## STATE OF IDAHO

## LICENSED PROFESSIONAL NURSE

This is to certify that

## **CHRISTINE LARSEN**

having fulfilled the requirements of the laws of Idaho and possessing the prescribed qualifications is hereby authorized to practice as a Licensed Professional Registered Nurse (RN) in the State of Idaho.

IN WITNESS WHEREOF,

We hereunto set our names and the Seal of the State Board of Nursing on this 26'th day of October, in the year 2018.

License Number: 58518

IDAHO STATE BOARD OF NURSING

Chairman of the Board

res Rus **Executive Director**