



DARYL WILLIAM SAMPLE

License Number: RN1963292

Data As Of 6/27/2025

This license is clear to practice in his/her profession in the state of Florida in response to the COVID-19 public health emergency.

Profession	Registered Nurse
License	RN1963292
License Status	PUBLIC HEALTH EMERGENCY ACTIVE
Qualifications	Single-state License
License Expiration Date	
License Original Issue Date	09/26/1988
Address of Record	This practitioner does not have an address of record on file with the department. If you have any questions, please contact the department at (850) 488-0595.
Address of Record	NOT PRACTICING
Discipline on File	No
Public Complaint	Yes
Alerts	Enforcement Alert 4/11/2024 3:48:20 PM Order of Emergency Suspension of License was filed 04/10/2024.

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

Name	License	Profession	City	County	State	Case #	Action Taken	Action Date
SAMPLE, DARYL	1963292	REGISTERED NURSE	UNKNOWN CITY	PINELLAS		202410430	ESO ISSUED	04/10/2024

Discipline Cases

No Discipline Found

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
SAMPLE, DARYL WILLIAM	1963292	REGISTERED NURSE			202410430	AC FILED

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

[Discipline Public Records Request](#)

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at:

Division of Medical Quality Assurance
Public Records
4052 Bald Cypress Way, Bin C01
Tallahassee, FL 32399-3251

Please include the following:

1. Full name and license number of the practitioner;
2. Name and address where documents are to be sent; and

3. If you require certification of the documents, a \$25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.