

State of Indiana

DEMOGRAPHIC INFORMATION

Name: Joi F. Bradshaw

ADDRESS INFORMATION

City/State/Zip: Gary IN 46404
 County: Lake

LICENSE INFORMATION

Lic #: 01061166A Profession: Medical Licensing Board Type: Physician Secondary:
 Status: Expired Non-Renewable Issued: 8/17/2005 Expiration: 10/31/2013
 Method: Endorsement

DISCIPLINE INFORMATION

RELATED LICENSES

Lic #:	01061166B	Name:	Bradshaw, Joi F.	Relationship:	Same Licensee
License Type:	CSR-Physician	License Status:	Expired		
Lic #:	72000093A	Name:	Equihua, Debra Ann	Relationship:	Collaborator
License Type:	APRN Prescriptive Authority	License Status:	Active		

DOCUMENTS

No Public Documents Available

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