BEFORE THE LOUISIANA STATE BOARD OF MEDICAL EXAMINERS

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IN THE MATTER OF:	: 99-I-084
MIKE EDWIN BOZEMAN, JR., M.D. (Certificate No. 006273),	: STIPULATION & AGREEMENT TO VOLUNTARY SURRENDER
Respondent.	: OF LICENSE x

BEFORE ME, the undersigned authority, personally came and appeared:

MIKE EDWIN BOZEMAN, JR., M.D.

who, after being duly sworn by me, Notary Public, did depose and say that:

Dr. Mike Edwin Bozeman, Jr. ("Dr. Bozeman") hereby stipulates and agrees as follows:

١.

Dr. Bozeman is a physician licensed to practice medicine in the State of Louisiana.

11.

At all times pertinent Dr. Bozeman practiced medicine in the State of Louisiana.

III.

Dr. Bozeman is aware that the Louisiana State Board of Medical Examiners (the "Board") has made inquiries and was prepared to take formal action against his Louisiana license particularly because of its investigation into his prescribing practices

regarding controlled dangerous substances, and his voluntary surrender of his Drug Enforcement Administration Certificate of Registration. 1 Dr. Bozeman is aware that the Board is empowered so to act by law.2

IV.

Because of his plans to retire from medical practice and rather than contest any further action by the Board, Dr. Bozeman hereby voluntarily and freely surrenders all further rights to his Louisiana medical license (number 006273), including his rights of renewal and reinstatement. In furtherance thereof, Dr. Bozeman waives all of his rights under the law: to be formally charged in an Administrative Complaint, to have those charges proved against him by evidence, to appear and confront adverse witnesses, to submit evidence on his own behalf, to have the presence and assistance of legal counsel, to have any further hearing, as well as his rights to appeal the action of the Board, or any other right to which he may be afforded by the Louisiana Administrative Procedure Act, La. Rev. Stat. §49:951, et seq., or otherwise.

٧.

Dr. Bozeman further stipulates and agrees that this instrument constitutes a waiver and forfeiture of any and all of his rights to practice medicine in the State of Louisiana at any time in the future and that should he ever make application for renewal or reinstatement of his Louisiana medical license, it will be refused.

VI.

By his subscription hereto, Dr. Bozeman acknowledges and agrees that this Stipulation and Agreement will be and will be deemed to be a Public Record.

¹ Voluntary Surrender of Controlled Substances Privileges, dated and signed by Dr. Bozeman on July 13, 1999.

² Pursuant to La. Rev. 37:1285A(6): "The Board may refuse to issue, or may suspend or revoke any license or permit, or impose probationary or other restrictions on any license or permit issued under this Part for the following causes: (6) Prescribing, dispensing, or administering legally controlled substances or any dependency-inducing medication without legitimate medical justification therefor or in other than a legal or legitimate manner;"

VII.

Dr. Bozeman waives any right to which he may be entitled by law or otherwise to contest his agreement to, or the force and effect of, this document in any court or other forum relating to the matters referred to herein.

VIII.

Dr. Bozeman stipulates that he has been provided the right to have his own personal legal counsel advise him of the legal effect of this document.

IN WITNESS WHEREOF, I, Mike Edwin Bozeman, Jr., M.D. hereby acknowledge my agreement, approval and acceptance of the foregoing Stipulation and Agreement to Voluntary Surrender of License, this 6h day of Line. _____, 2000.

WITNESSES:						
Caxhyw. Dum	Man Slebeng					
Signature	Signature					
Cathy W. Dunn	Lynn Slabaugh					
Printed Name & Address	Printed Name & Address					
4202 Whitefield	8513 Kingemont Dr.					
Printed Name & Address 4202 White field Alexandria, La 71303	Printed Name & Address 8513 Riogemont Dr. Pineville, (a 71360					
Sworn to and subscribed before	me, Notary Public, in the presence of the					
two above named witnesses, this $\cancel{6}\cancel{4}$	day of <u></u>					
Pureuille, State of Louisia						

In and for the Parish of _______State of Louisian

My Commission expires on

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ACCEPTANCE

The	foregoir	ng Stipula	ation	and Agree	ement to Volu	untary S	Surrender o	of Lice	nse
of Mike E	dwin Bo	zeman, .	Jr., N	Л.D. is he	reby Accept	ed and	Approve	d by	the
Louisiana	State	Board	of	Medical	Examiners	this	21	day	of
	Jun	E		, 2000.					

LOUISIANA STATE BOARD OF MEDICAL EXAMINERS