

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: | MATTHEW A CON | <u>NOLLY</u> | Lic | cense #: 4 | <u> 1632</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>4632</u> | DATE ISSUED: <u>08/01/1997</u> | | |
| Qualifications for license in year of issue: | | GRADUATE - AU 1997, 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 | 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 Date: 05/30/2025 | | | | | |

Executive Director