

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: <u>STEVEN C OSBOR</u>		<u>NE</u> License #: <u>2985</u>			<u> 2985</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 BOAR	bama State Board of Veterinary Medical Examiners to release information in as and standing of my license to practice veterinary medicine and/or surgery in ma RED VERIFICATION: CENSE NUMBER: 2985 DATE ISSUED: 07/15/1979 License in year of GRADUATE - AU 1979, the STATE EXAM atus: ACTIVE STATUS EXPIRATION DATE, 12/31/2025 n? YES Try Action? NO YES Dinary action, you will find attached a certified copy of the Finding of Fact, w, and /or Final Order, or the charges of a pending case.				
APPLICANT LICENSE NUMBER:		<u>2985</u>	DATE IS	SSUED:	07/15/1979
Qualifications for license in year of issue:		GRADUATE - AU 1979, the STATE EXAM			
Current License Status:		ACTIVE STATUS EXPIRATION DATE. 12/31/2025			
Disciplinary Action?		☑ NO		☐ YES	S
Current Disciplinary	Action?	☑ NO		☐ YES	S
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 Signature: Cayal Date: 05/30/2025 Tammy S. Cargile Executive Director					