

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
Renaee 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.

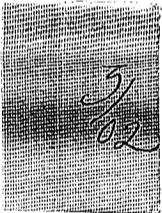
Chairperson Barnett called attention to follow-up information provided by Mr. Brad Smoot, Blue Cross Blue Shield of Kansas and Blue Cross Blue Shield of Kansas City, concerning **SB 136 - Patient protection act, prohibited provisions in agreement** which was heard on February 17, 2010 (Attachment 1). 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 (Attachment 2). 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 (Attachment 3). 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.



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.

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

Senator Barnett recognized Senator Kelly who submitted a balloon amendment to **SB 447**. 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 **SB 447** would be on Thursday's (03/04/10) agenda for continued discussion; he adjourned the meeting at 2:36 p.m.

BRAD SMOOT
ATTORNEY AT LAW

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(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

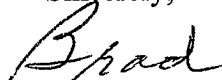
Dear Chairman Barnett:

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

1

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

Board Composition Prior to Confirmation of New Appointee:

(SEE ATTACHED LIST)

University of Kansas Hospital Authority

Gov Appts: 13
Total Appts: 19

Term Length: Four Years

Contact: Bob Page, President and CEO
University of Kansas Hospital
3901 Rainbow Boulevard
Kansas City, KS 66160
913/588-1022

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.

Statute: KSA 76-3304

Party Ratio: N/A

Confirmation:

Gov Appt Counts Male/Female

1st-2nd-3rd-4th

R/D/U

Board Active

Term Limit:

Reg Board

9:3

2:2:8:1

10:2:0

** Member fully assumed duties but awaits confirmation by the Full Senate

| | <u>County</u> | <u>Affiliation</u> | <u>CD</u> | <u>H</u> | <u>S</u> | <u>Appointment Date</u> | <u>Expiration Date</u> | <u>Reapt</u> |
|--|---------------|--------------------|-----------|----------|----------|-------------------------|------------------------|--------------------------|
| Atkinson, Dr. Barbara F. 9110 Oak Valley Dr. De Soto, KS 66018 | Johnson | | 3 | | | 12/15/2003 | | <input type="checkbox"/> |

Position: an ex-officio member

Succeeds: Deborah Powell

Appointed By: Statute

Nominations:

Statutory Remarks: Executive Dean, KU Medical School

Seat #: 010&011

Barkman, Dr. William
3901 Rainbow
Kansas City, KS 66160

Wyandotte

3

5/26/1998

Position: ex-officio member

Succeeds: new position

Appointed By: Statute

Nominations:

Statutory Remarks: Interim Chief of Staff of Medical Center

Seat #: 012

| | <u>County</u> | <u>Affiliation</u> | <u>CD</u> | <u>H</u> | <u>S</u> | <u>Appointment Date</u> | <u>Expiration Date</u> | <u>Reapt</u> |
|---|---------------|--------------------|-----------|----------|----------|-------------------------|------------------------|--------------------------|
| Honse, Mr. Robert W. 1533 Fountain Dr. Lawrence, KS 66047 | Douglas | R | 2 | 45h | 2s | 6/18/2008 | 3/15/2010 | <input type="checkbox"/> |

Position: Chair

Succeeds: himself -- reappointed

Appointed By: Governor

Nominations:

Statutory Remarks: Public Member

Seat #: 006

Keim, Ms. Betty T.
3608 W. 71st Street
Prairie Village, KS 66208
bettyk@kc.rr.com

Johnson

R

3

25h

7s

11/9/2004

3/15/2008

Position: a member

Succeeds: herself -- reappointed

Appointed By: Governor

Nominations:

Statutory Remarks: Public Member

Seat #: 015

Kerr, The Honorable Dave M
72 Willowbrook
Hutchinson, KS 67502
kerr@senate.state.ks.us

Reno

R

1

101h

34s

1/8/2008

3/15/2010

Position: a member

Succeeds: himself -- reappointed

Appointed By: Governor

Nominations:

Statutory Remarks: Vice chair

Seat #: 019

Lindenbaum, Ms. Sharon
8501 Cherokee Place
Leawood, KS 66206
sharon.lindenbaum@twcable.com

Johnson

R

3

21h

7s

12/17/2008

3/15/2011

Position: a member

Succeeds: herself -- reappointment

Appointed By: Governor

Nominations:

Statutory Remarks: Public Member

Seat #: 017

| | <u>County</u> | <u>Affiliation</u> | <u>CD</u> | <u>H</u> | <u>S</u> | <u>Appointment Date</u> | <u>Expiration Date</u> | <u>Reapt</u> |
|---|---------------|--------------------|-----------|----------|----------|-------------------------|------------------------|--------------------------|
| Chapman, Mr. Edward J. Jr. 1315 S. Broadway Leavenworth, KS 66048-0915 ejc@echapmanlaw.com | Leavenworth | R | 2 | 41h | 5s | 8/5/2005 | 3/15/2009 | <input type="checkbox"/> |
| Position: a member Succeeds: himself -- reappointed Appointed By: Governor Nominations: Statutory Remarks: Public Member Seat #: 001 | | | | | | | | |
| Farha, Dr. George J. 300 N. Terrace Wichita, KS 67208-3944 mneel@gj.kscoxmail.com | Sedgwick | R | 4 | 83h | 30s | 12/20/2007 | 3/15/2010 | <input type="checkbox"/> |
| Position: a member Succeeds: himself -- reappointed Appointed By: Governor Nominations: Statutory Remarks: | | | | | | | | |
| Gaunce, Ms. Patricia A. 7300 Waverly Kansas City, KS 66109 pgaunce@kc.rr.com | Wyandotte | D | 3 | 36h | 4s | 12/20/2007 | 3/15/2011 | <input type="checkbox"/> |
| Position: a member Succeeds: herself- reappointment Appointed By: Governor Nominations: Statutory Remarks: | | | | | | | | |
| Graves, Mr. Gregory M 5085 W 177th Terrace Stilwell, KS 66085 ggraves@burnsmcd.com | Johnson | D | 3 | 27h | 37s | 12/17/2008 | 3/15/2011 | <input type="checkbox"/> |
| Position: a member Succeeds: Robert Honse Appointed By: Governor Nominations: Statutory Remarks: Representing 3rd CD Seat #: 007 | | | | | | | | |

| | <u>County</u> | <u>Affiliation</u> | <u>CD</u> | <u>H</u> | <u>S</u> | <u>Appointment Date</u> | <u>Expiration Date</u> | <u>Reapt</u> |
|---|---------------|--------------------|-----------|----------|----------|-------------------------|------------------------|--------------------------|
| Miller, Dr. Karen 5507 Fairway Road Shawnee Mission, KS 66205 | Johnson | D | 3 | 25h | 7s | 5/26/1998 | | <input type="checkbox"/> |

Position: ex-officio member

Succeeds: new position

Appointed By: Statute

Nominations:

Statutory Remarks: Dean of KU School of Nursing

Seat #: 013

Murphy, Mr. Thomas E. III
1000 W 58th Terrace
Kansas City, MO 64113
Tom.Murphy@sprint.com

| | | | | | | | |
|---------|---|---|-----|----|----------|-----------|--------------------------|
| Johnson | R | 3 | 38h | 9s | 8/5/2005 | 3/15/2008 | <input type="checkbox"/> |
|---------|---|---|-----|----|----------|-----------|--------------------------|

Resign Note:

Position: a member

Succeeds: Clay Edmands

Appointed By: Governor

Nominations:

Statutory Remarks: Public Member

Seat #: 005

Page, Robert
3901 Rainbow Boulevard
Kansas City, KS 66160

0

Position: Ex-Officio

Succeeds: Irene Cumming

Appointed By:

Nominations:

Statutory Remarks: CEO University of Kansas Hospital

Seat #: 014

Payne, Mr. John B.
9900 NE 114th Circle
VanCouver, WA 98662
John.Payne@banfield.net

| | | | | | | | |
|---------|---|---|-----|-----|-----------|-----------|--------------------------|
| Johnson | R | 3 | 28h | 11s | 11/9/2004 | 3/15/2008 | <input type="checkbox"/> |
|---------|---|---|-----|-----|-----------|-----------|--------------------------|

Position: a member

Succeeds: himself -- reappointed

Appointed By: Governor

Nominations:

Statutory Remarks: Public Member

Seat #: 004

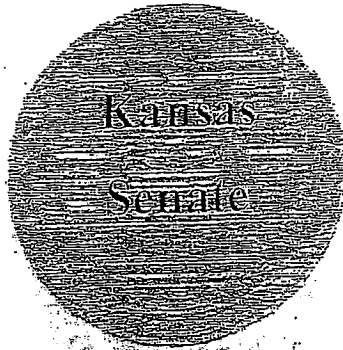
| | <u>County</u> | <u>Affiliation</u> | <u>CD</u> | <u>H</u> | <u>S</u> | <u>Appointment Date</u> | <u>Expiration Date</u> | <u>Reapt</u> |
|---|---|--------------------|-----------|----------|----------|-------------------------|------------------------|--------------------------|
| Regnier, Mr. Robert 3400 119th St Leawood, KS 66209 bregnier@bankbv.com | Johnson | R | 3 | 28h | 4s | 10/16/2007 | 3/15/2009 | <input type="checkbox"/> |
| | Position: member Succeeds: Eric Jager Appointed By: Governor Nominations: Statutory Remarks: Public Member Seat #: 002 | | | | | | | |
| Sunderland, Mr. Charles T. 10209 W. 139th Terr Overland Park, KS 66221 charlie.sunderland@ashgrove.com | Johnson | R | 3 | 48h | 37s | 5/5/2005 | 3/15/2009 | <input type="checkbox"/> |
| | Position: a member Succeeds: himself -- reappointed Appointed By: Governor Nominations: Statutory Remarks: Public Member Seat #: 008 | | | | | | | |
| Vacant, Position | | | 0 | | | 7/15/2009 | | <input type="checkbox"/> |
| | Position: ex officio Succeeds: Appointed By: Nominations: Statutory Remarks: Research Institutions representative Seat #: 009 | | | | | | | |
| Warren, Dr. Linda MD P.O. Box 38, 205 S. Hanover Hanover, KS 66945 ldwarren@bluevalley.net | Washington | | 1 | 106h | 21s | 1/8/2008 | 3/15/2010 | <input type="checkbox"/> |
| | Position: a member Succeeds: Mark Parkinson Appointed By: Governor Nominations: Statutory Remarks: Seat #: 003 | | | | | | | |

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, Mark R. Jonson 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;
- ~~Chairperson of the Senate Confirmation Oversight Committee; and~~

- The Vice Chair of the Senate Confirmations Oversight Committee.

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.

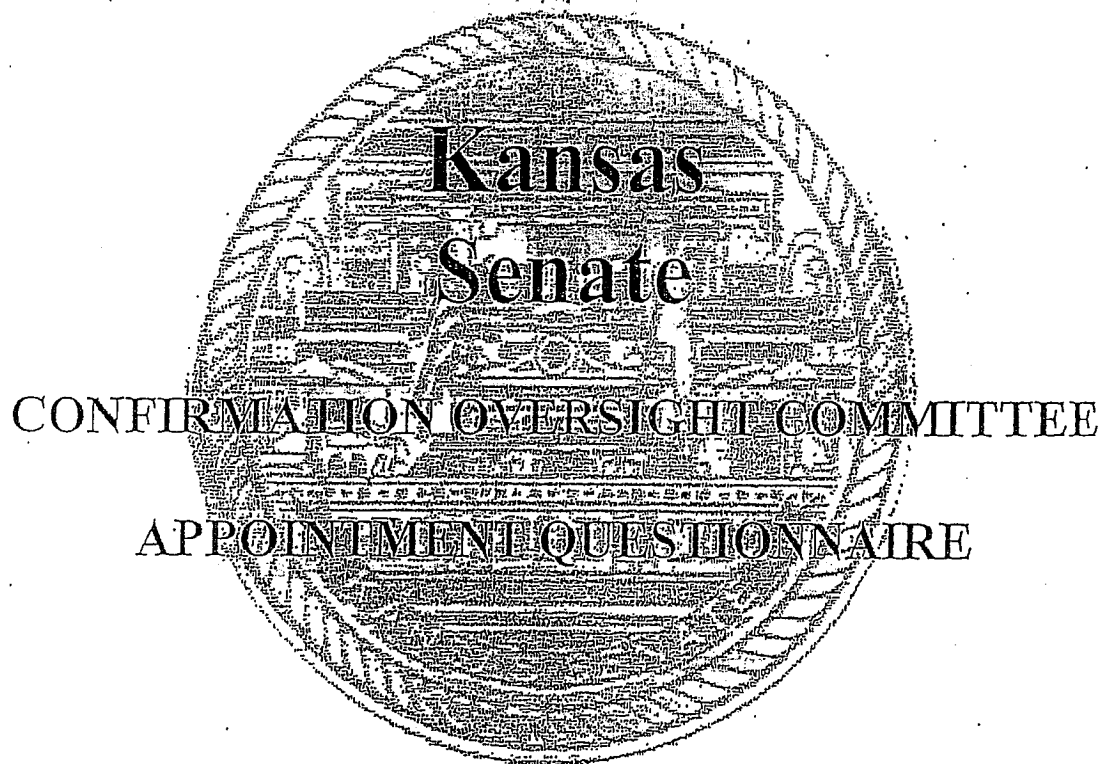
Signature

A handwritten signature in black ink, appearing to read "Mark R. Jonson".

Date

10/5/09

Form 08/08



Full Name: Mark Richard Jorgenson
(please include title and middle name along with any names previously used)

Home Address: 10607 West 50th Terrace Shawnee, KS 66203
(Street Address) (City, State, Zip)

Driver's License Number: Social Security Number:

Position to which Appointed: KU Hospital Authority

Appointing Authority: Governor of the State 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, "□" 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 along with any names previously used)

Position to which Appointed: KU Hospital Authority

Appointing Authority: Governor of the State of Kansas

Home Address: 10607 West 50th Terrace Shawnee, KS 66203
(Street Address) (City, State, Zip)

Business Name: U. S. Bank

Business Address: 9900 West 87th Street Overland Park, KS 66212
(Street Address) (City, State, Zip)

Position Title: President and CEO - Kansas City Market

Home Phone: 913-268-6414 Business Phone: 913-652-5150 Cell Phone: 913-645-8278

Fax Number: 913-652-5111 E-Mail Address: mark.r.jorgenson@usbank.com

Kansas resident? Yes / No Date of Birth: 7/24/57 Place of Birth: Hastings, NE

Registered Voter? Yes Party Affiliation: Republican

Congressional District: 3 Kansas Senate District: 10 Kansas Representative District: 18

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 MUST BE ANSWERED ON THIS ORIGINAL FORM. 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
4. Why do you feel you are a good candidate for the position to which you have been appointed? In my position 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 position. What do you see as the purpose or mission of the role to which you have been appointed? As a board member, my role would be to help facilitate and support the delivery of top flight healthcare to the citizens of Kansas and to encourage the proliferation of medical and health sciences education and research.
5. None
6. Military Service: List rank, date and type of discharge from active service. None
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. None 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. No Yes
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. No Yes
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

16. 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 Yes
17. 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.
 None
18. 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 Yes
19. 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
20. 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.
 None
21. 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 Yes
22. 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
23. 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 Council of Greater Kansas City in support of PK-12 education.
 None
24. 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.
 None

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 unforeseen at this point in time, could arise? I would abstain from any vote that may be construed as a conflict of interest and I would expect to attest annually to compliance with an ethics code of 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 Yes
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 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 Yes
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 Yes
- 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 Yes

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. that organization was sued by former employees for wrongful discharge. All charges were dismissed and Kansas Venture Capital, Inc. was exonerated.
 No Yes
 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.
 No Yes
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 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
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 Yes

42. 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.
 No Yes

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.
 None

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

REFERENCES

Name: Lawrence C. Gates Knows you how?: Serves on our Bank Advisory Board

Address: 9842 Rosewood Overland Park, KS 66207
(City, State, Zip)

Home Phone: 913-381-9080 Business Phone: 913-661-0222

Name: Chancellor Robert Hemenway Knows you how?: I have served on numerous boards with him in the past.

Address: 1532 Lilac Lane Lawrence, KS 66044

Home Phone: 785-841-0989 Business Phone: 785-864-3131
(City, State, Zip)

Name: R. A. Edwards Knows you how?: Served together on Kansas Venture Capital
c/o First National Bank of Hutchison Inc. Board

Address: Box 913 Hutchison, KS 67504-0913

Home Phone: 620-663-7079 Business Phone: 620-694-2224
(City, State, Zip)

Name: Sandra A.J. Lawrence Knows you how?: Serves on our Bank Advisory Board

Address: 2809 West 117th Street Leawood, KS 66211

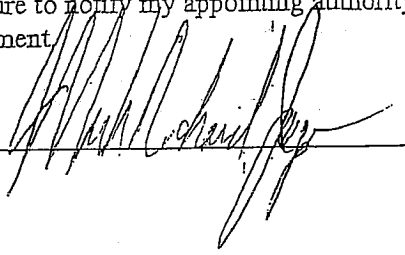
Home Phone: 913-339-9024 Business Phone: 816-234-3655
(City, State, Zip)

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 _____



Date _____

4/2/09



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.

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.

A. IDENTIFICATION: PLEASE TYPE OR PRINT

JORGENSEN MARIL R
 Last Name First Name MI

MARY C. JORGENSEN
 Spouse's Name

10607 W. 50TH TERRACE
 Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number

SHAWNEE, KS 66203
 City, State, Zip Code

913-268-6414 913-652-5750
 Home Phone Number (include area code) Business Phone Number (include area code)

B. 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).

List Name of Agency, Board, University or Elected Position (You may use abbreviations but not acronyms)

UNIVERSITY OF KANSAS HOSPITAL AUTHORITY BOARD MEMBER
 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.

1310

- 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. | U.S. BANK | 9900 W. 87TH ST. O.P., KS 66212 | BANK / FINANCIAL INSTITUTION |
| 2. | | | |

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 | ADDRESS | 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. | KANSAS VENTURE CAPITAL, INC 11300 TOMAHAWK CREEK PARKWAY STE 250 LEAWOOD, KS 66211 | BOARD MEMBER | MARIE JOHNSON |
| 2. | KANSAS CITY AREA DEVELOPMENT COUNCIL 2500 Commerce Tower 911 MAIN KC, MO 64105-20014 | CO-CHAIR OF BOARD | " |
| 3. | CIVIC COUNCIL OF GREATER KANSAS CITY 1200 MAIN STE. 230 KC, MO 64105 | VICE CHAIR OF BOARD | " |
| 4. | GREATER KANSAS CITY CHAMBER OF COMMERCE 2600 Commerce Tower 911 Main KC, MO 64105 | BOARD MEMBER | " |
| 5. | MIDWEST RESEARCH INSTITUTE 425 VOLKER BLVD. KC, MO 64110 | TRUSTEE | " |
| 6. | PRESBYTERIAN WOMEN PCUSA 100 WILKINSON COUSVILLE, KY | BOARD MEMBER | MARIE JOHNSON |
| 7. | HEART OF AMERICA COUNCIL - REP. SECT OF AMERICA 10210 HOLMES RD. KC, MO 64131 | BOARD MEMBER | MARIE JOHNSON |
| 8. | | | |

G. **RECEIPT OF FEES AND COMMISSIONS:** List each client or customer who pays fees or 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 .

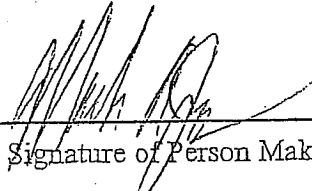
| | NAME OF CLIENT / CUSTOMER | ADDRESS | RECEIVED BY |
|-----|---------------------------|---------|-------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
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| 7. | | | |
| 8. | | | |
| 9. | | | |
| 10. | | | |
| 11. | | | |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

H. **DECLARATION:**

I, MARIE R. JOHNSON, 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.

10/15/09

Date


Signature of Person Making Statement

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.

Attachment Sheet
To Statement of Substantial Interest
Question "C" OWNERSHIP 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 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" OWNERSHIP 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 | 401K | 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, "□" 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 along with any names previously used)

Position to which Appointed: KU Hospital Authority

Appointing Authority: Governor of the State of Kansas

Home Address: 10607 West 50th Terrace Shawnee, KS 66203
(Street Address) (City, State, Zip)

Business Name: U. S. Bank

Business Address: 9900 West 87th Street Overland Park, KS 66212
(Street Address) (City, State, Zip)

Position Title: President and CEO - Kansas City Market

Home Phone: 913-268-6414 Business Phone: 913-652-5150 Cell Phone: 913-645-8278

Fax Number: 913-652-5111 E-Mail Address: mark.r.jorgenson@usbank.com

Kansas resident? Yes / No Date of Birth: 7/24/57 Place of Birth: Hastings, NE

Registered Voter? Yes Party Affiliation: Republican

Congressional District: 3 Kansas Senate District: 10 Kansas Representative District: 18

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 MUST BE ANSWERED ON THIS ORIGINAL FORM. 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
4. Why do you feel you are a good candidate for the position to which you have been appointed? In my position 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 position.
5. What do you see as the purpose or mission of the role to which you have been appointed? As a board member, my role would be to help facilitate and support the delivery of top flight healthcare to the citizens of Kansas and to encourage the proliferation of medical and health sciences education and research.
6. Military Service: List rank, date and type of discharge from active service.
 None
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.
 None 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.
 No Yes
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.
 No Yes
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

16. 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 Yes
17. 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.
 None
18. 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 Yes
19. 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
20. 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.
 None
21. 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 Yes
22. 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
23. 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 Council of Greater Kansas City in support of PK-12 education.
 None
24. 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.
 None

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 unforeseen at this point in time, could arise? I would abstain from any vote that may be construed as a conflict of interest and I would expect to attest annually to compliance with an ethics code of 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 Yes

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 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 Yes

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 Yes

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 Yes

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. that organization was sued by former employees for wrongful discharge. All charges were dismissed, and Kansas Venture Capital, Inc. was exonerated.
 No Yes
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.
 No Yes
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 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
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 Yes

42. 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.

No Yes

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.

None

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

REFERENCES

Name: Lawrence C. Gates Knows you how?: Serves on our Bank Advisory Board

Address: 9842 Rosewood Overland Park, KS 66207
(City, State, Zip)

Home Phone: 913-381-9080 Business Phone: 913-661-0222

Name: Chancellor Robert Hemenway Knows you how?: I have served on numerous boards with him in the past.

Address: 1532 Lilac Lane Lawrence, KS 66044
(City, State, Zip)

Home Phone: 785-841-0989 Business Phone: 785-864-3131

Name: R. A. Edwards Knows you how?: Served together on Kansas Venture Capital c/o First National Bank of Hutchison Inc. Board

Address: Box 913 Hutchison, KS 67504-0913
(City, State, Zip)

Home Phone: 620-663-7079 Business Phone: 620-694-2224

Name: Sandra A.J. Lawrence Knows you how?: Serves on our Bank Advisory Board

Address: 2809 West 117th Street Leawood, KS 66211
(City, State, Zip)

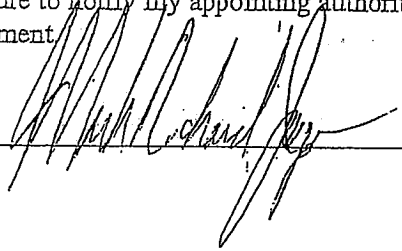
Home Phone: 913-339-9024 Business Phone: 816-234-3655

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 _____



Date _____

4/2/09



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.

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.

A. IDENTIFICATION: PLEASE TYPE OR PRINT

JORGENSEN MARY R
Last Name First Name MI

MARY C. JORGENSEN
Spouse's Name

10607 W. 50TH TERRACE
Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number

SHAWNEE, KS 66203
City, State, Zip Code

913-268-5414 913-652-1750
Home Phone Number (include area code) Business Phone Number (include area code)

B. 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).

List Name of Agency, Board, University or Elected Position (You may use abbreviations but not acronyms)

UNIVERSITY OF KANSAS HOSPITAL AUTHORITY BOARD MEMBER
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.

1310

- 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 See Attachment

| | BUSINESS NAME AND ADDRESS | TYPE OF BUSINESS | DESCRIPTION OF INTERESTS HELD | PERCENT OF OWNERSHIP INTERESTS | HELD BY WHOM |
|-----|---------------------------|------------------|-------------------------------|--------------------------------|--------------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |
| 7. | | | | | |
| 8. | | | | | |
| 9. | | | | | |
| 10. | | | | | |

- D. **GIFTS OR HONORARIA:** 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 X

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

- 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. | US BANK | 9900 W. 87TH ST. OPA, KS 66212 | BANK / FINANCIAL INSTITUTION |
| 2. | | | |

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 | ADDRESS | 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. | KANSAS VENTURE CAPITAL, INC. 11300 TOMAHAWK CIRCLE PARKWAY STE 250 LEAWOOD KS 66211 | BOARD MEMBER | MARK JOHNSON |
| 2. | KANSAS CITY AREA DEVELOPMENT COUNCIL 2500 Commerce Tower 911 MAIN KC, MO 64105-2009 | CO-CHAIR OF BOARD | " |
| 3. | CIVIC COUNCIL OF GREATER KANSAS CITY 1200 MAIN STE 230 KC, MO 64105 | VICE CHAIR OF BOARD | " |
| 4. | GREATER KANSAS CITY CHAMBER OF COMMERCE 2600 Commerce Tower 911 MAIN KC, MO 64105 | BOARD MEMBER | " |
| 5. | MIDWEST RESEARCH INSTITUTE 425 VOLKER BLVD. KC, MO 64110 | TRUSTEE | " |
| 6. | PRESBYTERIAN WOMEN PCUSA 100 WITHERSPOON LOUISVILLE, KY | BOARD MEMBER | MARY JOHNSON |
| 7. | HOPE OF AMERICA Council - B2K SONS OF AMERICA 10210 Holmes Rd. KC, MO 64131 | BOARD MEMBER | MARK JOHNSON |
| 8. | | | |

- G. RECEIPT OF FEES AND COMMISSIONS: List each client or customer who pays fees or 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 .

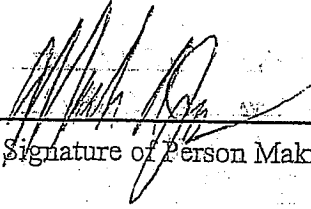
| | NAME OF CLIENT / CUSTOMER | ADDRESS | RECEIVED BY |
|-----|---------------------------|---------|-------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |
| 7. | | | |
| 8. | | | |
| 9. | | | |
| 10. | | | |
| 11. | | | |
| 12. | | | |
| 13. | | | |

H. DECLARATION:

I, MARIE R. JOHNSON, 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.

10/5/09

Date


Signature of Person Making Statement

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.

Attachment Sheet
To Statement of Substantial Interest
Question "C" OWNERSHIP 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 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" OWNERSHIP 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 | 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:

03/02/10

Attachment:

3

University of Kansas Hospital Authority

Gov Appts: 13
Total Appts: 19

Term Length: Four Years
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.

Contact: Bob Page, President and CEO
University of Kansas Hospital
3901 Rainbow Boulevard
Kansas City, KS 66160
913/588-1022

Statute: KSA 76-3304
Party Ratio: N/A

Confirmation: **Gov Appt Counts** Male/Female 1st-2nd-3rd-4th R/D/U **Board Active**
Term Limit: **Reg Board** 9:3 2:2:8:1 10:2:0

** Member fully assumed duties but awaits confirmation by the Full Senate

| | <u>County</u> | <u>Affiliation</u> | <u>CD</u> | <u>H</u> | <u>S</u> | <u>Appointment Date</u> | <u>Expiration Date</u> | <u>Reapt</u> |
|--|---------------|--------------------|-----------|----------|----------|-------------------------|------------------------|--------------------------|
| Atkinson, Dr. Barbara F. 9110 Oak Valley Dr. De Soto, KS 66018 | Johnson | | 3 | | | 12/15/2003 | | <input type="checkbox"/> |
| <p>Position: an ex-officio member Succeeds: Deborah Powell Appointed By: Statute Nominations: Statutory Remarks: Executive Dean, KU Medical School Seat #: 010&011</p> | | | | | | | | |
| Barkman, Dr. William 3901 Rainbow Kansas City, KS 66160 | Wyandotte | | 3 | | | 5/26/1998 | | <input type="checkbox"/> |
| <p>Position: ex-officio member Succeeds: new position Appointed By: Statute Nominations: Statutory Remarks: Interim Chief of Staff of Medical Center Seat #: 012</p> | | | | | | | | |

| | <u>County</u> | <u>Affiliation</u> | <u>CD</u> | <u>H</u> | <u>S</u> | <u>Appointment Date</u> | <u>Expiration Date</u> | <u>Reapt</u> |
|---|---------------|--------------------|-----------|----------|----------|-------------------------|------------------------|--------------------------|
| Chapman, Mr. Edward J. Jr. 1315 S. Broadway Leavenworth, KS 66048-0915 ejc@echapmanlaw.com | Leavenworth | R | 2 | 41h | 5s | 8/5/2005 | 3/15/2009 | <input type="checkbox"/> |

Position: a member
Succeeds: himself -- reappointed
Appointed By: Governor
Nominations:

Statutory Remarks: Public Member

Seat #: 001

Farha, Dr. George J.
300 N. Terrace
Wichita, KS 67208-3944
mneel@gj.kscoxmail.com

Sedgwick

R

4

83h

30s

12/20/2007

3/15/2010

Position: a member
Succeeds: himself -- reappointed
Appointed By: Governor
Nominations:

Statutory Remarks:

Seat #: 016

Gaunce, Ms. Patricia A.
7300 Waverly
Kansas City, KS 66109
pgaunce@kc.rr.com

Wyandotte

D

3

36h

4s

12/20/2007

3/15/2011

Position: a member
Succeeds: herself- reappointment
Appointed By: Governor
Nominations:

Statutory Remarks:

Seat #: 018

Graves, Mr. Gregory M
5085 W 177th Terrace
Stilwell, KS 66085
ggraves@burnsmcd.com

Johnson

D

3

27h

37s

12/17/2008

3/15/2011

Position: a member
Succeeds: Robert Honse
Appointed By: Governor
Nominations:

Statutory Remarks: Representing 3rd CD

Seat #: 007

| | <u>County</u> | <u>Affiliation</u> | <u>CD</u> | <u>H</u> | <u>S</u> | <u>Appointment Date</u> | <u>Expiration Date</u> | <u>Reapt</u> |
|---|---------------|--------------------|-----------|----------|----------|-------------------------|------------------------|--------------------------|
| Honse, Mr. Robert W. 1533 Fountain Dr. Lawrence, KS 66047 | Douglas | R | 2 | 45h | 2s | 6/18/2008 | 3/15/2010 | <input type="checkbox"/> |

Position: Chair

Succeeds: himself -- reappointed

Appointed By: Governor

Nominations:

Statutory Remarks: Public Member

Seat #: 006

Keim, Ms. Betty T.
3608 W. 71st Street
Prairie Village, KS 66208
bettyk@kc.rr.com

Johnson

R

3

25h

7s

1/21/2010

3/15/2012

Position: a member

Succeeds: herself -- reappointed

Appointed By: Governor

Nominations:

Statutory Remarks: Public Member

Seat #: 015

Kerr, The Honorable Dave M
72 Willowbrook
Hutchinson, KS 67502
kerr@senate.state.ks.us

Reno

R

1

101h

34s

1/8/2008

3/15/2010

Position: a member

Succeeds: himself -- reappointed

Appointed By: Governor

Nominations:

Statutory Remarks: Vice chair

Seat #: 019

Lindenbaum, Ms. Sharon
8501 Cherokee Place
Leawood, KS 66206
sharon.lindenbaum@twcable.com

Johnson

R

3

21h

7s

12/17/2008

3/15/2011

Position: a member

Succeeds: herself -- reappointment

Appointed By: Governor

Nominations:

Statutory Remarks: Public Member

Seat #: 017

| | <u>County</u> | <u>Affiliation</u> | <u>CD</u> | <u>H</u> | <u>S</u> | <u>Appointment Date</u> | <u>Expiration Date</u> | <u>Reapt</u> |
|---|---------------|--------------------|-----------|----------|----------|-------------------------|------------------------|--------------------------|
| Miller, Dr. Karen 5507 Fairway Road Shawnee Mission, KS 66205 | Johnson | D | 3 | 25h | 7s | 5/26/1998 | | <input type="checkbox"/> |

Position: ex-officio member
Succeeds: new position
Appointed By: Statute
Nominations:

Statutory Remarks: Dean of KU School of Nursing

Seat #: 013

Murphy, Mr. Thomas E. III
1000 W 58th Terrace
Kansas City, MO 64113
Tom.Murphy@sprint.com

Johnson

R

3

38h 9s

8/5/2005

3/15/2008

Resign Note:

Position: a member
Succeeds: Clay Edmands
Appointed By: Governor
Nominations:

Statutory Remarks: Public Member

Seat #: 005

Page, Robert
3901 Rainbow Boulevard
Kansas City, KS 66160

0

Position: Ex-Officio
Succeeds: Irene Cumming
Appointed By:
Nominations:

Statutory Remarks: CEO University of Kansas Hospital

Seat #: 014

Payne, Mr. John B.
9900 NE 114th Circle
VanCouver, WA 98662
John.Payne@banfield.net

Johnson

R

3

28h 11s

11/9/2004

3/15/2008

Position: a member
Succeeds: himself -- reappointed
Appointed By: Governor
Nominations:

Statutory Remarks: Public Member

Seat #: 004

| | <u>County</u> | <u>Affiliation</u> | <u>CD</u> | <u>H</u> | <u>S</u> | <u>Appointment Date</u> | <u>Expiration Date</u> | <u>Reapt</u> |
|---|---|--------------------|-----------|----------|----------|-------------------------|------------------------|--------------------------|
| Regnier, Mr. Robert 3400 119th St Leawood, KS 66209 bregnier@bankbv.com | Johnson | R | 3 | 28h | 4s | 10/16/2007 | 3/15/2009 | <input type="checkbox"/> |
| | Position: member Succeeds: Eric Jager Appointed By: Governor Nominations: Statutory Remarks: Public Member Seat #: 002 | | | | | | | |
| Sunderland, Mr. Charles T. 10209 W. 139th Terr Overland Park, KS 66221 charlie.sunderland@ashgrove.com | Johnson | R | 3 | 48h | 37s | 5/5/2005 | 3/15/2009 | <input type="checkbox"/> |
| | Position: a member Succeeds: himself -- reappointed Appointed By: Governor Nominations: Statutory Remarks: Public Member Seat #: 008 | | | | | | | |
| Vacant, Position | | | 0 | | | 7/15/2009 | | <input type="checkbox"/> |
| | Position: ex officio Succeeds: Appointed By: Nominations: Statutory Remarks: Research Institutions representative Seat #: 009 | | | | | | | |
| Warren, Dr. Linda MD P.O. Box 38, 205 S. Hanover Hanover, KS 66945 ldwarren@bluevalley.net | Washington | | 1 | 106h | 21s | 1/8/2008 | 3/15/2010 | <input type="checkbox"/> |
| | Position: a member Succeeds: Mark Parkinson Appointed By: Governor Nominations: Statutory Remarks: Seat #: 003 | | | | | | | |

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.

- * 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: Vernonia School District 47J v. Acton, "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, The Advocate, Summer 1992.



CONFIRMATION OVERSIGHT COMMITTEE

Acknowledgment of Release of Tax and Criminal Records Information Form

I, Deryl William Wynn 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;
- ~~Chairperson of the Senate Confirmation Oversight Committee; and~~
- The Vice Chair of the Senate Confirmations Oversight Committee.

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

Deryl W. Wynn

Date

10-30-09



**Kansas
Senate**
CONFIRMATION OVERSIGHT COMMITTEE
APPOINTMENT QUESTIONNAIRE

Full Name: Deryl William Wynn
(please include title and middle name along with any names previously used)

Home Address: 11110 Parkview Ave Kansas City KS 66109
(Street Address) (City, State, Zip)

Driver's License Number: [REDACTED] Social Security Number: [REDACTED]

Position to which Appointed: Hospital Board Authority

Appointing Authority: Governor's Office

* 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, "" 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: Deryl William Wynn
(please include title and middle name along with any names previously used)

Position to which Appointed: Hospital Board Authority

Appointing Authority: Governor's office

Home Address: 1110 Parkview Ave. Kansas City KS 66109
(Street Address) (City, State, Zip)

Business Name: McAnany, Van Cleave and Phillips

Business Address: 707 Minnesota Ave, Suite 400 Kansas City KS
(Street Address) (City, State, Zip) 66101

Position Title: Attorney / Partner

Home Phone: 913-721-3911 Business Phone: 913-371-3838 Cell Phone: 913-302-3418

Fax Number: 913-371-4722 E-Mail Address: dwyann@mvplaw.com

Kansas resident? Yes / No Date of Birth: 9/26/61 Place of Birth: Altus, OK

Registered Voter? Yes Party Affiliation: Democrat

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 MUST BE ANSWERED ON THIS ORIGINAL FORM. 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. See Resume

3. List any professional licenses that you have obtained and include the number for each license.
See attachment
4. Why do you feel you are a good candidate for the position to which you have been appointed?
See attachment
5. What do you see as the purpose or mission of the role to which you have been appointed? --
See attachment
6. Military Service: List rank; date and type of discharge from active service. --
 None *Captain, US Army, August 1990, Honorable Discharge*
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 *See attachment*
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
10. Honors and Awards: List all scholarships, fellowships, honorary degrees, honorary society memberships and any other special recognition for outstanding service or achievements.
 None *Please see resume*
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 attachment*
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.
 No Yes
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.
 No Yes
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

16. **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 Yes
17. **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
18. **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 Yes *Cousin - district court judge for State of Kansas.*
19. **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
20. **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.
 None
21. **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 Yes
22. **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
23. **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 commenting on casino gambling in Wyandotte County. The letter was referenced in the Congressional Record, (circa 1999)*
 None
24. **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.
 None

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 unforeseen at this point in time, could arise? *Immediately disclose to agency*

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. *Corporate Compliance Officer or legal Counsel; abstain and remove myself from voting.*

No Yes

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 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 Yes

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 Yes

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 Yes

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. *Civil action in Wyandotte Co. District Court - Indian Springs Mall vs. McArany, VanCleave?*
 No Yes
 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. *Phillip*
 No Yes *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 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
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 Yes

42. 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.

No Yes

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.

None

See attachment

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

REFERENCES

Name: John Bios Knows you how?: College - work

Address: 1009 N. 92nd Kansas City KS 66112
(City, State, Zip)

Home Phone: 913-788-9873 Business Phone: 913-627-2616

Name: Patricia Gance Knows you how?: Friend - organizations

Address: 7300 Waverly Ave. Kansas City KS 66109
(City, State, Zip)

Home Phone: 913-299-6879 Business Phone: N/A

Name: John J. Jurczyk Knows you how?: Former partner - colleague

Address: 110 Terrace Trl W. Shawnee KS
(City, State, Zip)

Home Phone: 913-268-8775 Business Phone: _____

Name: Raymond Daniels Knows you how?: client

Address: 2602 N. 100th Terr. Kansas City KS 66109
(City, State, Zip)

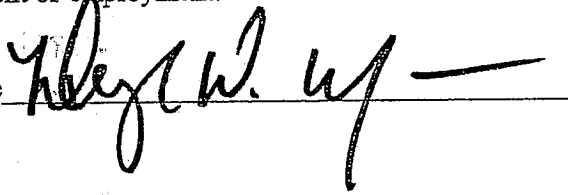
Home Phone: 913-328-1973 Business Phone: N/A - retired

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

_____

Date

11-01-09

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 one 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:

| <u>ORGANIZATION</u> | <u>HIGHEST OFFICE</u> | <u>DURATION</u> |
|---|-----------------------|-----------------|
| 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 Community Foundation of Wyandotte County | President | 1997 to 2000 |
| | 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.

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.

A. IDENTIFICATION: PLEASE TYPE OR PRINT

Wynn Deryl W.
 Last Name First Name MI

Wymore-Wynn Paige A.
 Spouse's Name

11110 Parkview Ave.
 Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number

Kansas City KS 66109
 City, State, Zip Code

913-721-3411 913-371-3838
 Home Phone Number (include area code) Business Phone Number (include area code)

B. 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 Name 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.

0241

- 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 .

| BUSINESS NAME AND ADDRESS | TYPE OF BUSINESS | DESCRIPTION OF INTERESTS HELD | PERCENT OF OWNERSHIP INTERESTS | HELD BY WHOM |
|---|------------------|-------------------------------|--------------------------------|--------------|
| 1. McAnany, Van Cleave & Phillips 707 Minnesota Ave; KC KS | Law Firm | Partner Shareholder | 1 share | Deny |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |
| 9. | | | | |
| 10. | | | | |

- D. GIFTS OR HONORARIA: 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. | | |
| 3. | | |

- 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. | McAveney, VanCleave and Phillips | 707 Minnesota Ave Kansas City KS | Law Firm |
| 2. | | | |

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 ____.

| | NAME OF BUSINESS | ADDRESS | TYPE OF BUSINESS |
|----|-------------------|------------------|-------------------|
| 1. | US District Court | 400 E. 9th KC MO | Federal Judiciary |
| 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. | Greater KC Community Foundation 1800 Baltimore Ave. KC MO 64 | Secretary | Deryl |
| 2. | National School Board Assn. Council of 1680 Duke St; Alexandria, VA School Atny. | Past Chair } CISA | Deryl |
| 3. | Greater Horizons Community Found. 1095 Broadway #130 Kansas City MO | Director | Deryl |
| 4. | KLE Advancement Board KLE Medical Center, Kansas City KS | Board Member | Deryl |
| 5. | Women's Chamber of Commerce 727 Minnesota Kansas City KS | President | Paige |
| 6. | Health Care Employees Credit Un. 8919 Parallel Pkwy Kansas City KS | Board Member | Paige |
| 7. | | | |
| 8. | | | |

- G. **RECEIPT OF FEES AND COMMISSIONS:** List each client or customer who pays fees or 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 .

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

H. **DECLARATION:**

I, Daryl W. Wynne, 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.

10-31-09

Date

Daryl W. Wynne

Signature of Person Making Statement

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.