

**MARYLAND BOARD OF ACUPUNCTURE  
4201 PATTERSON AVENUE  
BALTIMORE, MD 21215  
TELEPHONE (410) 764-4766  
FAX (410) 358-7258  
REQUEST FOR LICENSE VERIFICATION**

To request that an official signed and sealed document verifying your Maryland Acupuncture license be sent to another state or agency, please complete this form and submit it along with a **\$50.00 verification fee** to the address listed above. Make checks payable to "MARYLAND BOARD OF ACUPUNCTURE." If you would like the verification returned by express courier, please submit a prepaid addressed envelope. Requests are generally processed within 10 to 14 days of receipt.

License Number: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Provide Name and Address of agency receiving license verification:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date