

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

FILED

JUN 26 2014

OKLAHOMA STATE BOARD OF
MEDICAL LICENSURE & SUPERVISION

STATE OF OKLAHOMA, *ex rel.*)
THE OKLAHOMA BOARD)
OF MEDICAL LICENSURE)
AND SUPERVISION,)
)
Plaintiff,)
)
v.)
)
HARVEY JENKINS, M.D.)
LICENSE NO. 21473,)
)
Defendant.)

Case No. 13-10-4833

CITATION

YOU ARE HEREBY NOTIFIED that on the 26 day of June, 2014, 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 Medical Practice Act, at 59 O.S. 2011, §509(8), (12), (14), (18), (20), and Okla. Admin. Code § 435:10-7-4(11), (41), (21), (22), (39), and (49).

On **November 6, 2014**, the Board will be in regular session at **9:00 o'clock a.m.**, at its offices located at **101 N.E. 51st Street, 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 O.S. § 250, *et seq.*

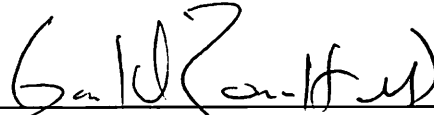
If the Board decides, after considering all the testimony and evidence, that you are guilty as charged, your license to practice as a physician within the State of Oklahoma may be suspended or revoked or other disciplinary action may be taken by the Board as authorized by law, including the assessment 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 26 day of June, 2014.

A handwritten signature in black ink, appearing to read "Gerald C. Zumwalt", written over a horizontal line.

Gerald C. Zumwalt, M.D.
Secretary and Medical Advisor
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 Harvey Jenkins, MD, at Oklahoma City, Oklahoma, on the 26 day of June, 2014, and on the 30 day of ~~July~~ June, 2014, at 1:05 o'clock P.M. served it on the within named by delivering a copy to Harvey Jenkins, MD
(Name of person served)

At (address):

Harvey Jenkins, MD
8603 S. Western
Oklahoma City, OK 73139

Served by: *Gary Hicks*

Subscribed and sworn to before me on this 30th day of June, 2014



Shelley Crowder
Notary Public

My Commission expires: 8-1-2016

CASE NAME: Jenkins, MD
CASE #: 13-10-4833

NOTARIAL PUBLIC STATE OF OKLAHOMA



I, the undersigned, do hereby certify that the foregoing is a true and correct copy of the original as the same appears in my records.

Notary Public

