

Senate Confirmation Information Summary

*Prepared and Submitted by the Office of Governor Sam Brownback*

**Appointee: Greg Graves**

**Position: Member, Kansas University  
Hospital Authority**

**Expiration Date: March 15, 2015**

**Term Length: Four years**

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

**Party Affiliation: R**

- **Statutory Geographic Representation Requirements: of the 13 members representing the general public, there shall be at least one member from each congressional district**

**County: Johnson County**

**Size Requirement: 19**

**Other, specify:**

- **Statutory party affiliation requirement: N/A**
- **Statutory industry or occupation requirements: N/A**

**Salary: Routine subsistence**

**Predecessor: himself**


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**Board Composition Prior to Confirmation of New Appointee: see attached board report**

February 7, 2012

To the Senate of the State of Kansas:

Submitted herewith for confirmation by the Senate are appointments made by me as the Governor of the State of Kansas, pursuant to law.



Sam Brownback  
Kansas Governor

Secretary, Social and Rehabilitation Services, Phyllis Gilmore [R], Overland Park, pursuant to the authority vested in me by K.S.A. 75-5301 effective upon the date of confirmation by the Senate, to serve at the pleasure of the Governor, to succeed Robert Siedlecki.

Member, University of Kansas Hospital Authority, Greg Graves [R], Stilwell, pursuant to the authority vested in me by K.S.A. 76-3304 effective upon the date of confirmation by the Senate, to serve a four year term, to expire March 15, 2015, to succeed himself.

Member, University of Kansas Hospital Authority, Sharon Lindenbaum [R], Leawood, pursuant to the authority vested in me by K.S.A. 76-3304 effective upon the date of confirmation by the Senate, to serve a four year term, to expire March 15, 2015, to succeed herself.

Member, University of Kansas Hospital Authority, Alex Ammar [R], Wichita, pursuant to the authority vested in me by K.S.A. 76-3304 effective upon the date of confirmation by the Senate, to serve a four year term, to expire March 15, 2015, to succeed George Farha.

## University of Kansas Hospital Authority

Members:		Appointed by	Number of Appointments	Number of Senate Confirmations
Legislators:	0	Governor	13	13
House:	0			
Senate:	0	<b>Ex officio(s)</b>		
Non-Legislative:	19	University of Kansas Chancellor		
Total Members:	19	University of Kansas Hospital Authority President		
		University of Kansas Hospital Chief of Medical Staff		
		University of Kansas Medical Center Executive Vice Chancellor		
		University of Kansas School of Medicine Executive Dean		
		University of Kansas School of Nursing Dean		

### Entity Description

KSA 76-3304 *et seq.* created the University of Kansas Hospital Authority. The Authority is an independent instrumentality of the State.

The Authority is governed by a nineteen-member Board of Directors (Board) serving terms of four years. Thirteen of the members are appointed by the Governor, subject to confirmation by the Senate as provided in KSA 75-4315b. Members appointed by the Governor are representatives of the general public 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. Of the 13 members representing the general public, there must be at least one member from each congressional district. Six members must be *ex officio*, voting members consisting of the Chancellor of the University of Kansas, the Executive Vice Chancellor of the University of Kansas Medical Center, the Executive Dean of the University of Kansas School of Medicine, the Chief of Staff of the University of Kansas Hospital Medical Staff, the President of the Authority, and the Dean of the University of Kansas School of Nursing.

The Board annually elects one of their number as Chairperson and another as Vice-Chairperson. The Board also elects a Secretary and Treasurer for terms determined by the Board. The same person may serve as both Secretary and Treasurer. The Board establishes an executive committee, nominating committee, and other standing or special committees and prescribe their duties and powers.

Members of the Board of Directors of the Authority serve without compensation. Members of the Board attending meetings of the Board, or attending a subcommittee meeting authorized by the Board, are paid mileage and all other applicable expenses.

The Board meets at least six times per year and at such other times as it deems appropriate, or upon call by the President or the Chairperson, or upon written request of a majority of the Directors.

The Board may adopt, repeal and amend such rules, procedures and bylaws, not contrary to law or inconsistent with this act, as it deems expedient for its own governance and for the governance and management of the Authority. A majority of the total voting membership of the Board constitutes a quorum for meetings. The Board may act by a majority of those at any meeting where a quorum is present, except upon such issues as the Board may determine shall require a vote of 10 members for approval. The Board meets for the initial meeting upon call by the Chancellor of the University of Kansas who acts as temporary Chairperson until officers are elected.

The Board appoints a President who serves at the pleasure of the Board. The President serves as the Chief Executive Officer of the Authority. The President's salary is set by the Board. The President directs and supervises administrative affairs and the general management of the Authority. The President, as a member of the Board of Directors, may not vote on such President's salary.

The Authority continues until terminated by law. Upon any such dissolution of the Authority, all property, funds and assets must be vested in the state, University of Kansas Medical Center or other hospital entity as designated by the board and approved by act of the Kansas Legislature.

## University of Kansas Hospital Authority – Board of Directors

### Powers and Duties

The Board has the power to:

- Enter into contracts, guarantees, or any other instrument and agreement necessary or convenient for the exercise of its powers and functions including contracts with hospitals or other health care businesses to operate and manage any or all of the hospital facilities or operations and to incur liabilities and secure the obligations of any entity or individual;
- Borrow money and to issue bonds, pledging all or any part of the Authority's assets therefor;
- Purchase, lease, trade, exchange, or otherwise acquire, maintain, hold, improve, mortgage, sell, lease, and dispose of property;
- Incur or assume indebtedness to, and enter into contracts with the Kansas Development Finance Authority, which is authorized to borrow money and provide financing for the Authority;
- Accept any gifts, grants and loans of funds, property, or any other aid;
- Procure insurance, participate in insurance plans, or provide self-insurance or both as it deems necessary or convenient to carry out the purposes and provisions of the Hospital Authority Act;
- Appoint, supervise, and set the salary and compensation of a President of the Authority who is appointed by and serves at the pleasure of the Board;
- Fix, revise, charge and collect rates, rentals, fees, and other charges for the services or facilities furnished by or on behalf of the Authority, and to establish policies and procedures regarding any such service rendered for the use, occupancy or operation of any such facility;
- Create, acquire, or dispose of any entity organized for a purpose related to or in support of the mission of the Authority;
- Participate in joint ventures with individuals, corporations, governmental bodies or agencies, partnerships, associations, insurers, or other entities to facilitate any activities or programs consistent with the public purpose and intent of the Hospital Authority Act;
- Create a nonprofit entity or entities for the purpose of soliciting, accepting and administering grants, gifts, and bequests; and
- Provide assistance, including the making of loans and providing employees to corporations, partnerships, associations, joint ventures, or other entities, whether or not such corporations, partnerships, associations, joint ventures, or other entities are owned or controlled in whole or in part, directly or indirectly, by the Authority, if consistent with the purpose of the Hospital Authority Act.

# University of Kansas Hospital Authority

Gov Appts: 13

Term Length: Four Years

Contact: Lee Allison

**Notes:**

Reconstituted per SB642: 19 members (6 ex-officio members, 13 appointed by Gov.) At least one member for each CD. Chair & Vice Chair elected annually by the Board. President appointed by Board. Cannot serve more than three consecutive four-year terms. Appoint members who are recognized for outstanding knowledge and leadership in the fields of finance, business, health-care management, health care providers, legal affairs, education or government.

University of Kansas Hospital  
Kansas City, KS 66160-0001  
(913) 388-7332

bpage@kumc.edu, jonjackso1@kumc.edu

SSI: No Compensation Statute:

Meeting Frequency: Dates of Meetings: The 2nd Tuesday of Jan, March, May, July, Sept., Nov. | 1-2 PM | Location of Meetings: Westwood Campus | 2330 Shawnee Mission Parkway | Meetings Frequency: 6 times a year

**Appointed By:**

Statute: KSA 76-3304 Confirmation: Yes

Appointed By:

Party Ratio: N/A

Gov Appt Counts Male/Female 11:4  
Current Chair: R/D/U  
1st-2nd-3rd-4th 1:1:13:1  
9:4:5

Dr. Barbara F. Atkinson  
9110 Oak Valley Dr  
De Soto, KS 66018-8301

Position: Executive Dean, KU Medical School  
Predecessor: Deborah Powell  
Appointed By: STATUTE  
Nominations:  
Reason for Departure:

Dr. William Barkman  
3901 Rainbow  
Kansas City, KS 66103-2937

Wyandotte

Position: Interim Chief of Staff of Medical Center  
Predecessor: new position  
Appointed By: STATUTE  
Nominations:  
Reason for Departure:

Dr. Kirk T Benson  
5213 W. 124th Terrace  
Kansas City, KS 66160-0001  
kbenson@kumc.edu

Wyandotte

Position: member  
Predecessor: Linda Warren  
Appointed By: GOVERNOR  
Nominations:  
Reason for Departure:

Receipt

Expire Date

Appointment Date

S

H

CD

Affiliation

County

KS03

KS03

12/15/2003

11s

20h

KS00

9/1/2011

3/15/2014

Dr. George J. Farha  
300 North Terrace Drive  
Wichita, KS 67208-3944  
mneeel@gl.kscocmail.com

Ms. Patricia A. Gaunce  
7300 Waverly Ave  
Kansas City, KS 66109-2466  
pgaunce@kc.rr.com

Mr. Gregory M Graves  
5085 W 177th Ter  
Stilwell, KS 66085-8905  
ggraves@burnsmcd.com

Ms. Bernadette Gray-Little

Mr. Robert W. Honse  
1533 Fountain Dr  
Lawrence, KS 66047-9306  
bobbhonse@sunflower.com

Mr. Mark R. Jorgenson  
10607 West 50th Terrace  
Shawnee, KS 66203-1656  
mark.r.jorgenson@usbank.com

Sedgwick	Republican Party	KS04	83h	30s	12/20/2007	3/15/2010
<b>Position:</b> a member <b>Predecessor:</b> himself – reappointed <b>Appointed By:</b> GOVERNOR <b>Nominations:</b> <b>Reason for Departure:</b>						
Wyandotte	Democratic Party	KS03	36h	4s	12/20/2007	3/15/2011
<b>Position:</b> a member <b>Predecessor:</b> herself: reappointment <b>Appointed By:</b> GOVERNOR <b>Nominations:</b> <b>Reason for Departure:</b>						
Johnson	Democratic Party	KS03	27h	37s	12/17/2008	3/15/2011
<b>Position:</b> Representing 3rd CD <b>Predecessor:</b> Robert Honse <b>Appointed By:</b> GOVERNOR <b>Nominations:</b> <b>Reason for Departure:</b>						
<b>Reason for Departure:</b> 8/15/2009						
<b>Position:</b> Research Institutions representative <b>Predecessor:</b> Robert Hemenway <b>Appointed By:</b> <b>Nominations:</b> <b>Reason for Departure:</b>						
Douglas	Republican Party	KS02	45h	2s	9/1/2011	3/15/2014
<b>Position:</b> public member <b>Predecessor:</b> himself <b>Appointed By:</b> GOVERNOR <b>Nominations:</b> <b>Reason for Departure:</b>						
Johnson	Republican Party	KS03	18h	10s	3/10/2010	3/15/2012

Position: Public Member  
Predecessor: Thomas Murphy  
Appointed By: GOVERNOR  
Nominations:  
Reason for Departure:

Johnson      Republican Party      KS03      25h      7s      1/21/2010      3/15/2012

Ms. Betty T. Keim  
3608 W 71st St  
Prairie Village, KS 66208-3119  
bettyk@kc.rr.com

Position: Public Member  
Predecessor: herscif -- reappointed  
Appointed By: GOVERNOR  
Nominations:  
Reason for Departure:

Reno      Republican Party      KS01      101h      34s      1/8/2008      3/15/2010

The Honorable Dave M Kerr  
72 Willowbrook Street  
Hutchinson, KS 67502-8948  
kerr@senate.state.ks.us

Position: Vice chair  
Predecessor: himself -- reappointed  
Appointed By: GOVERNOR  
Nominations:  
Reason for Departure:

Johnson      Republican Party      KS03      21h      7s      12/17/2008      3/15/2011

Ms. Sharon Lindenbaum  
8501 Cherokee Pl  
Leawood, KS 66206-1446  
shlindy@yahoo.com

Position: Public Member  
Predecessor: herself -- reappointment  
Appointed By: GOVERNOR  
Nominations:  
Reason for Departure:

Johnson      Democratic Party      KS03      25h      7s      5/26/1998

Dr. Karen Miller  
5507 Fairway Road  
Fairway, KS 66205-2641

Position: Dean of KU School of Nursing  
Predecessor: new position  
Appointed By: STATUTE  
Nominations:  
Reason for Departure:

Wyandotte      KS03

Robert Page  
3901 Rainbow Boulevard  
Kansas City, KS 66103-2937

Position: CEO University of Kansas Hospital



Predecessor: Irene Cumming  
Appointed By:  
Nominations:  
Reason for Departure:

Johnson  
Republican Party  
KS03  
28h  
4s  
1/19/2011  
3/15/2013

Mr. Robert Regnier  
3400 W 119th St  
Leawood, KS 66209-1079  
bregnier@bankbv.com

Position: Public Member  
Predecessor: Eric Jager  
Appointed By:  
Nominations:  
Reason for Departure:

Johnson  
Republican Party  
KS03  
48h  
11s  
2/2/2010  
3/15/2012

Mr. Scott Slabotsky  
5625 W 131st St  
Leawood, KS 66209-3634  
sslabotsky@cbiz.com

Position: member  
Predecessor: John Payne|John Payne  
Appointed By: GOVERNOR  
Nominations:  
Reason for Departure:

Johnson  
Republican Party  
KS03  
48h  
37s  
1/19/2011  
3/15/2013

Mr. Charles T. Sunderland  
10209 W 139th Ter  
Overland Park, KS 66221-2299  
charlie.sunderland@ashgrove.com

Position: Public Member  
Predecessor: himself -- reappointed  
Appointed By:  
Nominations:  
Reason for Departure:

Wyandotte  
Democratic Party  
KS03  
36h  
5s  
3/10/2010  
3/15/2013

Mr. Deryl Wynn  
11110 Parkview Avenue  
Kansas City, KS 66109-3458  
dwynt@myplaw.com

Position: Public Member  
Predecessor: Edward J. Chapman, Jr.  
Appointed By: GOVERNOR  
Nominations:  
Reason for Departure:

**Greg M. Graves, P.E**  
President and Chief Executive Officer  
Burns & McDonnell Engineering Company

Mr. Graves became President and Chief Executive Officer of Burns & McDonnell on January 1, 2004. He is responsible for the day-to-day operation of the firm. In addition, he coordinates the activities of the firm's various production and support groups to assure uniformity and consistency in both domestic and international operations, as well as developing and executing corporate policies and goals. Burns & McDonnell employs over 2,500 professional and support personnel and generates annual fees of \$760 million.

Business Career

Mr. Graves joined the firm in 1980 after graduating from the South Dakota School of Mines and Technology. He has held progressively responsible positions as stack tester, design engineer, project manager, and marketing director for a wide variety of energy-related projects. His technical assignments included air quality control evaluations, contract administration, investigative studies, performance testing, and project management. He was appointed vice president and marketing director for Energy in 1993. During this time, he expanded Burns & McDonnell's client base by building relationships with potential EPC partners and clients. In the late 1990s, he led the way in positioning the firm to take advantage of the boom in the power market.

Mr. Graves was promoted to general manager of the Energy Division in 1997 and oversaw a 200 percent growth in personnel and 400 percent growth in revenue from 1997 to 2001. During this period, the Energy Division designed new generation facilities with output of more than 20,000 megawatts. Under his stewardship, Burns & McDonnell's Energy Division made the successful transition into the power EPC market. Also during this time, the firm branched into more comprehensive energy services such as project development, plant services, and development engineering.

In July 2001, Mr. Graves was named to the newly created position of Energy Group President with overall responsibility for the continued successful growth of Burns & McDonnell's energy-related business. He set goals, provided resources and helped direct the vision of the firm's energy services, which include new power generation, transmission and distribution, small power services, energy services, and management and economic services.

Professional Affiliations/Civic Activities

Mr. Graves is a member of the National Society of Professional Engineers, Missouri Society of Professional Engineers, and the American Society of Mechanical Engineers. Mr. Graves is also a member of the Civic Council of Greater Kansas City and is on the Board of Directors of Midwest Research Institute, the Kansas City Area Development Council (Co-Chair 2005-07), the Kansas City Sports Commission, the Greater Kansas City Chamber of Commerce, the Economic Development Corporation of Kansas City, Missouri, the Hawthorn Foundation, the University of Kansas Advancement Board and United Missouri Bank. Mr. Graves is Chairman of the Board of the Kansas City Area Life Sciences Institute and Starlight Theatre. He is registered in seven states.

General/Educational Background

Mr. Graves was born in Sioux Falls, South Dakota, in 1958. He graduated from the South Dakota School of Mines and Technology with a bachelor's degree in mechanical engineering in 1980 and received an MBA degree in executive management from Rockhurst College in 1987. After presenting the commencement address at the 2005 graduation of his *alma mater*, SDSM&T, Mr. Graves received an honorary doctorate degree.

Mr. Graves' family includes his wife Deanna, daughter and son-in-law Jessica and Jason Chanos of Woodland Hills, Calif.; daughter Kristin, a senior at the University of Kansas (and a killer soccer player); and son Gregory, a sophomore at Blue Valley High School. The family resides in Stilwell, Kansas.

07/22/08

## **Greg and Deanna Graves**

Greg and Deanna Graves view public service as a duty in return for all they have received from the Greater Kansas City community. As a husband/wife team, they have worked to make a difference in the lives of those less fortunate and to do their part to reinvest in many areas that make Kansas City one of the most livable cities in the nation.

Together, Greg and Deanna have chaired fundraisers for the American Heart Association, the March of Dimes, Starlight Theatre, Treads and Threads for KU Hospital's Cancer Center, Hope House, the De-Tocqueville Society of United Way and Children's Mercy. In 2009, they were named Kansas City's Philanthropists of the Year.

Deanna has served in leadership roles with the Hope House Capital Campaign, the TLC Capital Campaign and the United Way De-Tocqueville Society. She served on the Hope House Board of Directors and is the immediate past chair of MSPE auxiliary. In her local school community, Deanna has worked with various PTO organizations for the past 18 years.

As Chairman, President and CEO of Burns & McDonnell, Greg is currently serving a one-year term as Chairman of the Board of Directors of the Greater Kansas City Chamber of Commerce. He also serves on the board's of the Civic Council of Greater Kansas City, Midwest Research Institute, the Hawthorn Foundation, University of Kansas Advancement Board, United Missouri Bank, University of Kansas Hospital Authority Board, University of Kansas School of Engineering Advisory Board, and Rockhurst University.

# Kansas Senate

## CONFIRMATION OVERSIGHT COMMITTEE

### APPOINTMENT QUESTIONNAIRE

Full Name: **Gregory Michael Graves**

(please include title and middle name along with any names previously used)

Home Address: **5085 W. 177th Terrace Stilwell, KS 66085 Johnson**

(Street Address)

(City, State, Zip)

\* Driver's License Number:

\* Social Security Number:

Position to which Appointed: **5085 W. 177th Terrace, Stilwell, KS, 66085**

Appointing Authority: **Governor**

\* The driver's license and social security numbers will not be made public but are used by the KBI and Department of Revenue.

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, "%o" 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: **Gregory Michael Graves**

(please include title and middle name along with any names previously used)

Position to which Appointed: **5085 W. 177th Terrace, Stilwell, KS, 66085**

Appointing Authority: **Governor**

Home Address: **5085 W. 177th Terrace Stilwell, KS 66085**

(Street Address)

(City, State, Zip)

Business Name: **Burns & McDonnell**

Business Address: **9400 Ward Parkway, Kansas City, MO, 64114**

(Street Address)

(City, State, Zip)

Position Title: **CEO**

Home Phone: **913-681-3177**

Business Phone: **816-822-3013**

Cell Phone: **816-803-5559**

Fax Number: **816-822-3006**

E-Mail Address: **ggraves@burnsmcd.com**

Kansas resident? **Yes**

\* Date of Birth:

Place of Birth: **Sioux Falls, SD**

Registered Voter? **Yes**

Party Affiliation: **Republican**

Congressional District: **3**

KS Senate District: **37** KS Representative District: **27**

Resident County: **Johnson**

Do you have the legal right to live and work in the United States? %oYes / %oNo

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?

South Dakota School of Mines & Technology Mechanical Eng 5-80

Rockhurst College MBA Executive Management 5-86

- 2 Describe your employment experience. Include any expertise related to the position to which you were appointed. **See attached bio**
- 3 List any professional licenses that you have obtained and include the number for each license.  
**PE Licenses California #M31294 Iowa #14918 Michigan #6201048863 Missouri #021394 North Carolina #028490 Ohio #63758**
- Why do you feel you are a good candidate for the position to which you have been appointed? **My personal advocacy for KU as well as the advancement of cancer treatment in KC**
- What do you see as the purpose or mission of the role to which you have been appointed? **Proper governance and advancement of the University of Kansas Hospital**
- 4 **Military Service:** List rank, date and type of discharge from active service. **NO**
- 5 **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. **NO**
- 6 **Elective Public Office:** List all elective public offices sought and/or held with dates of service. **NO**
- 7 **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**
- 8 **Honors and Awards:** List all scholarships, fellowships, honorary degrees, honorary society memberships and any other special recognition for outstanding service or achievements. **YES**  
**See attached bio**
- 9 **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. **YES**  
**KC Civic Council, KC Chamber of Commerce, Economic Development Council, KU Advancement Board, KU School of Engineering Advancement Board, Rockhurst University, Starlight**
- 10 **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**
- 11 **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**
- 12 **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**

- 13 **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**
- 14 **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**
- 15 **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. **YES**  
**It is always good for a board of directors to have engineering and construction experience.**
- 16 **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**
- 17 **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**
- 18 **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. **YES**  
**KU Hospital is a current client of Burns & McDonnell**
- 19 **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**
- 20 **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**
- 21 **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. **YES**  
**School of Engineering Legislation, 2012**
- 22 **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. **YES**  
**Burns & McDonnell provides consulting engineering services to KS 'department of Transportation & others**

- 23 **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. **NO**
- 24 **Conflict of Interest:** How would you resolve any potential conflicts of interest that, while maybe unforeseen at this point in time, could arise? **Proper governance and advancement of the University of Kansas Hospital**
- 25 **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**
- 26 **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**
- 27 **U.S. Military Convictions:** Have you ever been convicted by any military court? If so, please provide details. **NO**
- 28 **Imprisonment:** Have you ever been imprisoned, been on probation or been on parole? If so, please provide details. **NO**
- 29 **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**
- 30 **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**
- 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**



- 31 **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. **YES**  
**No unless credit card settlement is considered civil litigation.**
- 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. **YES**  
**Same as above**
- 32 **Drivers License:** Has your driver's license ever been suspended or revoked? If so, please describe. **NO**
- 33 **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**
- 34 **Security Clearance Denial:** Have you ever been denied a military or other governmental clearance? If so, please explain. **NO**
- 35 **Firings:** a.) During the past ten years, have you been fired from a job for any reason? If so, please explain. **NO**
- b.) During the past ten years, have you quit a job after being told that you would be fired? If so, please explain. **NO**
- c.) During the past ten years, did you leave a job by mutual agreement because of specific problems? If so, please explain. **NO**
- 36 **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**
- 37 **Consumption of Alcohol:** Have you ever or are you currently abusing alcohol? If so, please explain. **NO**
- 38 **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**
- 39 **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**

- 40 **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**
- 41 **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. **NO**

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

#### REFERENCES

- Name: **Bob Page** Knows you how?: **Work related**  
Address: **University of KS Hosp. MS 3011 3901 Rainbow Blvd.** **Kansas City, KS 66204**  
(City, State, Zip)  
Home Phone: **913-588-7332** Business Phone: **913-588-1293**
- Name: **Mayor Joe Reardon** Knows you how?: **Work related**  
Address: **Unified Gov. of Wyandotte County KCK 701 N. 7th St.** **Kansas City, KS 66101**  
(City, State, Zip)  
Home Phone: **913-573-5010** Business Phone: **913-573-5010**
- Name: **Roshann Parris** Knows you how?: **Work related**  
Address: **Parris Communications 4510 Belleview Ste 110** **Kansas City, MO 64111**  
(City, State, Zip)  
Home Phone: **816-931-8900** Business Phone: **816-931-8900**
- Name: **Dr. Barbara Atkinson** Knows you how?: **Work related**  
Address: **University of KS Hosp. MS 2015 3901 Rainbow Blvd.** **Kansas City, KS 66160**  
(City, State, Zip)  
Home Phone: **913-588-1440** Business Phone: **913-588-1400**

## **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 non-consideration 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 CHECKING THE BOX BELOW.

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.

**By checking this box, I declare under penalty of perjury that I am the person named above, and the foregoing information is true and correct.**

Signed and generated on: 12/9/2011 9:03:46 AM



## CONFIRMATION OVERSIGHT COMMITTEE

Acknowledgment of Release of Tax and Criminal Records Information Form

I, Greg Graves (print name) acknowledge that as part of the

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 "Greg Graves", written over a horizontal line.

Date

2/7/12

Form 08/08

STATE OF KANSAS



KANSAS GOVERNMENTAL ETHICS COMMISSION

ELECTRONIC STATEMENT OF SUBSTANTIAL INTERESTS FORM

**INSTRUCTIONS:** This statement 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:**

Graves

Last Name

Greg

First Name

M

MI

Deanna

Spouse's Name

5085 W. 177th Terrace

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

Stilwell, KS 66085

City, State, Zip Code

(913) 681-3177

Home Phone Number

(816) 822-3205

Business Phone Number

**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 a State Agency;
- 6. Candidate for State Office.
- 7. Other (Contractor / Member of Compact)

University of Kansas Hospital Board

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

Board Member

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. \*

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**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.	Burns & McDonnell 9400 Ward Parkway Kansas City, MO 64114	Engineering	Stock directly held & through retirement accounts	1.5%	self

**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.			

**E. RECEIPT OF COMPENSATION:** (Part 1) 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.	Burns & McDonnell	9400 Ward Parkway, Kansas City, MO 64114	Engineering
2.	UMB Financial Corporation	928 Grand Blvd. Kansas City, MO 64141	Financial Institution

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.			

**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.	Burns & McDonnell 9400 Ward Parkway, Kansas City, MO 64114	Chairman & CEO	self
2.	University of Kansas Hospital 3901 Rainbow Blvd. Kansas City, KS 66160-0001	Board member	self
3.	MRI 425 Volker Blvd. Kansas City, MO 64110-2299	Board member	self
4.	Greater Kansas City Chamber of Commerce 30 W. Pershing Ste 301 Kansas City, MO 64108	Chairman	self
5.	Economic Development Council (EDC) 10 Petticoat Lane, Suite 250 Kansas City, MO 64106	Board member	self
6.	UMB 1010 Grand Blvd. Kansas City, MO 64106-2202	Board member	self
7.	Rockhurst University 1100 Rockhurst Road Kansas City, MO 64132-1276	Board member	self
8.	Starlight Theatre 4600 Starlight Road Kansas City, MO 64132-1276	Board member	self

**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.		

**H. DECLARATION:** I 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.

Date Electronically Filed: 04/29/2011  
 Name of Person Making Statement: Greg M. Graves