

## **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

ALABAMA STATE BOARD OF

## LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name: <u>WI</u>	LLIAM R BRAW	NER III	Lic	cense #: <u>5</u>	<u>5075</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>5075</u>	DATE IS	SSUED:	05/08/2001
Qualifications for license in year of ssue:		GRADUATE -	AU 2001,	the STA	TE EXAM
Current License Status:		ACTIVE STAT	TUS EXPI	<u>RATION</u>	DATE. 12/31/2025
Disciplinary Action?		☑ NO		☐ YES	S
Current Disciplinary Action?		☑ NO		☐ YES	5
Pending Disciplinary Action?		☑ NO		☐ YES	5
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					