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**BEFORE THE  
PODIATRIC MEDICAL BOARD  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:

Case No. 500-2021-001220

**JON-PAUL SESLAR, D.P.M.**  
2089 Vale Road, Suite 12  
San Pablo, CA 94806-3848

**AGREEMENT FOR  
SURRENDER OF LICENSE**

**Doctor of Podiatric Medicine License  
No. 4074,**

Respondent.

**TO ALL PARTIES:**

**IT IS HEREBY STIPULATED AND AGREED** by and between the parties to the above-entitled proceedings, that the following matters are true:

1. Brian Naslund ("Complainant") is the Executive Officer of the Podiatric Medical Board, Department of Consumer Affairs ("Board").
2. Jon-Paul Seslar, D.P.M. ("Respondent") has carefully read and fully understands the effect of this Agreement.
3. Respondent understands that by signing this Agreement he is enabling the Board to issue this order accepting the surrender of license without further process. Respondent understands and agrees that Board staff and counsel for Complainant may communicate directly with the Board regarding this Agreement, without notice to or participation by Respondent. The Board will not be disqualified from further action in this matter by virtue of its consideration of this Agreement.
4. Respondent acknowledges that on January 19, 2024, an Accusation was filed against him and on August 22, 2024, a Decision and Order was rendered wherein he was publicly reprimanded, with terms and conditions including successfully completing an education course and reimbursing the Board for its investigative and prosecution costs.

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1           5.     Following the effective date of the Decision, Respondent ceased practicing due to  
2 health reasons, is unable to satisfy the terms and conditions of the Decision, and has requested to  
3 surrender his license.

4           6.     Upon acceptance of the Agreement by the Board, Respondent understands he will no  
5 longer be permitted to practice as a Doctor of Podiatric Medicine in California, and also agrees to  
6 surrender his wallet certificate, wall license, and D.E.A. Certificate(s).

7           7.     Respondent fully understands and agrees that if Respondent ever files an application  
8 for relicensure or reinstatement in the State of California, the Board shall treat it as a Petition for  
9 Reinstatement of a revoked license in effect at the time the Petition is filed. All of the charges  
10 and allegations contained in Accusation No. 500-2021-001220 shall be deemed to be true,  
11 correct, and admitted by Respondent. In addition, any Podiatric Medical Board Investigation  
12 Report(s), including those related to Case No. 500-2021-001220, all referenced documents and  
13 other exhibits, upon which Board action is predicated, and any such Investigation Report(s),  
14 attachments, and other exhibits that may be generated subsequent to the filing of this Agreement  
15 for Surrender of License, shall be admissible as direct evidence, and any time-based defenses,  
16 such as laches or any applicable statute of limitations, shall be waived when the Board determines  
17 whether to grant or deny the Petition.

18           8.     Respondent shall complete the Education Course and pay the Board its costs of  
19 investigation and prosecution costs in the amount of \$14,549.75 (fourteen thousand five hundred  
20 forty-nine dollars and seventy-five cents), as set forth in the Decision and Order for Case No.  
21 500-2021-001220, prior to issuance of a new or reinstated license.

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**ACCEPTANCE**


I, Jon-Paul Seslar, D.P.M., have carefully read the above Agreement and enter into it freely and voluntarily, with the advice of counsel, and with full knowledge of its force and effect, do hereby surrender Doctor of Podiatric Medicine License No. 4074, to the Podiatric Medicine Board for its acceptance. By signing this Agreement for Surrender of License, I recognize that upon its formal acceptance by the Board, I will lose all rights and privileges to practice as Doctor of Podiatric Medicine in the State of California and that I have delivered to the Board my wallet certificate and wall license.

  
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Jon-Paul Seslar, D.P.M.

11/21/24  
Date

  
\_\_\_\_\_  
Attorney or Witness

11/22/24  
Date

  
\_\_\_\_\_  
Brian Naslund  
Executive Officer  
Podiatric Medical Board

DEC 3 1 2024  
Date

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