

Details

## LICENSE DETAILS

**License #:** 134223**Program:** Medical**Type:** Physician**Status:** Active**Issue Date:** 07/02/2018**Effective Date:** 12/13/2018**Expiration Date:** 12/31/2020**Mailing Address:** BETHEL, AK, UNITED STATES

## Owners

Owner Name	Entity Number
Elizabeth Diane Bates	

## Relationships

No Relationships Found

## Designations

Type	Group
DEA Registered	DEA Registration
Family Practice	Specialties

## Agreements/Actions/Accusations

No Agreements/Actions/Accusations Found

[Close Details](#)[Print Friendly Version](#)