



KENTUCKY BOARD OF VETERINARY EXAMINERS

107 Corporate Drive, Second Floor, Frankfort, KY 40601

Office: 502-782-0273 • Fax: 502-695-5887

kybve.com • vet@ky.gov

Request for Mailing List

OFFICIAL USE ONLY

Instructions: This form must be completed by persons or entities seeking a credential holder [~~licensee~~] mailing list from the Kentucky Board of Veterinary Examiners. **All lists are created in Microsoft Excel and provided electronically by secure link via email, unless otherwise requested.** The fee for this service is **[\$15]** per request.

I. Contact Information					
First Name	Last Name	Phone Number			
Email Address					
Address Type	Street	City	ST	Zip	Country
<u>If non-commercial requestor, Personal Mailing Address</u> , if non-Commercial requestor]					
<u>If commercial requestor, Business Name</u>					
Business Address					
Business Phone					

II. Request Information

- Fee Payment. [\$15] Checks shall be [~~check~~] payable to the KENTUCKY STATE TREASURER. Cash is not accepted. Indicate purpose:**
 - Commercial purpose - \$60 KVMA or in-state affiliate VMA, no charge for
 - Non-commercial purpose - \$30 first three (3) requests in a calendar year - # _____
- Choose a preferred file format:**
 - Microsoft Excel (2010 – current) - Standard Text (Tab delimited)
 - Microsoft Excel (1997 – 2003) - Standard CSV (comma-delimited)

Submit Complete Form to:
Kentucky Board of Veterinary Examiners
107 Corporate Dr, Second Floor
Frankfort, Kentucky 40601



3. [~~Indicate intended use for documents:~~ Commercial Non-Commercial] If **“Commercial”** selected, indicate the intended use of the information requested. (KRS 61.874)

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Signature of Requestor		Date	
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