



Oklahoma Medical Board of Licensure and Supervision
 101 NE 51st Street
 Oklahoma City, OK 73105
 (405) 962-1400
 Licensing@okmedicalboard.org

FILE REVIEW REQUEST

Under the Oklahoma Public Information Access Procedures, I wish to review the public file of the following individual:

Name	Profession	License Number
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It is the policy of the Oklahoma State Board of Medical Licensure and Supervision to make available the public file of each individual who is/was licensed as a health professional in the state of Oklahoma. To ensure the integrity of the file, each individual requesting to review the file will be provided to provide their name before access to the public file will be granted.

Person Reviewing File	
	Name (please print)
	Signature
	Email address (required)
Name of Organization or Business Represented (if applicable)	

Copies of documents in the public file will be provided at a cost of \$0.25 per page. Certification will be provided at a cost of \$1.00 per page. Postage will be added to the total cost if we mail the information.

Once cost is known, to pay with a credit card go to www.okmedicalboard.org. There will be a red box on the right side that says ONLINE BILL PAY. You will choose miscellaneous from the drop-down menu and complete the form and pay the fee.

Date: _____	Copies Made _____	Total Cost _____
Payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check CC Bill Pay Authorization # _____		