

## 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:

EICEINSE VERMITCHTION REQUI	EDI III ID II CII	101112111011 <u>1</u>	
Name: RONALD L SCHIN	<u>DLER</u>	License #: 2	<u>2171</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>2171</u>	DATE ISSUED:	04/15/1972
Qualifications for license in year of issue:	GRADUATE -	KS 1969, the STAT	TE EXAM
Current License Status:	DECEASED STATUS EXPIRATION DATE. 12/31/2024		
Disciplinary Action?	☑ NO	☐ YES	S
Current Disciplinary Action?	☑ NO	☐ YES	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: Cayale Date: 05/30/2025  Tammy S. Cargile Executive Director			