

WISCONSIN DEPARTMENT OF REGULATION & LICENSING



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FILE COPY

STATE OF WISCONSIN
BEFORE THE MEDICAL EXAMINING BOARD

IN THE MATTER OF
THE LICENSE OF

CHARLES W. TROUP, M.D.

Respondent

ORDER GRANTING FULL LICENSURE

On June 9, 1998, the Medical Examining Board issued its Amended Final Decision and Order in the above-captioned matter. By the terms of the board's Order, respondent's license to practice medicine and surgery in Wisconsin was limited to require completion by June 4, 1998, of continuing education covering a number of areas.

On September 24, 1998, the board considered documentation of respondent's full compliance with the terms and conditions of his limited license. Based upon that documentation, the board orders as follows:

ORDER

NOW, THEREFORE, IT IS ORDERED that all limitations on the license of Charles W. Troup, M.D., to practice medicine and surgery in the State of Wisconsin, as imposed by the board's Amended Final Decision and Order in this matter dated June 9, 1998, be, and hereby are, terminated, and Dr. Troup is hereby returned to full licensure.

Dated this 1st day of October, 1998.

STATE OF WISCONSIN
MEDICAL EXAMINING BOARD

by Wanda Roever
Wanda Roever
Board Secretary

STATE OF WISCONSIN
DEPARTMENT OF REGULATION AND LICENSING
BEFORE THE MEDICAL EXAMINING BOARD

In the Matter of the License of

Charles W. Troup, M.D.,

AFFIDAVIT OF MAILING

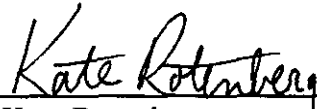
Respondent.

STATE OF WISCONSIN)
)
COUNTY OF DANE)

I, Kate Rotenberg, having been duly sworn on oath, state the following to be true and correct based on my personal knowledge:

1. I am employed by the Wisconsin Department of Regulation and Licensing.
2. On October 12, 1998, I served the Order Granting Full Licensure dated October 1, 1998 upon the Respondent Charles W. Troup, M.D. by enclosing a true and accurate copy of the above-described document in an envelope properly stamped and addressed to the above-named Respondent and placing the envelope in the State of Wisconsin mail system to be mailed by the United States Post Office by certified mail. The certified mail receipt number on the envelope is Z 233 819 876.
3. The address used for mailing the Decision is the address that appears in the records of the Department as the Respondent's last-known address and is:


Charles W. Troup, M.D.
Medical Park
720 S. VanBuren Street, Suite 102
Green Bay WI 54301



Kate Rotenberg
Department of Regulation and Licensing
Office of Legal Counsel

Subscribed and sworn to before me

this 12th day of October, 1998.



Notary Public, State of Wisconsin
My commission is permanent.