

# CERTIFICATE OF MORAL CHARACTER

Preferably Signed by Two Licensed Physicians and Surgeons in the State Where Applicant Last Practiced and Who Have Known Applicant for at Least One Year

(No practitioner is expected to sign this recommendation who is not personally acquainted with the applicant and who is not willing to furnish information concerning his or her character, education and standing in request of the Board.)

This certifies that I have been personally acquainted with LARRY MILLER, M.D. for 1 year and that I know him to be of good moral character and hereby recommend him to the Board of Medical Examiners of the State of California as most worthy to be licensed to practice as a "physician and surgeon" in the State of California.

Name HARRY OLSEN Address [REDACTED]

Graduated from U.C. date JUNE 1965 licensed in CALIF. No. A22004

This certifies that I have been personally acquainted with LARRY MILLER, M.D. for 10 years and that I know him to be of good moral character and hereby recommend him to the Board of Medical Examiners of the State of California as most worthy to be licensed to practice as a "physician and surgeon" in the State of California.

Name William E. Jandich, M.D. Address [REDACTED]

Graduated from Univ So Calif date June 1947 licensed in Calif. No. A12629

## INFORMATION

**DEAR DOCTOR:**  
Answering your recent inquiry, we submit the following information regarding the issuance of a certificate to practice in California under the provisions of section 2194 of the Business and Professions Code, with the suggestion that you carefully supply all the data required on this application blank.

National Board reciprocity applications are based on an educational commission meeting held approximately once a week. Final action requires the affirmative vote of seven members of the Board.

The California Board in its discretion may require the applicant to submit an oral examination given by said Board.

No TEMPORARY CERTIFICATE or SPECIAL PERMITS to practice is issued. The filing of an application does not grant applicant any special privileges, nor is any method of treating the sick or afflicted permitted in California without the lawful possession of a certificate issued by this board and then only after said certificate has been recorded in the county wherein such practice is conducted. Sections 2141 to 2144 of the Business and Professions Code. Applicants must not establish offices nor circulate professional printed matter before California certificate has been issued.

A non-refundable fee of \$10.00 (fees exchange to be added) in any form other than a personal check must accompany this application and be deposited in the office of the Board, 1020 N Street, Sacramento, California, two weeks before any date shown on the accompanying dates for meetings for the current year. An additional \$100.00 to be paid if certificate is issued.

### PARTIALLY COMPLETED APPLICATIONS NOT ACCEPTABLE.

Amendment (Chapter 109, Statute 1929) requires all preliminary, premedical and professional training to have been "resident" courses in a school approved by the Board.

THE BUSINESS AND PROFESSIONS CODE PROVIDES ADDITIONAL REQUIREMENTS THAT MUST BE COMPLETED BY GRADUATES OF FOREIGN MEDICAL SCHOOLS. APPLICANTS WHO ARE GRADUATES OF FOREIGN MEDICAL SCHOOLS SHOULD REQUEST INFORMATION REGARDING THE ADDITIONAL REQUIREMENTS PRIOR TO COMPLETING THIS APPLICATION.

Section 2154 of the Business and Professions Code. An applicant, whose application is based on a diploma certificate issued by the National Board of Medical Examiners of the United States, shall pay the fee provided by this chapter and, in addition to all other requirements provided for a physician's and surgeon's certificate, he shall file testimonials of good moral character satisfactory to the board and shall satisfy the board the standard of the National Board of Medical Examiners on the date that the diploma certificate was issued was in no degree or particular less than that which was required for a physician's and surgeon's certificate under this chapter on the same date.

He shall also satisfy the board that the diploma certificate was procured without fraud or misrepresentation and that at no time has any certificate or license issued by a State of the United States or issued by a foreign country been revoked or annulled for unprofessional conduct.

The board may, in its discretion, with or without an oral examination, issue a certificate to an applicant who has complied with the requirements provided for a diploma certificate.

Responding to your request date!

FORM 161

Return This Application to Sacramento, California, and Not to San Francisco

READ CAREFULLY—ALL CONDITIONS ON THIS BLANK MUST BE COMPLIED WITH IN FULL

This application with a fee of \$10.00 in any form other than a personal check and a photographic copy of diploma to be APPROXIMATELY 1/2 inches by 10 inches, must be filed in the office of the Board, 1020 N Street, Sacramento, Cal. 95811.

The filing of this application does not grant any special permission to open an office or to conduct any method of treating the sick or afflicted in the State of California. [See Section 2141 to 2144 of the Business and Professions Code.]

All foreign documents must be translated into English over the seal and signature of the Consul of the country wherein the educational institution may be located.

## BOARD OF MEDICAL EXAMINERS OF THE STATE OF CALIFORNIA

NATIONAL BOARD APPLICATION—CLASS G

Application filed 6/13/68  
Fee paid [REDACTED]  
Diploma filed [REDACTED]  
Diploma verified [REDACTED]  
By [REDACTED]

I hereby apply for a physician's and surgeon's certificate in the State of California and submit the following credentials as required in Sec. 2194 of the Business and Professions Code and by the rules of the Board of Medical Examiners of the State of California.

Name in full LAWRENCE WHITEFIELD MILLER Address [REDACTED]

Date of birth [REDACTED] Age this date [REDACTED]

Are you a citizen of the United States? Give particulars [REDACTED]

And certificate if issued, to [REDACTED]

Did you attend high school? YES 4 YEARS KINGSWOOD SCHOOL, W. HARTFORD, CONN.

Did you graduate from high school? JUNE 1959 (SAME AS ABOVE)

Did you attend college or university? 4 YEARS BOWDOIN COLLEGE, BRUNSWICK, MAINE

Have you any degree OTHER than M.D.? A.B. MAY 1963 BOWDOIN COLLEGE

### PREMEDICAL EDUCATION

(Every applicant presenting an application based on a certificate or license issued after January 1, 1919, by any examining board, must show that "before beginning the last half of the second year in the study of medicine he has completed a course which includes at least one year of work at college grade, in each of the subjects of Physics, Chemistry and Biology." After January 1, 1924, such premedical courses must have been completed prior to commencing the study of medicine. After September 21, 1931, an applicant must show the completion of a two-year college course, including the subjects of Physics, Chemistry and Biology and an applicant matriculating in a medical school after January 1, 1934, must show the completion of a three-year college course, including the subjects of Physics, Chemistry and Biology.)

1. Physics YES College BOWDOIN MAINE from SEPT. 1950 to MAY 1952

2. Chemistry YES College BOWDOIN MAINE from SEPT. 1950 to MAY 1952

3. Biology YES College BOWDOIN MAINE from SEPT. 1950 to MAY 1952

### Indicate your medical education in the following manner:

(Applicants matriculating in medical schools and graduated therefrom between August 1, 1901, and August 1, 1911, must show the medical college attended for both preliminary and professional education was such as prescribed by the Association of American Medical Colleges for the purpose of matriculation and graduation.)

I have spent 4 years in the study of medicine and surgery each year comprising 9 each in the following institutions:

(Note.—Mention dates of each course (1st year, 2nd year, etc.) and complete each one chronologically. If attended more than one school, furnish credentials from each.)

From the 4 day of SEPT. 1963, to the 23 day of MAY 1964, BOSTON UNIV. BOSTON, MASS

From the 4 day of SEPT. 1964, to the 24 day of MAY 1965, (NAME)

From the 13 day of SEPT. 1965, to the 24 day of MAY 1966, (NAME)

From the 13 day of JUNE 1966, to the 27 day of MAY 1967, (NAME)

From the 24 day of JUNE 1967, to the 24 day of JUNE 1968, UCLA LOS ANGELES, CALIF

From what school did you obtain the degree Doctor of Medicine?  
BOSTON UNIVERSITY 24 MAY BOSTON, MASS on 28 day of MAY 1967

Is this application accompanied by the original diploma or a photographic copy thereof? PHOTOCOPY

I base this application on a "Diploma" certificate issued to me on the 24 day of JUNE 1968

upon (1) written or (2) oral examination WRITTEN

Have you ever filed an application in California? NO

Have you ever failed in a written examination in California? [REDACTED] Give particulars [REDACTED]

How long since you have ceased the active practice of medicine and surgery? [REDACTED]

What has been your vocation since you ceased practice? [REDACTED]

In what other states have you applied for license or registration? NONE

Have you ever been denied a license or certificate or the right to take an examination? [REDACTED]

\*Applicants having application for a diploma certificate based after September 21, 1931, must submit documentary evidence of the majority of a year's literary satisfactory to the Board prior to the date of the issuance of diploma certificate.

Has any license entitling you to practice in any foreign country or in any state or territory of the United States been suspended or revoked?                      If so, specify                     

Have you ever been or are you now addicted to narcotic drugs?                      Have you ever been charged with addiction?                     

Specify charge:                     

Have you ever made an offer in compromise in connection with the Harrison Narcotic Law?                     

Have you ever been called before a Federal, state or local enforcement officer?                     

Have you ever been charged with a violation of any law of a foreign country, or with a violation of a U. S. STATUTE or STATE STATUTE?                      If so, give full particulars                     

Office                      Place                      Disposition                      Date of Disposition                     

My physical description on this date is as follows:                      Finger print classification                     

Height                      inches; weight                      pounds; color of eyes                     ; of hair                     ; identification marks                     

Are you suffering from any ailment communicable to others?                      Have you ever practiced as an itinerant physician?                     

Have you ever been connected, directly or indirectly, with any medical concern, company, institution, advertising specialty or advertising specialist?                      If so, when and where?                     

                     Give all details                     

Do you hereby agree, should a certificate be granted entitling you to practice as a physician and surgeon in the State of California, not to become connected, directly or indirectly, with any medical concern, company, institution, advertising specialty or advertising specialist?                     

Was the photo attached to this application a likeness taken within sixty days next preceding the date of the affidavit affixed hereto?                     

Have you answered the above questions from your own knowledge or upon information or from your best recollection?                     

APPLICANT WILL LEGITIMATELY COPY IN THE SPACE IMMEDIATELY BELOW, THE "DIPLOMATE" CERTIFICATE ON WHICH HE IS

NATIONAL BOARD OF MEDICAL EXAMINERS  
OF THE  
UNITED STATES OF AMERICA  
Lawrence Whitfield Miller M.D.  
having satisfied all the requirements and having successfully passed the examinations is hereby declared a Diplomate of the National Board of Medical Examiners.

Attest: RICHARD H. YOUNG,  
Chairman of the Board

SEAL  
JOHN P. HUBBARD,  
President of the Board

Philadelphia, Pa.  
June 24, 1968  
Cert. # 93210

STATE OF California  
County of San Diego  
Lawrence W. Miller M.D.  
being duly sworn, deposes and says that he is the applicant named in the foregoing application for a Certificate to practice as a Physician and Surgeon in the State of California; that he has read the foregoing application; I know the contents thereof to be true.

Subscribed and sworn to before me this 24th day of June, 1968

MARGARET K. LANG  
NOTARY PUBLIC - CALIFORNIA  
PRINCIPAL OFFICE IN  
LOS ANGELES COUNTY

(Note.—This affidavit and the information supplied on the foregoing next page must be dated within 60 days of the filing date of this application. After you have completed all data required on page No. 1 and No. 2, affix your affidavit, THEN send this blank to the Secretary of the National Board of Medical Examiners, who will return it top of next page.)

Certification of the National Board of Medical Examiners

(Note.—This endorsement SHOULD NOT BE EXECUTED unless the applicant has read and the affidavit at the bottom of the preceding page.)

NATIONAL BOARD OF MEDICAL EXAMINERS

I, John P. Hubbard, M.D., President of the National Board of Medical Examiners and official custodian of the records of said Board, certify that the foregoing Diplomate Certificate No. 93210 will be issued to Lawrence Whitfield Miller, M.D., on the 24 day of June 19 68 and ~~XXXXXX~~ delivered to him; (2) that prior thereto said applicant filed with the National Board, his Medical Diploma; (3) that said applicant has passed examinations given by the National Board as follows:

Part	Location of examination	Month	Day	Month	Day	Enter percentage
1st part	Boston, Massachusetts	June	22	June	23	65
						82.8
2d part	Boston, Massachusetts	April	18	April	19	67
						86.0
3d part	Los Angeles, Calif.	March	13			68
						86.3

(4) that the complete record of said applicant's credentials and examination will be forwarded for inspection to the California Board on request; (5) that the "Diplomate" Certificate on the preceding page bears the original date of issue (if a Duplicate please add an explanatory note); (6) that from the records of the National Board of Medical Examiners, I believe the above applicant to be a fit, proper and fully qualified person to receive a physician's and surgeon's certificate to practice in California and so recommend.

In testimony whereof witness my hand and seal  
John P. Hubbard M.D.  
Secretary of executive office

[SEAL] Official title President

dated at Philadelphia, Pennsylvania Address 3930 Chestnut Street  
Philadelphia, Pennsylvania, 19104  
this 4 day of June 19 68

It is hereby certified that Lawrence Whitfield Miller entered the Pre-Medical class in the Baylor University School of Medicine on the 9th day of Sept 1962

1. That as evidence of PRELIMINARY EDUCATION (high school) he presented a transcript from Brentwood College dated 2/15/62

2. That as evidence of PRELIMINARY EDUCATION (college) he presented a transcript from Brentwood College dated July 16, 1963 - 39 Ave. Conner

3. That prior to commencing the study of medicine he completed a one-year course of college grade in each of the subjects of chemistry, physics and biology as shown on the accompanying certification.

Every application based on a certificate issued after January 1, 1919, must show that prior to commencing the last half of the second year in the study of medicine, he has completed one year of college grade in the subjects of physics, chemistry and biology. After January 1, 1924, and course must have preceded the study of medicine. After September 21, 1931, an applicant must show the completion of a two year's college course, including the subjects of Physics, Chemistry and Biology prior to commencing the study of medicine and an applicant matriculating in a medical school after January 1, 1931 must show the completion of a three year's college course, including the subjects of Physics, Chemistry and Biology.

\*Strike out number 3 if course not of record in your Certificate, i.e., filed as matriculation requirement.

4. That he attended 41 courses of lectures given by this institution, completed during a period of 1 1/2 years and was awarded the degree Doctor of Medicine on the 26th day of May 1967

Signed John P. Hubbard President/Dean/Secretary

of Baylor University School of Medicine this 22nd day of April 1968

Graduates after August 10, 1913, must show the completion of 4 terms of 32 weeks, totaling 128 weeks, and a minimum of 4000 hours in the subjects set forth in the Medical Practice Act of California.