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Licensee Details

Data current as of: March 8, 2020

Name\Phone

Jamilah M. Shakir-Reese

Business Address1225 4th St., NE
Washington DC 20005**Number:**

MD041109

Profession:

MEDICINE

Type:

MEDICINE AND SURGERY

Obtained By Method:

Waiver of Examination

From State/Prov:**Issue Date:**

12/21/2012

Expiration Date:

12/31/2020

Status:

Active

Temp. Issue Date:**Temp. Expire Date:****Specialty Information (as reported by Licensee)**

None

Discipline Information from 1996 to Present - Please click item(s) below to view public orders.

NONE

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