IN AND BEFORE THE OKLAHOMA STATE BOARD OF MEDICAL LICENSURE AND SUPERVISION STATE OF OKLAHOMA

| STATE OF OKLAHOMA, ex rel. |) |
|----------------------------|-----|
| THE OKLAHOMA BOARD |) |
| OF MEDICAL LICENSURE |) |
| AND SUPERVISION, |) |
| Plaintiff, |)) |
| v. |) |
| JON MARCUS OLIVE, |) |
| LICENSE NO. RC975, | ý |
| Defendant |) |

FILED JUL 2 5 2014

OKLAHOMA STATE BOARD OF MEDICAL LICENSURE & SUPERVISION Case No. 14-03-4922

CITATION

YOU ARE HEREBY NOTIFIED that on the 13th day of June, 2014, a sworn Complaint was filed with the undersigned Secretary of the Oklahoma State Board of Medical Licensure and Supervision, State of Oklahoma, charging you with violations of the Medical Practice Act, at 59 O.S. 2011, § 2040(4), (9), and Okla. Admin. Code § 435:45-5-3(1), (2), and (21).

On March 12th, 2015, the Board will be in regular session at 9:00 o'clock a.m., at its offices located at 101 N.E. 51st Street, Oklahoma City, Oklahoma, at which time your Complaint will be considered by the Board, and a hearing will be held pursuant to the Oklahoma Administrative Procedures Act, 75 O.S. § 250, et seq.

If the Board decides, after considering all the testimony and evidence, that you are guilty as charged, your license to practice as a respiratory care therapist within the State of Oklahoma may be suspended or revoked or other disciplinary action may be taken by the Board as authorized by law, including the assessment of costs and attorney's fees for this action as provided by law.

Under the laws of the State of Oklahoma, you are required to file your written Answer under oath with the Secretary of the Board within twenty (20) days after the Citation is served upon you. Unless your Answer is so filed, you will be considered in default, and the Board may accept the allegations set forth in the Complaint as true at the hearing of the Complaint. If the

charges are deemed sufficient by the Board, your license to practice as a respiratory care therapist in the State of Oklahoma may be suspended or revoked.

THEREFORE, you are cited to appear at the hearing. If you are not present in person, you may be present through your attorney.

DATED this 25 day of July, 2014.

Gerald C. Zumwalt, M.D. Secretary and Medical Advisor Oklahoma State Board of Medical Licensure and Supervision



RETURN OF SERVICE BY AGENT

| Received the attached and foregoing Citation and Scheduling Order |
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| in the investigation of <u>Jon Marcus Olive, RC</u> , at |
| Oklahoma City, Oklahoma, on the 27 day of August ,2014 , |
| and on the 27 day of August , 2014 , at 12:00 o'clock |
| $\mathcal{C}_{\mathbf{M}}$.M. served it on the within named by delivering a copy to |
| (Name of person served) |
| At (address): NSU Student Union |
| 600 N Grand Ave. |
| Tahlequah, OK 74464 |
| Served by: |
| Subscribed and sworn to before me on this 28 th day of August, 2014 WHELEY CROWNING # 12007 192 EXP. 08/01/16 Shelly Mandu Notary Public |
| My Commission expires: |
| CASE NAME: Jon Marcus Olive, RC CASE #: 01-03-4922 |