

ALABAMA STATE BOARD OF **VETERNARY MEDICAL EXAMINERS** 8100 SEATON PLACE--SUITE A **MONTGOMERY AL 36116** (334) 395-5112

(334) 395-5117(fax)





LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

	-			
Name: <u>RIC</u>	HARD W GREE	<u>EN</u>	License #:	<u>1826</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 LICEN	ISE NUMBER:	<u>1826</u>	DATE ISSUED:	06/01/1968
Qualifications for license in year of assue:		GRADUATE - AU 1968, the STATE EXAM		
Current License Status:		DECEASED STATUS EXPIRATION DATE. 12/31/2023		
Disciplinary Action?		☑ NO	☐ YE	ES
Current Disciplinary Action?		☑ NO	☐ YE	ES
Pending Disciplinary Action?		☑ NO	☐ YE	ES
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				