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Executive Director

www.asbvme.alabama.gov

ALABAMA STATE BOARD OF **VETERNARY MEDICAL EXAMINERS**

LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name: <u>ROY S M</u>	<u>ORRING</u>	License #:	<u>4192</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 N	UMBER: <u>4192</u>	DATE ISSUED:	09/16/1991
Qualifications for license in issue:	year of <u>GRADUAT</u>	E - AU 1991, the STA	TE EXAM
Current License Status:	ACTIVE ST	TATUS EXPIRATION	DATE. 12/31/2025
Disciplinary Action?	☑ NO	☐ YE	S
Current Disciplinary Action	n?	☐ YE	S
Pending Disciplinary Actio	n?	☐ 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	Date: <u>05/30/2</u>	<u>025</u>