## IN AND BEFORE THE OKLAHOMA STATE BOARD OF MEDICAL LICENSURE AND SUPERVISION STATE OF OKLAHOMA

FILED

STATE OF OKLAHOMA	)	MAR 3 1 2005
EX REL. THE OKLAHOMA BOARD	)	MAN 9 1 2003
OF MEDICAL LICENSURE	j ,	OKLAHOMA STATE BOARD OF
AND SUPERVISION,	)	MEDICAL LICENSURE & SUPERVISION
	)	
Plaintiff	)	
	)	
v.	)	Case No. 05-04-2945
	)	
ALEXANDER THEODORE, M.D.,	)	
LICENSE NO. 11907,	)	
	)	
Defendant.	)	

## **CITATION**

YOU ARE HEREBY NOTIFIED that on the <u>\sqrt{1}</u> day of March, 2005, a sworn Complaint was filed with the undersigned Secretary of the Oklahoma State Board of Medical Licensure and Supervision, State of Oklahoma, charging you with violations of the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act at OAC 435: 10-7-4 (31). A copy of the Complaint is attached hereto and made a part thereof.

On May 5-7, 2005, the Board will be in regular session at 9:00 o'clock a.m., at its offices located at 5104 N. Francis, Suite C, Oklahoma City, Oklahoma, at which time your Complaint will be considered by the Board, and a hearing will be held pursuant to the Oklahoma Administrative Procedures Act, 75 Okla. Stat. §309, et seq., as amended.

If the Board decides, after considering all the testimony and evidence, that you are guilty as charged, your license to practice as a physician within the State of Oklahoma may be suspended or revoked or other disciplinary action may be taken by the Board as authorized by law, including the assessment of costs and attorney's fees for this action as provided by law.

Under the laws of the State of Oklahoma, you are required to file your written Answer under oath with the Secretary of the Board within twenty (20) days after the Citation is served upon you. Unless your Answer is so filed, you will be considered in default, and the Board may accept the allegations set forth in the complaint as true at the hearing of the complaint. If the charges are deemed sufficient by the Board, your license to practice as a physician in the State of Oklahoma may be suspended or revoked.

THEREFORE may be present throug		re cited to appear at the hearing. If you are not present in person, you attorney.
DATED this	31	day of March, 2005 at 11 o'clock.
		GERALD C. ZUMWALT, M.D., Secretary Oklahoma State Board of Medical Licensure and Supervision

## **RETURN OF SERVICE BY AGENT**

Received the attached and foregoing Citation and Complaint and Scheduling Order in the investigation of HIEX4 he not by I'm at Oklahoma City, Oklahoma, on the \_\_\_\_\_ day of \_\_\_\_\_ 2005, day of  $\frac{April}{}$ , 2005, at  $\frac{3.00}{}$  o'clock  $\frac{p}{}$ .M and on the served in on the within named by delivering a copy to: at (address) \* Served by: Subscribed and sworn to before me on this 1 day of APRIL, 2005 SENDER: COMPLETE THIS SECTION **COMPLETE THIS SECTION ON DELIVERY** My Commission expire Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. A. Signatury Agent Agent Print your name and address on the reverse Addressee so that we can return the card to you. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. Comp ☐ Yes address different from item 1? 1. Article Addressed to: No If YES, enter delivery address below: ALEXANDER THEODORE, MD 8015 ROYAL LANE SANDY, UT 84093 3. Service Type Express Mail ☐ Certified Mail ☐ Return Receipt for Merchandise ☐ Registered ☐ C.O.D. ☐ Insured Mail 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number (Transfer from service label)

August 2001

Domestic Return Receipt

102595-01-M-0381