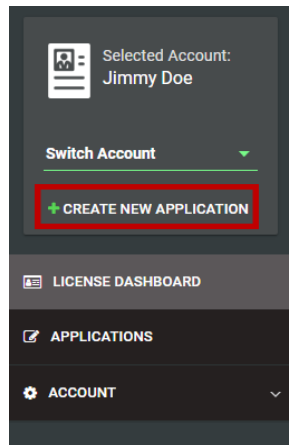


## Update a Patient Application

**Note:** It is recommended that you use Google Chrome as your internet browser because other browsers may not work properly with the Patient Registry website.

1. Log in to your **Patient Registry** account at: <https://mo-public.mycomplia.com>.
2. You are on the Patient Registry License Dashboard. Click '**Create New Application**'.



3. Click '**I am a**'.

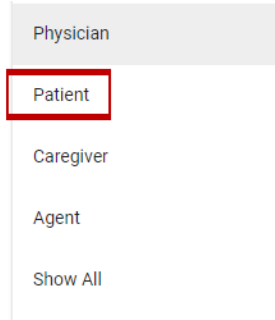
### New Application

You are creating a new application for: **Jimmy Doe**

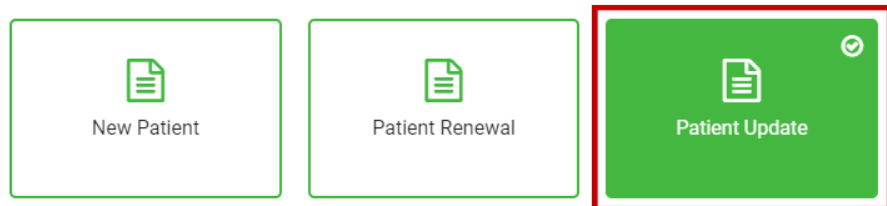
I am a \*


**i** Please switch accounts if you want to create an application for a different person or business.

4. Select **'Patient'**.



5. Select **'Patient Update'**. Click **'Create Application'**.



 Please switch accounts if you want to create an application for a different person or business.

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**CREATE APPLICATION**

6. On the License Information tab, click **'License Number'** to select the Patient ID number.

Applications / Patient Update Application

LICENSE INFORMATION    GENERAL INFORMATION    CONTACT INFORMATION    PHYSICIAN / CONDITION INFORMATION    QUESTIONS    DOCUMENTS    PAYMENT    REVIEW

Please select the applicable license number from the drop down. Please note: If your license has been deactivated or is expired, it may not appear in the drop down.

License Number \*

Does this Update involve a change to your name?  No

Does this Update involve a change in your residence address?  No

Does this Update involve a change to your desire to cultivate medical marijuana?  No

Does this Update involve a change in the recommended dosage amount of your Physician Certification Form(s)?  No

Does this Update involve a change in the location of your cultivation location and/or security agreement?  No

Do you intend to cancel your patient registration?  No

7. To make any changes, click to change the status from 'No' to 'Yes'. For this example, change the status for the desire to cultivate medical marijuana. Click the slide bar to **'Yes'**.

Does this Update involve a change to your desire to cultivate medical marijuana?



8. Click **'Save'**.



9. Click **'Save & Next'**.



10. Go to the Review Tab.

Applications / Patient Update Application

LICENSE INFORMATION GENERAL INFORMATION CONTACT INFORMATION PHYSICIAN / CONDITION INFORMATION QUESTIONS DOCUMENTS PAYMENT REVIEW

Please select the applicable license number from the drop down. Please note: If your license has been deactivated or is expired, it may not appear in the drop down.

License Number \*  
PAT000179

Does this Update involve a change to your name?  No

Does this Update involve a change in your residence address?  No

Does this Update involve a change to your desire to cultivate medical marijuana?  Yes

Does this Update involve a change in the recommended dosage amount of your Physician Certification Form(s)?  No

Does this Update involve a change in the location of your cultivation location and/or security agreement?  No

Do you intend to cancel your patient registration?  No

SAVE SAVE & NEXT CANCEL

11. Review your updated information. If there are any red X's, return to that section and make the necessary corrections. When you have all green check marks, scroll down and click 'Pay & Submit'.

Payment

✓ Payment Options: Credit Card

PAY & SUBMIT CANCEL