESS	TYPE OF BUSINESS
1.				
2.				

F. OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position of officer, director, associate, partner or proprietor at the time of filing, irrespective of the amount of compensation received for holding such position. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "F", check here _____.

BUSINESS NAME AND ADDRESS	POSITION HELD	HELD BY WHOM
1. PLANSAS HENTURE CAPITAL INC 11300 TOMAHAWIR CORCIC FARKINNY STE 250 (CHINDON KS 6621)	Done Munisa	MARK JORGERAN
2 NANSAS CITY AREA ACUSEMENT COUNCIL 2500 COMARCOST TOWER 911 MAIN 12C,MD 62/105-205/09	CO-CNAIR OF DOMED	t,
3. CHUIC COUNCIL OF GROATER KANGAS GITY 1200 MAIN STE. 230 12C, MO 64105	VICE CHAIR OF ROARD	<i>(</i>)
4. GRAFER PLANSAS CITY CHAMBER OF COMMITTEE	BORRO MOMBER	/1
2600 COMMERCE TOWER 911 MAIN KC, MD RCHOS 5. MIDINECT REFERENCE TASSITUTE 425 VOLKER BIND. KC, MC 64110	TAUSTER	, 1
6. PRESINTERIAL WOMEN PCUSA	DOKED MEMBER	Mary Torganson
100 WITHERSPOON [OURSVILLE, KY 7. HORRET OF AMERICA COUNTY, - RZY SCHIET OF AMERICA 10210 HOLMES RD. KE, M.C. 64131	BEARD MANSER	MARIC JORGENOCES
8.		

If you have nothing to report in Section "G", check here X.

	NAME OF CLIENT / CUSTOMER	ADDRESS	RECEIVED BY
1.			
2.			
3.		,	
4.			
5.			
6.		·	·
7.			
8.			
9.			
10.			1
11.			
12.		·	
13.			

H. **DECLARATION:**

_____, declare that this statement of substantial interests (including any accompanying pages and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of all of my substantial interests and other matters required by law. I understand that the intentional failure to file this statement as required by law or intentionally filing a false statement is a class B misdemeanor.

Person Making Statement

NUMBER OF ADDITIONAL PAGES

Return your completed statement to the Secretary of State, Elections Division, Memorial Hall, First Floor, Topeka, Kansas 66612-1594.

Attachment Sheet To Statement of Substantial Interest Question "C" OWENERSHIP INTERESTS (Mark R. Jorgenson)

Name:	Туре:	Held by:
Vanguard	Mutual Fund	Mark Jorgenson/Mary Jorgenson
Vanguard	Mutual Fund	Mark Jorgenson/Mary Jorgenson Van
Vanguard	Mutual Fund	Mark Jorgenson/Mary Jorgenson
Ameritrade	Stock Account	Mark Jorgenson
Buffalo Funds	Mutual Fund	Mark Jorgenson/Mary Jorgenson
Morgan Stanley Smith Barney	Stock Account	Mark Jorgenson
Stable Asset Fund	401K	Mark Jorgenson
First American Intermediate Govt. Bond	401K	Mark Jorgenson
S-Core Bond	401K	Mark Jorgenson
PIMCO Total Return	401K	Mark Jorgenson
T.Rowe Price Retirement 2010	401K	Mark Jorgenson
First American Large Cap Value Fund	401K	Mark Jorgenson
Hotchikis and Wiley Large Cap	401K	Mark Jorgenson
Vanguard Institutional Index Plus	401K	Mark Jorgenson

Attachment Sheet To Statement of Substantial Interest Question "C" OWENERSHIP INTERESTS (Mark R. Jorgenson)

Name:	Type:	Held by:
First American Large Cap Opportunities Fund	401K	Mark Jorgenson
TCW Select Equity I	401K	Mark Jorgenson
First Am. American Mid Cap Value Fund	401K	Mark Jorgenson
First American Mid Cap Growth Opportunities Fund	401K	Mark Jorgenson
SSgA Active Mid Cap Series A	401K	Mark Jorgenson
First American Small		
Cap Value Fund Dreyfus/Boston	401K	Mark Jorgenson
Co. Small Val I	401K	Mark Jorgenson
First American Small Cap Select Fund	401K	Mark Jorgenson
First American Small Cap Growth Opportunities Fund	401K	Mark Jorgenson
SSgA International Alpha Select	401K	Mark Jorgenson
ESOP Stock Fund	401K	Mark Jorgenson

Senate Confirmation Information Summary

Prepared and Submitted by the Office of Governor Mark Parkinson

Appointee: Deryl Wynn

Position: Member, University of Kansas

Hospital Authority

Term Length: Four years

Expiration Date: March 15, 2013

Statutory Authority: K.S.A. 76-3304

Party Affiliation: Democrat

⇒ Statutory geographic representation

Congressional District: Of the thirteen members appointed by the Governor, there shall be at least

one member from each congressional district.

Requirements (insert any that apply)

County:

Size requirement (if any):

Other, specify:

⇒ Statutory party affiliation requirement:

⇒ Statutory industry or occupation requirements:

Public members shall have exhibited outstanding knowledge and leadership in the fields of finance, business, health-care management, health care providers, legal affairs, education or government.

Salary: N/A

Predecessor: Edward Chapman

Board Composition Prior to Confirmation of New Appointee:

(SEE ATTACHED LIST)

Senate Public Health & Welfare Date:

Attachment:

03/02/10

University of Kansas Hospital Authority

Gov Appts:	13	Term Length:	Four Years				Co	ntact:	Bob Page, Pre	esident and	CEO
Total Appts:	19	Notes:	Reconstituted per SB642: 19 members (6 ex-officio members, 13 appointed by Gov.) At least one member for each CD. Chair & Vice Chair elected annually by the Board, President appointed by Board. Cannot serve more than three consecutive four-year terms. Appoint members who are recognized for outstanding knowledge and leadership in the fields of finance, business, health-care management, health care providers, legal affairs, education or government.						University of Kansas Hospital 3901 Rainbow Boulevard Kansas City, KS 66160 913/588-1022		
Statute:	KSA 76-3304		Confirmation:	\checkmark	Gov App	t Counts	Male/	<u>Female</u>	1st2nd3rd4th	R/D/U	Board Active 🗸
Party Ratio:	N/A	Term Lim	it:	Reg Board			9	: 3	2:2:8:1	10:2:0	•
	** Member fully assur	med duties but awaits co	nfirmation by the Ful	l Senate		·				· ·	
				County	<u>Affiliation</u>	<u>CD</u>	$\underline{\mathbf{H}}$	<u>s</u>	Appointment Date	Expiration	Date Reapt
Atki	nson, Dr. Barbara F.			Johnson		3			12/15/2003		
911	10 Oak Valley Dr.										
De	Soto, KS 66018			sition: an ex-offi ceeds: Deborah l							
				ed By: Statute							
			Nomina			- 11 1	~				
			-	narks: Executive	•	Medical S	School			:	
			S	Seat #: 010&011							
	man, Dr. William			Wyandotte		3			5/26/1998	•	
	01 Rainbow		_								
Ka	nsas City, KS 66160			sition: ex-officio							
				ceeds: new posit	cion						
				ed By: Statute							•
			Nomina								
				narks: Interim C	hief of Staff	of Medi	cal Cer	iter			
			S	Seat #: 012							

	County	<u>Affiliation</u>	<u>CD</u>	$\overline{\mathbf{H}}$	<u>s</u>	Appointment Date	Expiration Date	Reapt	
Chapman, Mr. Edward J. Jr.	Leavenworth	R	2	41h	5s	8/5/2005	3/15/2009		
1315 S. Broadway									
Leavenworth, KS 66048-0915	Position: a member								
ejc@echapmanlaw.com	Succeeds: himself	reappointed							
	Appointed By: Governor								
	Nominations:								
	Statutory Remarks: Public Member								
	Seat #: 001								
Farha, Dr. George J.	Sedgwick	R	4	83h	30s	12/20/2007	3/15/2010		
300 N. Terrace									
Wichita, KS 67208-3944	Position: a membe								
mneel@gj.kscoxmail.com	Succeeds: himself-	7 7							
	Appointed By: Governo	r							
	Nominations:								
	Statutory Remarks:								
	Seat #: 016							_	
Gaunce, Ms. Patricia A.	Wyandotte	D	3	36h	4s	12/20/2007	3/15/2011		
7300 Waverly									
Kansas City, KS 66109	Position: a member								
pgaunce@kc.rr.com	Succeeds: herself-								
	Appointed By: Governo	or							
	Nominations:								
	Statutory Remarks: Seat #: 018								
G	Johnson	D	2	27h	37s	12/17/2008	3/15/2011		
Graves, Mr. Gregory M 5085 W 177th Terrace	Joinison	D	3	2/11	378	12/1//2000	3/13/2011		
	Position: a memb	0.11							
Stilwell, KS 66085	Succeeds: Robert I								
ggraves@burnsmcd.com									
	Appointed By: Governo Nominations:	Л							
	Statutory Remarks: Represe	enting 3rd CD							
	Statutory Kemarks. Represe	ming Jiu CD							

Seat #: 007

Tuesday, January 26, 2010

	County	<u>Affiliation</u>	<u>CD</u>	<u>H</u>	<u>s</u>	Appointment Date	Expiration Date	Reapt
Honse, Mr. Robert W.	Douglas	R	2	45h	2s	6/18/2008	3/15/2010	
1533 Fountain Dr.								
Lawrence, KS 66047	Position: Chair							
	Succeeds: himself	f reappointed						
	Appointed By: Govern	ior						
	Nominations:							
	Statutory Remarks: Public	Member						
•	Seat #: 006							
Keim, Ms. Betty T.	Johnson	R	3	25h	7s	1/21/2010	3/15/2012	
3608 W. 71st Street								
Prairie Village, KS 66208	Position: a mem	ber						
bettyk@kc.rr.com	Succeeds: herself	reappointed						,
	Appointed By: Govern	nor						
	Nominations:							
	Statutory Remarks: Public	Member						
•	. Seat #: 015							
Kerr, The Honorable Dave M	Reno	R	1	101h	34s	1/8/2008	3/15/2010	
72 Willowbrook						•		
Hutchinson, KS 67502	Position: a mem							
kerr@senate.state.ks.us	Succeeds: himsel	* *						
	Appointed By: Govern	nor						
	Nominations:							
	Statutory Remarks: Vice c	hair						
	Seat #: 019							•
Lindenbaum, Ms. Sharon	Johnson	R	3	21h	7s	12/17/2008	3/15/2011	
8501 Cherokee Place								
Leawood, KS 66206	Position: a mem							
sharon.lindenbaum@twcable.com	Succeeds: herself	reappointmer	ıt					
	Appointed By: Govern	nor						
	Nominations:							
	Statutory Remarks: Public	Member						
	Seat #: 017							

4

	County	<u>Affiliation</u>	\underline{CD}	$\overline{\mathbf{H}}$	<u>s</u>	Appointment Date	Expiration Date	Reapt
Miller, Dr. Karen	Johnson	D	- 3	25h	7s	5/26/1998		
5507 Fairway Road								
Shawnee Mission, KS 66205	Position: ex-off	icio member		•				
	Succeeds: new p	osition						
	Appointed By: Statute	е						
	Nominations:							
	Statutory Remarks: Dean	of KU School of	Nursin	g				
	Seat #: 013							
Murphy, Mr. Thomas E. III	Johnson	R	3	38h	9s	8/5/2005	3/15/2008	
1000 W 58th Terrace]	Resigi	n Note:		
Kansas City, MO 64113	Position: a men	nber						
Tom.Murphy@sprint.com	Succeeds: Clay I	Edmands						
	Appointed By: Gover	rnor						
	Nominations:							
	Statutory Remarks: Public	c Member						
	Seat #: 005							
Page, Robert			0					
3901 Rainbow Boulevard								
Kansas City, KS 66160	Position: Ex-O	fficio						
	Succeeds: Irene	Cumming						
	Appointed By:							
	Nominations:							
	Statutory Remarks: CEO	University of Ka	nsas H	ospital				
	Seat #: 014							
Payne, Mr. John B.	Johnson	R	3	28h	11s	11/9/2004	3/15/2008	
9900 NE 114th Circle								
VanCouver, WA 98662	Position: a mer	nber						
John.Payne@banfield.net	Succeeds: himse	elf reappointed						
	Appointed By: Gove	rnor						
	Nominations:							
	Statutory Romarks, Publi	c Member						

Seat #: 004

	Cou		Affiliation	<u>CD</u>	<u>H</u>	<u>s</u>	Appointment Date	Expiration Date	Reapt
Regnier, Mr. Robert	John	son	R	3	28h	4s	10/16/2007	3/15/2009	
3400 119th St									
Leawood, KS 66209	Position: n								
bregnier@bankbv.com	Succeeds: E			•					
	Appointed By: (overnor?							
	Nominations:								
	Statutory Remarks: F		ber						
	Seat #: 0	02							
Sunderland, Mr. Charles T.	John	son	R	3	48h	37s	5/5/2005	3/15/2009	
10209 W. 139th Terr									
Overland Park, KS 66221	Position: a								
charlie.sunderland@ashgrove.com	Succeeds: h	imself rea	appointed						
	Appointed By: (3overnor							
	Nominations:								
	Statutory Remarks: F	'ublic Meml	ber						
	Seat #: 0	08							
Vacant, Position				0			7/15/2009		
	Position: e	x officio		٠					
	Succeeds:								
	Appointed By:								
	Nominations:								
	Statutory Remarks: F	tesearch Ins	stitutions re	present	ative				
	Seat #: 0		•						
Warren, Dr. Linda MD	Washi			1	106h	21s	1/8/2008	3/15/2010	П
P.O. Box 38, 205 S. Hanover		5				- 45	2, 6, 2000	3/13/2010	٠
Hanover, KS 66945	Position: a	member							
ldwarren@bluevalley.net	Succeeds: N	Aark Parkin	son						
·	Appointed By: (overnor							
	Nominations:								
	Statutory Remarks:								
	Seat #: 0	03							
	2 4.								

DERYL W. WYNN

11110 Parkview Ave. Kansas City, KS 66109 913-721-3911

Employment

McAnany, Van Cleave and Phillips, P.A. Kansas City, KS Attorney/Shareholder August 1990 - present

U.S. Army
Fort Eustis, VA and Fort Story, VA
Captain – JAG Corps.
August 1986 – August 1990 (Active)

U.S. Army (Reserves) August 1990 through September 1995 – Honorable Discharge

Education

J.D. (Deans Honors) Washburn School of Law, 1986 Judge Advocate General's School, Department of Army, 1986 BFA, BS (Summa Cum Laude) Emporia State University, 1983

Bar Admission(s) (past and present)

Kansas, 1986

U.S. District Court, District of Kansas, 1986 (active)

U.S. District Court, Western District of Missouri, 1998 (active)

U.S. Court of Appeals, 10th Circuit 1991 (active)

U.S. District Court, Eastern District of Virginia, 1988

U.S. Court of Appeals, 4th Circuit 1988

U.S. Court of Military Appeals 1987

Sampling of Legal Experience

- *Successfully defended private and public employers at both the trial and appellate levels against claims of racial, sexual and disability discrimination.
- *Successful defense of health care professional before the Kansas Behavioral Science Regulatory Board.

K0018776.98; 1

- * Successful representation of healthcare entities in administrative fraud actions initiated by United States Department of Health and Human Services Office of Inspector General ("OIG"). Development of Corporate Compliance Plan designed to identify compliance risk areas and sustained compliance with plans, policies and activities designed to reduce and/or eliminate billing errors, misconduct and fraud.
- *Speaker at a number of seminars for employers and school officials across the country. Presentations given in Arizona, Missouri, Texas, Kansas, Virginia and Missouri.
- *Vast experience in creating proactive approach to human resource and personnel challenges for public and private employers.
- *Successful defense of school district in numerous special education due process actions.
- *Successful defense of public and private employers in employee termination actions.
- *Successfully tried to jury verdict foreign national who attempted improper access to government records. (federal)
- *Successfully tried to jury verdict capital murder case. (federal)
- *Successfully tried to jury verdict larceny involving aircraft engines.
- *Established procurement fraud, waste and abuse unit for Virginia military installation.
- *Successfully represented public college employers in numerous collective bargaining fact finding and mediation actions.

Professional Affiliations

Former Executive Committee, Employment Law Section, Kansas Bar Association Former Regional Director, Kansas School Attorneys Association Former Officer, Kansas Inns of Court

Accomplishments

1990: Awarded United States Army Meritorious Service Medal for exemplary performance while serving as the Chief of Military Justice for the United States Army Transportation Center, Fort Eustis and Fort Story Virginia from 1987-1990 with specific reference made to leadership demonstrated in the development of a program designed to combat procurement fraud, waste and abuse and for appointment to the position of Special Assistant United States Attorney for the Eastern District of Virginia.

1997-1998: The Friends of Yates Man of Distinction and Outstanding Volunteer of the Year Award.

1998: National Eagle Leadership Institute and Career Focus Magazine Eagle Award for Outstanding Professional and Community Leadership.

1998: Ingram's Magazine "40 under 40 Power Elite Class of 1998."

1998: Elected by peers to Region 1 Director position for the Kansas Association of School Attorneys.

1999: Leadership 2000 Alumni of the Year Award.

1999: Distinguished Leadership Award given by the National Association for Community Leadership.

1999: Elected by peers to serve on the Board of Directors of the National Association of School Boards Council of School Attorneys.

1999: Chairman of the Board for the Kansas City Kansas Area Chamber of Commerce.

1999: President of the Friends of the Library for Kansas City Kansas.

1999: Vice-President Leadership 2000.

1999: American Red Cross, Recognition for Extraordinary Personal Action

2000: One of forty school attorneys selected from across the globe to participate in the Oxford University Sir William Blackstone Colloquium on Public School Law held at St. Anthony's College, Oxford University, Oxford England.

2000: Awarded "Kansas State Friend of the Library" Award for volunteer efforts in support of Kansas libraries.

2000: Appointed to Governor Bill Graves Kansas 21st Century Economic Task Force.

2000: -Lead attorney in the final phase of the 20-year effort to desegregate the Kansas City, Kansas School District. In ruling for the School District, the federal court remarked that the School District's plan exceeded the standards required by law. In praising the work of the lawyers in the case and school officials, the Court referred to the final plan as ". . a model for other courts and districts."

2001: Appointed by Governor Bill Graves to the Kansas Board of Regents.

2003: Elected President of the Kansas Council of School Attorneys.

2005: Awarded Emporia State University Distinguished Alumni Award.

2005: Awarded Wyandotte County Special Education Cooperative Kids First Award in acknowledgement of contributions to special education.

2006: Elected Chair of the National School Board Association's Council of School Attorneys.

2007: Awarded Community Partner Award by Wyandotte Center for Community Behavioral Healthcare.

Former Personal Volunteer Activities/Acknowledgements

Board of Directors, Washburn Law School Board of Governors
Board of Directors Kansas City Kansas Area Chamber of Commerce
Board of Directors City Vision Ministries
Board of Directors, Leadership 2000
President, Kansas City, Kansas Friends of the Library
Friends of Yates - Distinction Award and Outstanding Volunteer Award
Coach, Special Olympics

DERYL W. WYNN Seminars, Papers, and Publications

(partial listing)

Current Trends in Special Education. Kansas Association of Special Education Administrators Conference. Speaker/Presenter. February 21, 2001, Topeka, Kansas.

Ethics and Values in the Workplace. Golf Course Superintendents Association of America 72nd International Golf Course Conference and Show. Speaker/Presenter, February 14, 2001, Dallas, Texas.

The Family Educational Rights and Privacy Act - Problems in Day-to-Day School Operations. Kansas Association of School Boards Convention. Speaker/Presenter, December 3, 2000, Wichita, Kansas

Avoiding Potholes & Tolls on the Special Education Highway. Unified School District No. 500, Seminar, Speaker/Presenter, October 25, 2000, Kansas City, Kansas.

The Family Educational Rights and Privacy Act - Problems in Day-to-Day School Operations. National School Boards Association 2000 Advocacy Seminar, Speaker/Presenter, October 12-14, 2000, Litchfield Park, Arizona.

The ADA. Seven Common Employer Mistakes. References and Background Checks. Emerging Traps for Employers, McAnany, Van Cleave & Phillips. P.A. Employment Law Seminar, Speaker/Presenter, September 20, 2000, Overland Park, Kansas.

Special Education Law Implications, Flint Hills Special Education Cooperative, Chase County Unified School District No. 284, Speaker/Presenter, August 15, 2000, Cottonwood Falls, Kansas.

2000 Principal's Institute, Unified School District No. 500, Speaker/Presenter, August 3-4, 2000, Kansas City, Kansas.

Review of Selected Materials Related to the Americans with Disabilities Act, Seminar, McAnany, Van Cleave & Phillips, P.A. Workmen's Compensation Seminar, Speaker/Presenter, July 19, 2000, Overland Park, Kansas.

Sir William Blackstone Colloquium on Public School Law, Participant, July 9-14, 2000, Oxford, England.

- Golf Course Superintendents Association of America Employment Workshop, Speaker/Presenter, June 20, 2000, Lawrence, Kansas.
- Search & Seizure, Drug Testing & Policy Considerations for Schools, Speaker/Presenter, Kansas Association of School Boards Conference at the Kansas Bar Association Conference, June 15, 2000, Wichita, Kansas.
- Search & Seizure & Constitutional Rights, Speaker/Presenter, In-Service Presentation to USD.500 Campus Officers, June 1, 2000, Kansas City, Kansas.
- Recent Employment Law Issues, Speaker/Presenter, Kansas Association of School Boards, Smoky Hill Education Service Center, April 12, 2000, Salina, Kansas.
- Principal's Survival Guide, Speaker/Presenter, USD.500, March 15, 2000, Kansas City, Kansas.
- Development & Implementation of the IEP, Speaker/Presenter, Flint Hills Special Education Cooperative, February 24, 2000, Emporia, Kansas.
- Recent Employment Law Issues, Speaker/Presenter, Kansas Association of School Boards, February 17, 2000, Topeka, Kansas
- **Employment Matters**, Speaker/Presenter, Golf Course Superintendent's Association of America, February 3, 2000, Lawrence, Kansas.
- Eleventh Day Suspension Rule, Speaker/Presenter, In-Service, USD.500 Special Education, January 12, 2000, Kansas City, Kansas.
- **Special Education,** Speaker/Presenter, In-Service Presentation, USD.500, January 5, 2000, Schlagle High School, Kansas City, Kansas.
- FMLA and ADA in the Workplace, Speaker/Presenter, McAnany, Van Cleave & Phillips, P.A. Employment Law Seminar, September 15, 1999, Kansas City, Missouri.
- Individuals with Disabilities in Education Act, Speaker/Presenter, Kansas State Board of Education, August 5, 1999, Wichita, Kansas
- Special Education Issues, Speaker/Presenter, Sedgwick Public Schools USD 286, August 9, 1999, Sedgwick, Kansas.
- Rules of Evidence, Speaker/Presenter, Due Process Hearing Officer Training, August 13, 1999, Topeka, Kansas.

FMLA Issues, Speaker/Presenter, Council on Education in Management, August 26, 1999.

The 1999 IDEA Regulations: A Practical Analysis, Article, National School Boards Association, June, 1999.

Disciplinary Issues - Parental Rights & Development of the IEP, Speaker/Presenter, Council on Education Management, May 14, 1999, Overland Park Kansas.

Black History - You'll be Surprised, Speaker/Presenter, February 18, 1999, Kiwanis, Kansas City, Kansas.

Chief Negotiators Seminar, Participant, January 19, 1999, Topeka, Kansas.

The Concepts of the Rules of Evidence, Speaker/Presenter, Kansas Board of Education, Hearing Officer Training, December 18, 1998, Topeka, Kansas.

Worker's Compensation Update, Participant, Council on Education in Management, October 26, 1998, Kansas City, Missouri.

Rules of Evidence, Speaker/Presenter, Kansas Association of School Boards Hearing Officer Training, October 9, 1998, Topeka, Kansas

Development & Implementation of the IEP, Speaker/Presenter, Kansas Association of School Boards, October 1, 1998, Great Bend, Kansas.

Crisis Management, Speaker/Presenter, Kansas Association of School Board, September 23, 1998, Topeka, Kansas

FMLA and ADA: New Developments, Speaker/Presenter, Health Midwest luncheon, July 16, 1998.

The IEP - Evidentiary Issues for Hearing Officers, Speaker/Presenter, Washburn University and the Kansas Association of School Boards, Spring and Summer, 1998.

Kansas Wage and Hour Update, Speaker/Presenter, Personnel Law Update, Council on Education in Management, April 29-30, 1998.

Missouri Wage and Hour Update, Speaker/Presenter, Personnel Law Update, Council on Education in Management, May 18-19, 1998.

Ethics for School Attorneys, Speaker/Presenter, National School Boards Association, October 17, 1997.

Constitutional Rights of Students: Drug Testing of Student Athletes, Speaker/Presenter, National School Boards Association, October 18, 1997.

Selected Ethical Considerations for Employment and Labor Attorneys, Speaker/Presenter, Kansas Bar Association, September 12 and 19, 1997.

1997 Amendments to the IDEA: Parental Involvement Throughout the Process, Speaker/Presenter, Kansas Association of School Boards, September 12, 1997.

The IEP - New Requirements; Changes in Placement; Due Process, Speaker/Presenter, Kansas Association of School Boards, September 11, 1997.

Current Workplace Issues, Speaker/Presenter, McAnany, Van Cleave & Phillips, August 14, 1997.

Road Show: FMLA, ADA, and Work Comp: New Developments, Speaker/Presenter, August 14, 1997.

Developments in the Tort of Wrongful Discharge or Retaliatory Discharge, Speaker/Presenter, Annual Business Meeting, Kansas School Attorneys Association, June 18-19, 1997.

Section 504 of the Rehabilitation Act, Speaker/Presenter, Unified School District No. 500, February 1997.

Teacher Terminators and Due Process -- "An examination of Robinson and Hubbard", Speaker/Presenter, Kansas Association of School Boards, December 1996.

Employee Testing, and Common Law Tort Theories, Speaker/Presenter, Kansas Bar Association -- Employment Law Meeting, September 1996.

Americans With Disabilities Act Update, Speaker/Presenter, Health Midwest, September 1996.

Safe & Orderly Schools, Speaker/Presenter, Kansas City, Kansas Public Schools -- Seminar, Summer Conference, August 1996.

Wage and Hour Quiz, Article, Golf Course Superintendents Association of America -- "Leader Board" publication, August 1996.

Employment Law "Issues for Supervisors and Effective Strategies", Speaker/Presenter, Wyandot Mental Health Center -- Supervisory Personnel, April 1996.

Unemployment Compensation Issues, Speaker/Presenter, Kansas Association of School Boards -- Employment Law Seminar, March 1996.

Sexual Harassment in the Workplace, Speaker/Presenter, Kansas Association of School Boards -- Employee In-service Committee, March 1996.

Sexual Harassment, "Some still don't get it but, they are about to undergo a period of extreme enlightenment", Speaker/Presenter, Wyandotte County Bar Association, February 1996.

Legal Concerns of the School Nurse, Speaker/Presenter, Wyandotte County Health Department -- School Nurses Conference, January 1996.

Personnel Policies, Practices & Procedures, Speaker/Presenter, McAnany, Van Cleave & Phillips Annual Employment Law Seminar, 1996.

Interaction between ADA, FMLA and Workers' Comp: Policy and Case Review, Speaker/Presenter, McAnany, Van Cleave & Phillips, Annual Employment Law Seminar, 1996.

Employee References: "Employers Beware", Speaker/Presenter, Kansas City, Kansas Area Chamber of Commerce, July 1995.

OSHA, FMLA, and Disability Discrimination, Speaker/Presenter, United Way Legal Issues Seminar for Employees, Officers and Directors of Not-for-Profits, July 1995.

Violence in the Workplace -- "The times, they are a changin", Speaker/Presenter, Providence Medical Center - - April 1995.

Wage and Hour Update, Speaker/Presenter, Kansas Association of School Boards -- Kansas School Attorneys Association, December 1995.

Student Searches: <u>Vernonia School District 47J v. Acton</u>, "More of the same, only different....", Speaker/Presenter, Kansas Association of School Boards,

November 1995.

Student Discipline, Speaker/Presenter, Kansas City, Kansas Public Schools -- Professional Development Department Summer Conference, August 1995.

Violence 9 to 5 -- ", Speaker/Presenter, McAnany, Van Cleave & Phillips - - Employment Law Seminar, 1995.

Work Disability, Speaker/Presenter, McAnany, Van Cleave & Phillips, Annual Employment Law Seminar, 1995.

American Disabilities Act, " ... it's a mad, mad world.", Speaker/Presenter, Missouri Valley Personnel Administrators Conference, December 1994.

Drug Testing, DOT Rules for Implementing Provisions of the Omnibus Transportation Employment Testing Act, "a general albeit" extended "discussion of the final rules", Speaker/Presenter, Kansas Association of School Boards, December 1994.

Drug Testing, "Anatomy of Employment Policy", Speaker/Presenter, Kansas Association of County Counselors, November 1994.

Drug Testing, "A Troubleshooter's Guide", Speaker/Presenter, University of Missouri at Kansas City School of Law -- Work Comp Update, September 1994.

Sexual Harassment, "A Guide for the Professional", Speaker/Presenter, Missouri Health Care Association, August 1994.

Drug Testing, "What You Don't Know Can Hurt You", Speaker/Presenter, Kansas Association of School Boards, June 1994.

Americans with Disabilities Act, "Trends and Consequences", Speaker/Presenter, Health Midwest, May 1994.

Sexual Harassment, "Anatomy of an Effective Policy", Speaker/Presenter, Swope Ridge Geriatric Center, April 1994.

Americans with Disabilities Act, "What We Know Now", Speaker/Presenter, Health Midwest, April 1994.

Employment Law Update, Speaker/Presenter, Golf Course Superintendents Association of America, March 1994.

Employment Law Issues -- Be Proactive, Speaker/Presenter, Gallagher-Woodsmall -- Risk Management, February 1994.

Employment Law Audit, Speaker/Presenter, Gallagher-Woodsmall – Risk Management, January 1994.

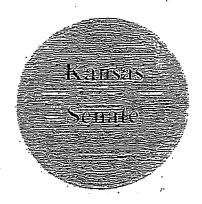
Americans with Disabilities Act Update, Speaker/Presenter, Kansas City, Kansas Area Chamber of Commerce, January 1994.

Drug and Alcohol Testing, "There's Been a Few Changes", Speaker/Presenter, McAnany, Van Cleave & Phillips -- Annual Employment Law Seminar, 1993.

Drug and Alcohol Testing, Speaker/Presenter, McAnany, Van Cleave & Phillips -- Annual Employment Law Seminar, 1992.

Americans with Disabilities Act -- Reasonable Accommodation of Disabilities, Speaker/Presenter, McAnany, Van Cleave & Phillips -- Annual Employment Law Seminar, 1992.

Sexual Harassment, a Discussion of Recent Precedent, Article, <u>The</u> Advocate, Summer 1992.



CONFIRMATION OVERSIGHT COMMITTEE

Acknowledgment of Release of Tax and Criminal Records Information Form

I, <u>Very William Wynn</u> (print name)	acknowledge that as part of the
Senate Confirmation Oversight Committee proc	eess I will:
 be subject to a criminal records background investigation; and 	und investigation by the Kansas Bureau of
 have my tax records released by the Kan 	sas Department of Revenue.
	·
Such information will not be released to the generation at the appropriate time by:	eral public, but will be made available for review
• Myself,	_
 My appointing authority; 	
Chairperson of the Senate Confirmation (Oversight-Committee; and
The Vice Chair of the Senate Confirmation	ons Oversight Committee.
By signing the "Authorization and Certification" Oversight Committee questionnaire, the Kansas I release my tax information and the Kansas Burea a criminal background investigation on me and prindividuals.	Department of Revenue will be authorized to u of Investigation will be authorized to conduct
Signature They W.W.	Date 10-30-09

3-18



CONFIRMATION OVERSIGHT COMMITTEE

APPOINTMENT QUESTIONNAIRE

Full Name: Den William Wynn please include title and middle name along with any names previously used)	
Home Address: 1110 Parkview Aug Kansas City KS 6610	C
(Street Address) (City, Stale, Zip) Driver's License Number: Social Security Number:	•
Position to which Appointed: Hospital Boxerd Authority	
Appointing Authority: <u>Covernor's Office</u>	

^{*} Information on this page will not be made public but is used by the KBI and Department of Revenue.

(for Committee use only)		
KBI Check: N/A	In-Process	Complete
DOR Check: N/A	In-Process	Complete

This Questionnaire is to be fully completed by each appointee appearing before the Senate Confirmation Oversight Committee (Committee) and returned to the Committee Chairman's Office. A meeting of the Committee to consider an appointee will not be scheduled until a completed questionnaire and other forms are received by the Chairman. Please answer each question completely to the best of your knowledge. Should a question not be applicable, please so state. Hand-written responses are strongly discouraged. If filling out this form electronically, "\(\sigma\)" should be replaced with "X" by the appropriate response on the form. Please contact your appointing authority if you have questions when completing the form.

Full Name: Den William MUNN (please include title and middle name along with shy names previously used)
Position to which Appointed: Hospital Board Authority
Appointing Authority: <u>Governor's office</u>
Kansas City KS 66109
Business Name: McArcary, Van Cleave and Phillips
Business Address: 107 Minno Sota Allo, Juite 400 Kinglis City
Position Title: Attorney Partner
Home Phone: 913-721-3411 Business Phone: 913-371-3838 Cell Phone: 913-302-3418
Fax Number: 913-371-4722 E-Mail Address: dwynn & MVP law + CDM
Kansas resident? Yes / ONo Date of Birth: 926 61 Place of Birth: Altus. DK
Registered Voter? <u>Ues</u> Party Affiliation: <u>DeMCCVat</u>
Congressional District: 3 Kansas Senate District: 5 Kansas Representative District: 36
Do you have the legal right to live and work in the United States? 💆 Yes / 🗆 No

Please answer the following questions numbered 1 – 43. Each question <u>MUST BE ANSWERED ON THIS ORIGINAL FORM</u>. If the answers the question are provided on your resume, please state "See Resume" or if you supply additional attachment(s) with answers, please state "See Attachment(s)" on this form.

- 1. What is your educational background? See Resume
- 2. Describe your employment experience. Include any expertise related to the position to which you were appointed.

3-20

List any professional licenses that you have obtained and include the number for each license. 3. See altachment Why do you feel you are a good candidate for the position to which you have been appointed? 4. See a Hachment What do you see as the purpose or mission of the role to which you have been appointed? 5. See attachment Military Service: List rank, date and type of discharge from active service. 6. Captain, US Army, August 1990, Honorable Government Experience: List any experience or association with local, state or federal 7. government (exclusive of elective public office but including advisory, consulting, honorary, appointed or other part-time service or positions) and include dates of service.

See a Hackment Elective Public Office: List all elective public offices sought and/or held with dates of service. 8. None

Campaigns: Have you ever played a role or held a position in a political campaign? If so, please 9. identify the candidate(s), the dates of the campaign and describe your involvement. 🛛 No 🎞 Yes 🕆

Honors and Awards: List all scholarships, fellowships, honorary degrees, honorary society 10. memberships and any other special recognition for outstanding service or achievements.

☐None Please de resune

□None

Organization Affiliations: List all civic, cultural, educational, charitable, or work-related 11. organizations that you have been associated with in the past ten years. Include any position held in the organization and the dates of service.

□None See a Hackment

Organization Restrictions: To your knowledge, is any organization listed above restricted on the 12. basis of race, color, religion, sex, national origin, disability, marital status or veteran status? If so, please describe. ⊠No TYes

Issues: Have you ever been publicly identified, in person or by organizational membership, with a 13. particularly controversial national or local issue? If so, please describe. ✓No (Yes

Submission of Views: Have you ever submitted oral or written views to any governmental 14. authority, whether executive or legislative, or to the news media on any particularly controversial issue other than in an official governmental capacity? If so, please describe. ☑No □Yes

Associations: Have you ever had any association with any person, group or business venture that 15. could be used, even unfairly, to impugn or attack your character and qualifications for the position to which you seek to be appointed? If so, please describe. No Tyes

- Opposition: Do you know of any person or group who might take overt or covert steps to attack, even unfairly, your appointment? If so, please identify and explain the basis for the potential attack.

 No DYes
- Miscellaneous: List any factors, other than the information provided above, which particularly qualifies you or is relevant to the position to which you are seeking appointment? Include any special skills.

 Whone
- Relationship to Governmental Employees: Are you or your spouse or other close family members related to any state governmental official or employee? If so, please provide details.

 Ono Myes Cousin district court guidge for state of Kansas.
- Compensation: During the past five years, have you or your spouse or other close family members received any compensation or been involved in any financial transaction with the State of Kansas?

 If so, please explain.
- Business Relationships: Describe any business relationship, dealing or financial transaction which you have had during the last five years, whether for yourself, on behalf of a client or acting as an agent, which you believe may constitute an appearance of impropriety or result in a potential conflict of interest in the position to which you want to be appointed. If none, please so state.
- Transactions with Officials: During the past five years, have you or your spouse or other close family members received any compensation or been involved in any financial transaction with any state government official? If so, please explain.
- Spouse or Other Family Members: If the nature of employment for your spouse or other close family member is related in any way to the position to which you have been appointed, please indicate the employer, the position and the length of time it has been held. If not, please so state.

 No Tyes
- Lobbying Activities: Describe any lobbying activity during the past ten years in which you and/or your spouse have engaged for the purpose of influencing the passage, defeat or modification of any legislative or administrative action. Lobbying activity includes any activity performed as an individual or agent of another individual, or of any organization that involves direct communication with an official in the executive branch of state government or any official of the legislative branch. If none, please so state. As Chair of the Chamber, I submitted a Letter was none commenting on casino aximaling in Luyandotte County. The letter was veterenced in the Congressional Record, Ccivca 1999.
- Regulated Activities: Describe any interest that you, your spouse or other close family member may have (whether as an officer, owner, director, trustee, or partner) in any corporation, firm, partnership or other business enterprise and any non-profit organization or other institution that is regulated by or receives direct financial benefits from any department or agency of the State of Kansas. If none, please so state.

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25.	Other: Please describe any other matter in which you are involved that is or may be incompatible or in conflict with the discharge of the duties of the position to which you have been appointed or which may impair or tend to impair your independence of judgment or action in the performance of the duties of that position. If none, please so state. None
26. Corpo 27.	Conflict of Interest: How would you resolve any potential conflicts of interest that, while maybe unforeseen at this point in time, could arise? Immediately Clock to agent wate Compliance Conflicer ev Legal Confei abstain and Volve Me Citations. Have you ever been cited for a breach of ethics for unprofessional conduct, or been we named in a complaint to any court, administrative agency, professional association, disciplinary committee, or other professional group? If so, please provide details. No area of interest that, while maybe unforces that, while maybe unforeseen at this point in time, could arise? Immediately after a complete of the conflict of the conf
28.	Convictions: Have you ever been convicted of or entered a plea of guilty or nolo contendere or forfeited collateral for any criminal violation other than a traffic infraction? (Please include any offenses of driving under the influence, operating while impaired, reckless driving, or the equivalent offenses in other states.) If so, please explain. No Tyes
29.	U.S. Military Convictions: Have you ever been convicted by any military court? If so, please provide details. ☑No ☐Yes
30.	Imprisonment: Have you ever been imprisoned, been on probation or been on parole? If so, please provide details. ☑No ☐Yes
31.	Agency Proceedings/Civil Litigation: Are you presently, or have you ever been, a party in interest in any administrative agency proceeding or civil litigation that is related in any way to the position to which you are seeking appointment? If so, please provide details. No Tyes
32.	Agency Proceedings and Civil Litigation of Affiliates and Family: a.) Is your spouse or other close family member currently, or ever been, a party in interest in any administrative agency proceeding or civil litigation that is related in any way to the position to which you are seeking appointment? If so, please provide details. No Tyes
	b.) Has any business in which you, your spouse, close family member or business associate are or were an officer, director or partner been a party to any administrative agency proceeding or civil litigation relevant to the position to which you are seeking appointment? If so, please provide details. (With respect to this question, you need only consider proceedings and litigation that occurred while you, your spouse, close family member, or business associate were an officer of that business.)

	Other Litigation: a.) Other than the litigation described in question 32, have you or any business in which you are or were an officer, director, or partner been a plaintiff or a defendant in a civil lawsuit? If so, please describe Civil action in Wyandotte Co. District No. Eyes Court — Indian Springs Mall vs. McArany, Van Cleave? b.) Are you aware of any pending or antibipated litigation against you or any business in which you Phillipare an officer, director, or partner? If so, please describe. No Eyes Dispositive motions filed
34.	Drivers License: Has your driver's license ever been suspended or revoked? If so, please describe. ☑No ☐Yes
35.	Parking Tickets: Do you have outstanding parking tickets from any jurisdiction that have remained unpaid for more than 60 days? If so, please explain. ☑No ☐Yes
36.	Security Clearance Denial: Have you ever been denied a military or other governmental clearance? If so, please explain. No Pyes
37.	Firings: a.) During the past ten years, have you been fired from a job for any reason? If so, please explain. No Tyes
	b.) During the past ten years, have you quit a job after being told that you would be fired? If so, please explain. ☑No □Yes
	c.) During the past ten years, did you leave a job by mutual agreement because of specific problems? If so, please explain. ☑No ☐Yes
38.	Alimony and Child Support: Are you now, or have you ever been, delinquent in the payment of alimony or child support? If so, please explain No Yes
39.	Consumption of Alcohol: Have you ever or are you currently abusing alcohol? If so, please explain. ☑No ☐Yes
40	Controlled Substances: Have you ever or are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If so, please explain. No Tyes
41.	Physical Examination: If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test? No EYes

Governmental Delinquencies: Are you delinquent in the payment of any obligation owed to the federal or state government or any political or taxing subdivision or any instrumentality thereof? (Include delinquencies in the payment of: Income, property, or other taxes; exactions, fees or special assessments; loans, including any defaults, on or under loans which are or were made by, guaranteed, insured or subsidized by any unit of government or instrumentality thereof; overpayment of benefits; required payments into or under governmental programs; payments under a diversion arrangement or other repayment schedule.) If applicable, please state whether such delinquency is under formal appeal.	•
Other: Please provide any additional information, favorable or unfavorable, which you feel should be considered in connection with your appointment. If none, please so state. None See affulned	
Please include resume and completed Statement of Substantial Interest not more than twelve months old.	
REFERENCES	
Name: John Rios Knows you how?: College - work Address: 1009 N. 92rd Kansas City KS 6012 Home Phone: 913-788-9873 Business Phone: 913-627-2616	
Name: Patricia Gallace Knows you how? Friend - Dragnizations Address: 7300 Walrevy Alle. Kansas City KS Holog Home Phone: 913-299-6879 Business Phone: N/A	
Name: John J. Tierce K Knows you how?: Former Partner-Cellergue Address: 110 Terrace Tr/W. Shareno KS (City, State, Zip) Home Phone: 913-268-8775 Business Phone:	<u>)</u>
Name: Raymond Daniels Knows you how?: Client Address: 2602 N, 100th Tow, Kansas City KS 66109 Home Phone: 913-328-1973 Business Phone: NA-retired	

AUTHORIZATION AND CERTIFICATION:

The facts set forth in my application are true and complete. False statements, answers, or omissions on this application shall be sufficient cause for nonconsideration or for dismissal after appointment or employment. I also recognize that my selection is based on receipt of satisfactory information from former employers and references, and upon my ability to perform the essential elements, with or without reasonable accommodations, for the position for which I am applying. I herein authorize investigation, without liability, of the information supplied by me in this application for employment or appointment including academic, occupational, health, law enforcement, and government records. I also authorize listed employers and references, without liability, to make full response to any inquiries in connection with this application for appointment or employment. I understand and agree that the terms, conditions, compensation, benefits, hours, schedule, and duration of my appointment or employment may be determined, changed, or modified from time to time at the will of the appointing authority or designee without limitation or condition. I FURTHER CERTIFY THAT I HAVE READ THE FOREGOING PARAGRAPH AND KNOWINGLY MAKE THIS AUTHORIZATION BY SETTING FORTH MY SIGNATURE.

I understand that if I am required to be registered, licensed, or certified by federal or state law or regulation for the position I seek, I will notify the appointing authority immediately if any investigation, limitation, or cancellation of my registration, licensure, or certification occurs. If any investigation, probation, limitation, or cancellation occurs, I understand that my failure to notify my appointing authority as described above will result in the termination of my appointment or employment.

Signature

Form 08/08 - Page 8

University of Kansas Hospital Authority

Supplemental Answer to Kansas Senate Appointments Questionnaire

3. List any professional licenses that you have obtained and include the number for each license.

ANSWER:

I am licensed to practice law in Kansas- Bar No. 12824 and Missouri- Bar No. 58407.

4. Why do you feel you are a good candidate for the position to which you have been appointed?

ANSWER:

My professional and personal background lends itself to the duties of the position as described in Kansas Statutes Annotated 76-3304. I am familiar with the issues of upper level management as well as the proper function of state agency governing boards. My experience: (1) as a public interest lawyer (representing urban and rural public school districts, a public library, community colleges, a local United Way, a community mental health centers, among others); (2) as legal counsel to for-profit concerns; (3) as the Chief Trial Counsel for the United States Army Transportation Center Fort Eustis Virginia; (4) as a member of national and local public service community foundations and (5) as a member of the Kansas Board of Regents has given me a deep appreciation for both the University of Kansas Hospital and the University of Kansas Medical School. I approach my appointment with a great deal of enthusiasm, confidence and most importantly, humility.

5. What do you see as the purpose or mission of the role to which you are seeking? appointment?

ANSWER: To facilitate the University of Kansas Medical Center in its mission to become on of the Nation's major research institutions and to remain mindful of the organization's primary obligation to serve the State of Kansas.

7. Government Experience: List any experience or association with local, state or federal government (exclusive of elective public office but including advisory, consulting, honorary, appointed or other part-time service or positions) and include dates of service.

ANSWER:

Legal Intern, Kansas Attorney General's Office, 1984-1985

Legal Intern, Shawnee County District Attorneys Office, 1985-1986

Staff Judge Advocate, United States Army, 1986-1990

Special Assistant United States Attorney, Eastern District of Virginia. 1987-1990

Governor's 21st Century Economic Task Force, 2000

Kansas Board of Regents, 2001-2005

11. **Organization Affiliations:** List all civic, cultural, educational, charitable, or work-related organizations that you have been associated with in the past ten years. Include any position held in the organization and the dates of service.

ANSWER:

ORGANIZATION	HIGHEST OFFICE	DURATION
KCK Area Chamber of Commerce	Chairman of the Board	1997 to 2003
Greater Kansas City Community Foundation	Secretary	2002 to present
National School Board Association	Director	2006 to 2007
National School Board Association – Council of		
School Attorneys	Chairman of the Board	2000 to present

Kansas Board of Regents	Regent	2001 to 2005
Kansas City Kansas Friends Of the Public Library	President	1997 to 2000
Community Foundation of Wyandotte County	Founding Member and Chairman of the Board	1998 to 2003
Governor's Committee on Economic Development	Committee member	2000
Kansas Council of School Attorneys	President	1992 to present

43. Other: Please provide any additional information, favorable or unfavorable, which you feel should be considered in connection with your appointment. If none, please so state.

ANSWER: I recognize that this appointment is an honor. With this in mind, please see response to questions previously submitted.





Sec. of St. bar code





KANSAS GOVERNMENTAL ETHICS COMMISSION

STATEMENT OF SUBSTANTIAL INTERESTS FORM

INSTRUCTIONS. This statement (pages 1 through 4) must be completed by individuals who are required to do so by law. Any individual who intentionally fails to file as required by law, or intentionally files a false statement, is subject to prosecution for a class B misdemeanor.

	Statement, is subject to prosecution for a class of misdemonion.
	Please read the "Guide" and Definition" section provided with this form for additional assistance in completing sections "C" through "G". If you have questions or wish assistance, please contact the
	Commission office at 109 West 9th, Topeka, KS or call 785-296-4219.
Α.	IDENTIFICATION: PLEASE TYPE OR PRINT
11.	Wunn Derul W.
	Last Name MI
	Wymore-Wum Paige A.
	Spouse's Name
	11110 Parkview Aue.
	Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number
	Kansas City KS 66109
	City, State, Zip Code
	913-721-3911 913-371-3838
	Home Phone Number (include area code) Business Phone Number (include area code)
_	TO DECIDED TO BE EN ED DECISION VOILABLE.
В	THIS FORM IS REQUIRED TO BE FILED BECAUSE YOU ARE: (check one or more of the following)
	1. State Elected Official (Governor, Lt. Governor, Attorney General, Commissioner of Insurance,
	State Treasurer, Secretary of State, State Senator, State Representative, Member of State Board of Education, or District Attorney);
	2. Appointed Member of a State Board, Council, Commission or Authority;
	3. Appointed State Position is Subject to Senate Confirmation;
	4. Employee of a State Agency or University;
	5. General Counsel for State Office;
	6. Candidate for State Office;
	7. Other (Contractor / Member of Compact).
	Hospital Board Authority
List Na	ame of Agency, Board, University or Elected Position (You may use abbreviations but not acronyms)
	Agency Division if applicable (May use acronyms) Position
*	The last four digits of your social security number will aid in identifying you from others with the same
	name on the computer list. This information is optional.
0 2	Rev. 3/2006

C. OWNERSHIP INTERESTS: List any corporation, partnership, proprietorship, trust, joint venture and every other business interest, including land used for income, and specific stocks, mutual funds or retirement accounts in which either you or your spouse has owned within the preceding 12 months a legal or equitable interest exceeding \$5,000 or 5%, whichever is less. If you or your spouse own more than 5% of a business, you must disclose the percentage held. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "C", check here _____.

				1
BUSINESS NAME AND ADDRESS	TYPE OF BUSINESS	DESCRIPTION OF INTERESTS O HELD	PERCENT OF OWNERSHIP INTERESTS	HELD BY WHOM
1. McAnany; Van Cleave i Phillips 707 Minnesota Aue; KCKS	Law Firm	Starchider	Ishare	Deryl
2.			,	
3.				
4.		. 25		
5.				
6.		-		
7.			,	
8.	•			
9.		·	•	
10.				

D. <u>GIFTS OR HONORARIA:</u> List any person or business from whom you or your spouse either individually or collectively, have received gifts or honoraria having an aggregate value of \$500 or more in the preceding 12 months.

If you have nothing to report in Section "D", check here _____.

NAME OF PERSON OR BUSINESS FROM WHOM GIFT RECEIVED		ADDRESS	RECEIVED BY:
1.			
2.	<u> </u>		
3.			

-33/

E.	RECEIPT OF COMPENSATION: List all places of employment in the last calendar year, and any
	other businesses from which you or your spouse received \$2,000 or more in compensation (salary, thing of
	value, or economic benefit conferred on in return for services rendered, or to be rendered), which was
	reportable as taxable income on your federal income tax returns.

1.	YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING
	CALENDAR YEAR. IF SAME AS SECTION "B", CHECK HERE
	If you have nothing to report in Section "E"1, check here

NAME OF BUSINESS		ADDRESS.	TYPE OF BUSINESS
1. McAveny. Van Cleave	and 707	Minnesota Aue	law Firm
Phil	lips	Koensas City KS	

SPOUSE'S PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING 2. CALENDAR YEAR

If you have nothing to report in Section "E"2, check here ____.

	NAME OF BUSINESS		ADDRESS	TYPE OF BUSINESS
	istrict Court	400 E.945	KCIMO	Federal Judiciary
2.				

OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or F. business in which you or your spouse hold a position of officer, director, associate, partner or proprietor at the time of filing, irrespective of the amount of compensation received for holding such position. Please insert additional page if necessary to complete this section. If you have nothing to report in Section "F", check here ____.

BUSINESS NAME AND ADDRESS	POSITION HELD	HELD BY WHOM
1. Greater KC Community Foundation 1800 Britimere Aux: KC MO 64	Secretary	Denyl
2 National School Board Assa Councilo 1680 Duke St. Alexandria, VA School Ath	Past Chair CLEA	Deryl
3 Greater Horizons Community Forest 1095 Broadway #130 Karsas City Mc	Dinastruc	Denyl
4 KLL Advancement Board KLL Medical Contor; Kaesas City KS	Boardnember	Denyl
5 Women's Chamber of Commerce 127 Minnesota Kango City KS	President	Reige
«Health Care Employees Chodit Un. 8919 Parallel Pkyly Rangas Cityk	Board	Paige
7.		Var
8.		

3-32

RECEIPT OF FEES AND COMMISSIONS: List each client or customer who pays fees or G. commissions to a business or combination of businesses from which fees or commissions you or your spouse received an aggregate of \$2,000 or more in the preceding calendar year. The phrase "client or customer" relates only to businesses or combination of businesses. In the case of a partnership, it is the partner's proportionate share of the business, and hence of the fee, which is significant, without regard to expenses of the partnership. An individual who receives a salary as opposed to portions of fees or commissions is generally not required to report under this provision. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "G", check here V.

	•		
	NAME OF CLIENT / CUSTOMER	ADDRESS	RECEIVED BY
		•	·
2.			
. 3.			
4.			
5			
6.			-
7.			
8.	,		
9,			
10.			
11.			
13.			

H.	DECLARATION:
	I, Devyl W. Work declare that this statement of substantial interests (including any accompanying pages and statements) has been examined by me and to the best of my knowledge and belief is

true, correct and complete statement of all of my substantial interests and ot understand that the intentional failure to file this statement as required by law or intentionally filing a false statement is a class B misdemeanor.

NUMBER OF ADDITIONAL PAGES _

Return your completed statement to the Secretary of State, Elections Division, Memorial Hall, First Floor, 120 SW 10th, Topeka, Kansas 66612-1594.

