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

FILED

STATE OF OKLAHOMA	)	AUG 2 6 2005
EX REL. THE OKLAHOMA BOARD	)	OKLAHOMA STATE BOARD OF
OF MEDICAL LICENSURE	)	MEDICAL LICENSURE & SUPERVISION
AND SUPERVISION,	)	
Plaintiff,	)	
	)	
V.	)	Case No. 04-12-2919
JOHN MORRIE HILL, JR, M.D.,	)	
	)	
LICENSE NO. 7324		
	)	
Defendant.	)	

## **<u>CITATION</u>**

YOU ARE HEREBY NOTIFIED that on the 26% day of August, 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 59 Okla. Stat. §509 (8), (12), (13), (16) and (18) and OAC 435:10-7-4 (1), (2), (6), (11), (39) and (41). A copy of the Complaint is attached hereto and made a part thereof.

On November 3-5, 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, you are cited to appear at the hearing. If you are not present in person, you may be present through your attorney.

DATED this 26h day of August, 2005 at \_\_\_\_\_\_ o'clock.

Gauld ( Jemethang

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 $\frac{1}{1}$
Scheduling Order in the investigation of $\int \overline{bhn} + \frac{1}{1} \begin{pmatrix} y \\ y \end{pmatrix}$ ,
at Oklahoma City, Oklahoma, on the day of 2005,
and on the <u>30</u> day of <u>AUGUST</u> , 2005, at <u>o</u> 'clock .M.
served in on the within named by delivering a copy to:
at (address): <u>John Hill, MD</u> Certified <u>315 E. Wyandotte</u> Mail <u>SuiteC</u> MCAlester OF 74502 Served by:
Subscribed and sworn to before me on this <u>36</u> day of <u>Aug</u> , 2005. <u>Aug</u> , 2005. Notary Public My Commission expires: <u>8-22-06</u>

Case Name:\_\_\_\_\_

Case#:\_\_\_\_\_

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5104 N Francis Suite C Oklahoma City OK 73118-6020	Phone: (405) 848-6 <b>\$</b> 41 ext Fax: (405) 8 <del>~</del> 48-4999			
FACSIMILE COVER SHEET				
Phone:	Sender From: <u>Steve</u> WAShbourne Phone ext. #_ email:			
$\frac{Fax: 4F8 689 4285}{Re: John H_1 M D Comp}$ Pages: (Not including cover page)	Date: <u>8-30-65</u>			
Urgent Please Reply/confirm receipt Comments:	For Review P lease Recycle			