



I do hereby certify this to be a complete, accurate, and true copy of the document which is on file or is of record in the offices of the Texas Board of Nursing.
Katherine A. Thomas
Executive Director of the Board

Texas Board of Nursing

1801 Congress Avenue, Ste. 10-200, Austin, Texas 78701
Phone: (512) 305-7400 Fax: (512) 305-7401
www.bon.texas.gov

Katherine A. Thomas, MN, RN, FAAN
Executive Director

August 3, 2023

Krystel Gubernath
4345 Cunningham Dr
Wichita Falls, TX 76308

Dear Ms. Gubernath:

My name is Diane Dougal, and I am the case manager assigned to monitor your compliance with the Board Order you were recently issued.

To assist me in being able to contact you with any questions I may have, please complete and return the enclosed contact information page and I will add it to your file.

Please feel free to contact me with any questions about the requirements of your Order:

Texas Board of Nursing
Diane Dougal, Compliance Supervisor
1801 Congress Avenue, Suite 10-200
Austin, Texas 78701
Email: compliance@bon.texas.gov
Phone: (512) 305-6827
Fax: (512) 305-6870

Sincerely,

Diane Dougal
Compliance Supervisor

/007

11(2023.08.03) - W2020491

Kathy Shipp, MSN, APRN, FNP
Lubbock, *President*

Allison Porter-Edwards, DrPH, MS, RN, CNE
Bellaire, *Vice-President*

TEXAS BOARD OF NURSING
Attention: Diane Dougal, Compliance Supervisor
1801 Congress Avenue, Suite 10-200, AUSTIN, TEXAS 78701
Phone: (512) 305-6827 - E-mail: compliance@bon.texas.gov - Fax: (512) 305-6870

CONTACT INFORMATION SHEET

NAME: KRYSTEL MARIE GUBERNATH
LVN 349980 W2020491

ADDRESS: _____

CITY: _____

STATE: _____

ZIP CODE: _____

PHONE: _____

E-MAIL: _____

By providing your email address, you give us permission to use the email address you provide to contact you regarding compliance matters.

Does the above address information need to be submitted as a change of address?

___ YES ___ NO

Signature: _____

Date: _____