BEFORE THE
NORTH CAROLINA MEDICAL BOARD

In re:	)	
	)	
Orrin Abraham Walker, M.D.,	)	**ACCEPTANCE OF SERVICE**
	)	
Respondent.	)	

I, Alan Schneider, hereby state that I am the Attorney for Respondent for the DENIAL OF LICENSURE dated November 4, 2024, and that I accept service and acknowledge receipt of same.

This the 7th day of November, 2024.

Alan Schneider
Cheshire Parker Schneider, PLLC
133 Fayetteville Street, Ste 400
Raleigh, NC 27601
919-833-3114
alan.schneider@cheshirepark.com