

Executive Director

## **VETERNARY MEDICAL EXAMINERS** 8100 SEATON PLACE--SUITE A **MONTGOMERY AL 36116** (334) 395-5112 (334) 395-5117(fax)

ALABAMA STATE BOARD OF





## **LICENSE VERIFICATION REQUEST AND AUTHORIZATION:**

Name:	SAMANTHA RUZI	<u>ICKA</u>	License #:	<u>1052</u>
I authorize the Alabama State Board of Veterinary Medical Examiners to release information in regards to the status and standing of my license to practice veterinary medicine and/or surgery in the State of Alabama				
ALABAMA BOARD VERIFICATION:				
APPLICANT LI	CENSE NUMBER:	<u>1052</u>	DATE ISSUED:	06/15/2023
Qualifications for license in year of issue:		GRADUATE -	CEDAR VALLEY	2022, the STATE EXAM
Current License Status:		ACTIVE STATUS EXPIRATION DATE. 12/31/2025		
Disciplinary Action?		☑ NO	☐ YE	S
Current Disciplinary Action?		☑ NO	☐ YE	S
Pending Disciplinary Action?		☑ NO	☐ YE	S
If yes to any disciplinary action, you will find attached a certified copy of the Finding of Fact, Conclusions of Law, and /or Final Order, or the charges of a pending case.				
Board Signature: Tammy S. Cargile Executive Director				