

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

FILED

**STATE OF OKLAHOMA
EX REL. THE OKLAHOMA BOARD
OF MEDICAL LICENSURE
AND SUPERVISION,**

Plaintiff,

**v.
KENNETH GLEN PETTY, M.D.,**

LICENSE NO. 18506

Defendant.

SEP 18 2003

OKLAHOMA STATE BOARD OF
MEDICAL LICENSURE & SUPERVISION

Case No. 03-06-2677

CITATION

YOU ARE HEREBY NOTIFIED that on the 18 day of September, 2003, 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 59 Okla. Stat. §509 (5), (8), (9), (14) and (16) and OAC 435:10-7-4 (3), (5), (11), (24), (26), (27), (39) and (40). A copy of the Complaint is attached hereto and made a part thereof.


On November 20-22, 2003, 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, you are cited to appear at the hearing. If you are not present in person, you may be present through your attorney.

DATED this 18th day of September, 2003 at 1²⁰^{pm} 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 Scheduling Order in the investigation of Kenneth G. Petty MD, at Oklahoma City, Oklahoma, on the _____ day of _____, 2003, and on the 19 day of Sept, 2003, at _____ o'clock _____ M. served it on the within named defendant by delivering a copy to: _____
(name of person served)

at (address):

certified
↓
REG MAIL

1089 E 7th
Chico CA 95928
NORTH STATE RADIOLOGY
1702 ESPLANADE
CHICO, CA 95926

Served by: _____



Subscribed and sworn to before me on this 19 day of Sept, 2003

Janet Swindle
Notary Public

My Commission expires

8-22-06

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

3. Article Addressed to:

91 7108 2133 3930 6713 0081

KENNETH PETTY, MD
1089 E. 7TH
CHICO, CA 95928

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

8. Addressee's Address (Only if requested and fee is paid)