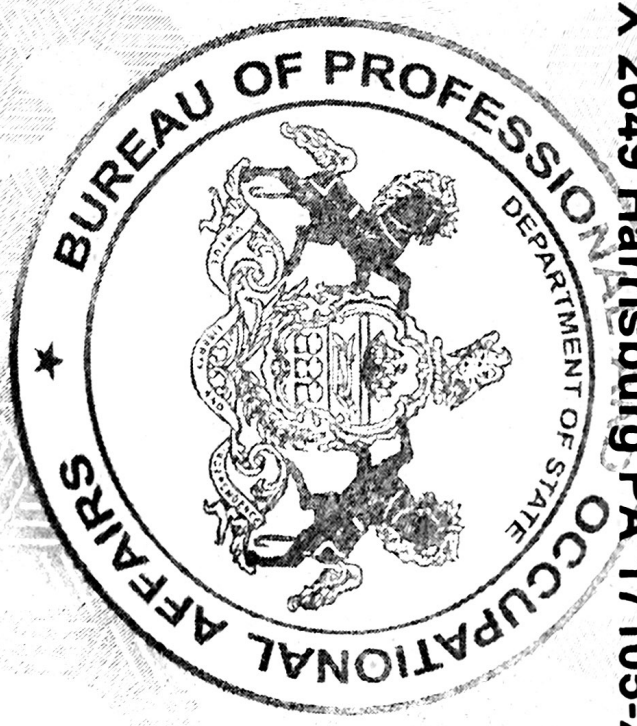


21 0261787

Commonwealth of Pennsylvania
Department of State
Bureau of Professional and Occupational Affairs
PO BOX 2649 Harrisburg PA 17105-2649

License Type
Registered Nurse

LAKIRA WILLIAMS
2303 S 7TH ST
CAMDEN, NJ 08104



License Status
Active

Initial License Date
07/12/2016

Expiration Date
10/31/2023

License Number
RN685829

Commissioner of Professional and Occupational Affairs

Signature

21 0261787

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License Information

Accurate as of April 12, 2024 11:12 PM

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Name: LAKIRA WILLIAMS

Address: Camden,NJ

Profession/License Type: Nursing,Reg. Prof. Nurse-Single State

License No: 26NR19331800


License Status: Active

Status Change Reason: License Issuance

Issue Date: 6/15/2017

Expiration Date: 5/31/2025

SPL: New Jersey


My licenses with
PA
1


Current
Renewals
0


Saved
Applications
0


Relationships
Between
Licenses


Messages

WILLIAMS, LAKIRA

 Edit your informa

Address 2303 S 7TH ST
Camden, New Jersey, United States, 08104

Email address lakira1119@gmail.com

SSN 8744

Date of Birth 11/19/1992

Gender FEMALE


Apply for New License


Request Preliminary Determination



Request Approval

Professional License Details

 Link Facility Licenses  Link Person Licenses

10 entries

Search:

Request	License Number	Name	Board/Commission	License Type	Status	Issue Date	Expiration Date	Pre-Req
REQUEST	RN685829 	LAKIRA WILLIAMS	Nursing	Registered Nurse	Active	7/12/2016	10/31/2025	