



**BEFORE THE STATE of OREGON  
BOARD of MASSAGE THERAPISTS**

In the Matter of:

) **Case No. 1495**

**JAMES C ESCOBAR**  
(Licensee)

) **VOLUNTARY SURRENDER OF LICENSE**  
)

The Oregon Board of Massage Therapists (*Board*) is the agency responsible for licensing, disciplining, and regulating massage therapists and the practice of massage in the State of Oregon.

Recognizing that professional misconduct allegations are now pending against me before the Board, I, James C. Escobar, hereby voluntarily surrender my Oregon massage license #17569 effective on the date that the Board accepts this offer of voluntary surrender.

By voluntarily surrendering my Oregon Massage License, I understand that:

1. I relinquish all rights and privileges to practice massage therapy in the State of Oregon, or from using any title or words indicating that I am licensed to engage in the practice of massage, effective upon the Board's acceptance of this voluntary surrender.
2. I agree that I will not seek reinstatement of or apply for licensure in the future with the OBMT.
3. I admit that this license surrender has occurred in settlement of pending investigative and disciplinary charges.
4. The professional misconduct allegations, if proven by the Board, would result in violations of Oregon Revised Statutes Chapter 687 or Oregon Administrative Rules Chapter 334.
5. I understand that by the Board's acceptance of the Voluntary Surrender of License, that this document shall be distributed to all relevant licensing authorities and professional societies in the same manner as a final decision making specific finding of professional misconduct. I further understand that this document shall become a permanent part of my file, and will be maintained by the Board as a public document.

6. I have fully read and understand this Order completely.
7. I have consulted with an attorney regarding this Order and I have been fully advised in regards thereto, or I have waived my right to consult with an attorney prior to entering into this Order.
8. I understand that I have the right to notice and contested case hearing under the Administrative Procedures Act (ORS Chapter 183) and Civil Penalty Procedures of ORS 183.745 and fully waive any and all said rights and any rights to appeal or otherwise challenge this Order.
9. I enter into this Order voluntarily and without force or duress. I state that no promises or representations have been made to me to induce me to sign this stipulation, and I agree to the issuance of this Order.

**Signature on File**

James C Escobar, Licensee

04-22-2013

Date

OREGON BOARD OF MASSAGE THERAPISTS

**Signature on File**

Kate Coffey, Executive Director

04-22-2013

Date