



Wall Certificate Order Form

OREGON BOARD OF OPTOMETRY

With your initial licensure and each annual renewal, you will receive a printed primary license and a portable multiple license. You must conspicuously display one of these licenses when you are working, and you must report each practice location to the Board prior to beginning work there.

You also may order an optional decorative OBO Wall Certificate that is suitable for framing. This 8.5" x 11" certificate is signed by the members of the Board. Note that it does not meet the requirement to display your printed annual license. These are approved at quarterly Board meetings, so it may take up to 90 days to receive the wall certificate in the mail to your address of record.

Legal Name: _____, OD

Your Oregon license number: _____ Initial Oregon licensing date: _____

Email Address: _____

To receive your certificate, complete and return this form. There is a \$40 fee if you make the request more than 90 days after initial Oregon licensure. You will receive your certificate following the next meeting of the Board.

Email this form to the Board at Melissa.auman@obo.oregon.gov If the fee is due an online invoice will be created in the licensee self-service portal to pay via credit card

Oregon Board of Optometry



KNOW ALL BY THESE PRESENTS THAT

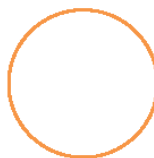
Your Name Here, OD

License No. 12345 ATI

*Has passed the examination prescribed by the Oregon Board of Optometry
and has been issued a license as an optometric physician by the State of Oregon.
Now therefore in testimony and recognition of superior attainments in the Science of Optometry
and by virtue of the authority vested by the great State of Oregon this*

CERTIFICATE OF REGISTRATION

is granted with all the attendant privileges and subject to all the laws governing the same.



IN WITNESS WHEREOF:
WE THE MEMBERS OF THE OREGON
BOARD OF OPTOMETRY HAVE SIGNED
OUR NAME AND HAVE CAUSED THE SEAL
OF SAME TO BE AFFIXED HEREUNTO AT
SALEM, OREGON THIS XXTH DAY OF
MONTH, TWO THOUSAND FOURTEEN.

