

TEXAS STATE BOARD OF VETERINARY MEDICAL EXAMINERS

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Austin, Texas 78701

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[www.veterinary.texas.gov](http://www.veterinary.texas.gov)

MAILING LIST REQUEST FORM



**STANDARD FORMAT** (please indicate choice)

**FORMAT :**  Email attachment

**TYPE :**  EXCEL spreadsheet - most spreadsheet and accounting software can import the data  
Either file can be sorted by the receiver and the data can be manipulated within the file to suit your field arrangement needs.

**DATA :** Standard data includes the items checked below.

**NAME:**

Title  Name  License Type - please check which license type(s) you are requesting  
 DVM  EDP  LVT

**ADDRESS(ES)** (mailing and practice address may not be the same):

Mailing Address  Clinic Name  Clinic/Practice Address  Clinic/Practice Phone #

**LICENSE STATUS:**

Active/Regular  Inactive  Military  
 Special  Temporary

**LICENSE INFORMATION:**

License #  Issue Date  Expiration Date

**COST :**  Standard Data via e-mail attachment - \$50.00

All sales must be prepaid. Please submit this form along with your check, money order or cashier's check made payable to the Texas State Board of Veterinary Medical Examiners and mail it to the address given above. (Credit cards or cash are not accepted).

Please note that it can take up to 10 (ten) days after receipt of the request and payment to get the data out to you.

Company/Client Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone#: (\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Enclosed \$ \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Texas Government Code 552.137 and Texas Attorney General Open Records Opinion ORD684 we are unable to provide email addresses of licensees.

§ 552.137: Confidentiality of Certain Email Addresses

(a) Except as otherwise provided by this section, an email address of a member of the public that is provided for the purpose of communicating electronically with a governmental body is confidential and not subject to disclosure under this chapter.

The signature on this form verifies that the company/client accepts the charges set out above. If this form is not signed, it will be returned for proper signature prior to composing and releasing the requested information/data.