

**STATE MEDICAL BOARD
OF OHIO**

2009 JUL -6 PM 12: 49

**STATE OF OHIO
THE STATE MEDICAL BOARD
VOLUNTARY RETIREMENT FROM THE
PRACTICE OF MASSAGE THERAPY**

I, Clifford Stumbaugh, L.M.T., am aware of my rights to representation by counsel, the right of being formally charged and having a formal adjudicative hearing, and do hereby freely execute this document and choose to take the actions described herein.

I, Clifford Stumbaugh, L.M.T., do hereby voluntarily, knowingly, and intelligently retire from the practice of massage therapy, effective upon the last date of signature below.

I, Clifford Stumbaugh, L.M.T., do hereby voluntarily, knowingly and intelligently surrender my renewal card in connection with my certificate to practice massage therapy #33.004740, to the State Medical Board of Ohio [Board].

I understand that as a result of the surrender herein I am no longer permitted to practice massage therapy in any form or manner in the State of Ohio.

I agree that I shall be ineligible for, and shall not apply for, reinstatement or restoration of certificate to practice massage therapy, License #33.004740 or issuance of any other certificate pursuant to the authority of the State Medical Board of Ohio, on or after the date of signing this Voluntary Retirement from the Practice of Massage Therapy. Any such attempted reapplication shall be considered null and void and shall not be processed by the Board.

I, Clifford Stumbaugh, L.M.T., hereby release the State Medical Board of Ohio, its members, employees, agents and officers, jointly and severally, from any and all liability arising from the within matter.

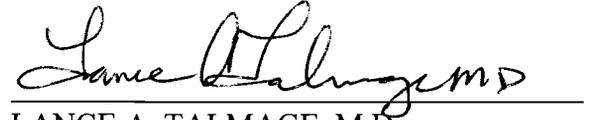
This document shall be considered a public record as that term is used in Section 149.43, Ohio Revised Code. Further, this information may be reported to appropriate organizations, data banks and governmental bodies. I, Clifford Stumbaugh, L.M.T., acknowledge that my social security number will be used if this information is so reported and agree to provide my social security number to the Board for such purposes.

I stipulate and agree that I am taking the action described herein in lieu of formal disciplinary proceedings pursuant to Section 4731.22(B)(10), Ohio Revised Code.

EFFECTIVE DATE

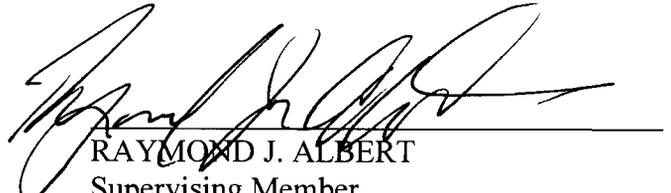
It is expressly understood that this Voluntary Retirement is subject to ratification by the Board prior to signature by the Secretary and Supervising Member and shall become effective upon the last date of signature below.


CLIFFORD STUMBAUGH, L.M.T.


LANCE A. TALMAGE, M.D.
Secretary

7-2-09
DATE

7-8-09
DATE


RAYMOND J. ALBERT
Supervising Member

7/8/09
DATE


ANGELA M. MCNAIR
Enforcement Attorney

7/6/09
DATE

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THE NEXT RENEWAL NOTICES WILL BE MAILED ON OR
BEFORE MAY 1, 2009 UNDER SECTION 4731.15(B) R.C.,
YOU MUST NOTIFY THE BOARD IN WRITING OF ANY
CHANGE OF ADDRESS.

CLIFFORD STUMBAUGH
99 REDWOOD RD
MANSFIELD OH 44907

STATE MEDICAL BOARD OF OHIO

77 S. HIGH ST., COLUMBUS, OHIO 43215-6127

THE RECORDS OF THE STATE MEDICAL BOARD
OF OHIO INDICATE THAT YOU HOLD THE
FOLLOWING ACTIVE LIMITED LICENSE:

33 . 004740

CLIFFORD STUMBAUGH
Licensed Massage Therapist

THIS LICENSE IS VALID THROUGH AUGUST 31, 2009
AUDIT NUMBER : 232



State Medical Board LIMITED PRACTITIONER'S CERTIFICATE

No. 4740

This Certifies that Clifford H. Stumbaugh of the
County of Richland, State of Ohio, is hereby authorized to practice

Massage

in the State of Ohio, in accordance with, and subject to the provisions of Sections 4731.15-16-17-18-19-20-21-22 of the Revised Code of Ohio, and the rules and regulations established by the State Medical Board governing such practice.

This certificate does NOT permit the holder to treat infectious, contagious or venereal diseases, nor to prescribe or administer drugs or perform surgery.



Given under the hands and seal of the Ohio State Medical Board
at the City of Columbus, this 20th day of January A. D. 1987.

Wm. E. Ketchum
PRESIDENT
Henry J. Coullet
SECRETARY