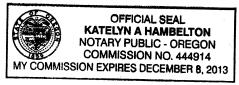
1 **BEFORE THE** 2 **BOARD OF CHIROPRACTIC EXAMINERS** 3 STATE OF OREGON 4 5 In the Matter of 6 ORDER OF 8 Jarl D. Tuffle DC SUSPENSION OF LICENSE 9 Licensee # 2854 10 Case # 2010 - 5000 11 12 13 1. The Board of Chiropractic Examiners (Board) is the state agency responsible for 14 licensing, regulating and disciplining chiropractic physicians in the State of Oregon. Jarl D. 15 Tuffle DC (Licensee), is licensed by the Board to practice as a chiropractic physician in the State 16 of Oregon. 17 18 2. The Office of the Clackamas County District Attorney -- Family Support Unit (enforcing 19 agency) has informed the Board that Licensee owes child support and arrears. According to the 20 information provided to the Board Licensee "has an order to pay support and owes arrears in an 21 amount equal to the greater of three months of support or \$2,500, and has not entered into an 22 agreement with the Child Support Division." The enforcing agency certifies that proper notice 23 and opportunity to contest the suspension have been provided to Licensee pursuant to ORS 24 25.750 through ORS 25.783. Under these conditions, Licensee's license to practice chiropractic 25 is subject to suspension, ORS 25.750. 26 27 3. The Board therefore suspends Licensee's license to practice chiropractic without further 28 hearing, effective Monday, February 1, 2010, pursuant to ORS 25.780. 29 IT IS SO ORDERED this 1st day of February 2010. 30 31 Original signature on file at OBCE 32 By: 33 Dave McTeague, Executive Director 34 Oregon Board of Chiropractic Examiners 35 36 37 38

2 3		VERIFICATION	
5	State of Oregon)	
6	County of Marion) Case # 2010-5000	
7			
8	I, Dave McTeague, bein	g first duly sworn, state that I am the Executive Director of	
9	the Board of Chiropractic Examiners of the State of Oregon, and as such, am authorized to verify		
10	pleadings in this case: and that the foregoing Order for Suspension of License is true to the best o		
11	my knowledge as I verily believe.		
12	Origi	nal signature on file at OBCE	
13 14 15 16 17 18 19 20 21 22 23	SUBSC: thisOrigi	RIBED AND SWORN to before me day of Flynand, 2010. inal signature on file at OBCE	
24252627		LIC FOR OREGON nmission Expires: Dec. 8 th 2013	



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2			
3			
4	CERTIFICATE OF SERVICE		
5			
6	I, Dave McTeague, certify that on February 1, 2010, I served the foregoing Order for		
7	Suspension of License upon Jarl D. Tuffli DC., the party hereto, by mailing, certified mail,		
8	postage prepaid, a true, exact and full copy thereof to:		
9			
10	Jarl Tuffli DC		
11	1020 SE 82nd Dr		
12	Gladstone, OR 97027		
13			
14			
15	By regular mail to:		
16			
17	Jarl Tuffli DC		
18	Lifestyles Chiropractic		
19	16120 SE 82nd Dr		
20	Clackamas, Oregon 97015		
21	Original signature on file at OBCE		
22	or ignarial e on the at OBCE		
23			
24	Dave McTeague		
25	Executive Director		
26	Oregon Board of Chiropractic Examiners		
27			
28			
29			