

ALABAMA STATE BOARD OF VETERNARY MEDICAL EXAMINERS 8100 SEATON PLACE--SUITE A MONTGOMERY AL 36116 (334) 395-5112 (334) 395-5117(fax)



Tammy S Cargile Executive Director

www.asbvme.alabama.gov

LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name:	MELVIN McINNIS	<u>:</u>	Lice	ense #: <u>2</u>	<u> 125</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 LICENSE NUMBER:		<u>2125</u>	DATE ISSUED: <u>08/07/1971</u>		
Qualifications for license in year of issue:		GRADUATE - AU 1971, the STATE EXAM			
Current License Status:		ACTIVE STATUS EXPIRATION DATE. 12/31/2025			
Disciplinary Act	tion?	☑ NO	ı	☐ YES	
Current Disciplinary Action?		☑ NO	I	☐ YES	
Pending Disciplinary Action?		☑ NO	☐ YES		
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 Signatur	re: Tammy	S. Carrile	Date: <u>(</u>	<u>05/30/20</u>	<u>025</u>

Executive Director