

REGULAR

STATE OF CALIFORNIA--OFFICE OF ADMINISTRATIVE LAW

NOTICE PUBLICATION/REGULATIONS SUBMISSION

(See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

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| OAL FILE NUMBERS | NOTICE FILE NUMBER Z- 2014-0430-01 | REGULATORY ACTION NUMBER 2015-0421-025 | EMERGENCY NUMBER |
|------------------|--|--|------------------|

For use by Office of Administrative Law (OAL) only

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

JUN -2 2015
2:32 PM

2015 APR 21 PM 2:30
OFFICE OF
ADMINISTRATIVE LAW

NOTICE

REGULATIONS

AGENCY WITH RULEMAKING AUTHORITY
California Acupuncture Board

AGENCY FILE NUMBER (If any)

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

| | | | | |
|---|--|--|-------------------------------------|--|
| 1. SUBJECT OF NOTICE | | TITLE(S) 16 | FIRST SECTION AFFECTED 1399.405 | 2. REQUESTED PUBLICATION DATE May 9, 2014 |
| 3. NOTICE TYPE <input checked="" type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other | | 4. AGENCY CONTACT PERSON Marc Johnson | TELEPHONE NUMBER (916) 515-5216 | FAX NUMBER (Optional) (916) 928-2204 |
| OAL USE ONLY | ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn | | NOTICE REGISTER NUMBER 2014, 202 | PUBLICATION DATE 5/16/2014 |

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

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| 1a. SUBJECT OF REGULATION(S) Consumer Protection Enforcement Initiative (CPEI) | 1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S) |
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| 2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related) |
| SECTION(S) AFFECTED List all section number(s) individually. Attach additional sheet if needed. |
| ADOPT 1399.469.1; 1399.469.2 |
| AMEND 1399.405; 1399.419; |
| TITLE(S) 16 |
| REPEAL |

| | | | |
|---|---|---|---|
| 3. TYPE OF FILING | | | |
| <input checked="" type="checkbox"/> Regular Rulemaking (Gov. Code §11346) | <input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute. | <input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h)) | <input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100) |
| <input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4) | <input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1) | <input type="checkbox"/> File & Print | <input type="checkbox"/> Print Only |
| <input type="checkbox"/> Emergency (Gov. Code, §11346.1(b)) | | <input type="checkbox"/> Other (Specify) _____ | |

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| 4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1) |
| N/A |

| | | | |
|--|--|---|--|
| 5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100) | | | |
| <input checked="" type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a)) | <input type="checkbox"/> Effective on filing with Secretary of State | <input type="checkbox"/> §100 Changes Without Regulatory Effect | <input type="checkbox"/> Effective other (Specify) _____ |

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| 6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY | | |
| <input checked="" type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660) | <input type="checkbox"/> Fair Political Practices Commission | <input type="checkbox"/> State Fire Marshal |
| <input checked="" type="checkbox"/> Other (Specify) Awet Kidane, Director, DEPT. of Consumer Affairs | | |

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|---|----------------------------------|---------------------------------------|--|
| 7. CONTACT PERSON Marc Johnson, Policy Coordinator | TELEPHONE NUMBER 916-515-5216 | FAX NUMBER (Optional) 916-928-2204 | E-MAIL ADDRESS (Optional) marc.johnson@dca.ca.gov |
|---|----------------------------------|---------------------------------------|--|

8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

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| SIGNATURE OF AGENCY HEAD OR DESIGNEE <i>Terri Thorfinnson</i> | DATE 9/9/14 |
| TYPED NAME AND TITLE OF SIGNATORY Terri Thorfinnson, Executive Officer, California Acupuncture Board | |

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JUN 02 2015
Office of Administrative Law