

[Attorney Name/Law Firm Name]  
[Address Line 1]  
[Address Line 2]  
[City, State, Zip Code]  
[Phone Number]  
[Email Address]

[Date]

[Investigator Name or Office of General Counsel]  
[State Medical Board Name]  
[Address Line 1]  
[City, State, Zip Code]

**RE: Letter of Representation**

**Licensee:** [Physician Full Name]  
**License Number:** [License Number]  
**Case Number:** [Case/Reference Number]

To the Honorable Members of the Board/Investigative Staff:

Please be advised that this office has been retained to represent **[Physician Full Name]** regarding the above-referenced matter and the initial investigation currently being conducted by the [State Medical Board Name].

We kindly request that all future correspondence, notices, requests for information, and inquiries related to this matter be directed to my attention at the address listed above. We further request that no board investigator or representative attempt to contact my client directly without my express consent and presence.

We are currently in the process of reviewing the allegations and gathering relevant documentation. Please provide us with a complete copy of the initial complaint and any supporting documentation that has been made available to the Board at this stage.

If there are pending deadlines for a formal response or a request for an interview, we respectfully request a [Number of Days]-day extension to ensure a thorough and accurate submission. My office will cooperate fully with the Board's investigation to ensure a fair and efficient resolution.

Thank you for your professional courtesy and attention to this matter.

Sincerely,

[Attorney Signature]  
[Attorney Printed Name]  
[Law Firm Name]

CC: [Physician Full Name]