

ALABAMA STATE BOARD OF **VETERNARY MEDICAL EXAMINERS** 8100 SEATON PLACE--SUITE A **MONTGOMERY AL 36116** (334) 395-5112

(334) 395-5117(fax)

www.asbvme.alabama.gov



LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

| Name: <u>ROXY J LESLIE</u> | | License #: | 5288 |
|---|------------------------|----------------------|-----------------------|
| 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>5288</u> | DATE ISSUED: | 04/22/2003 |
| Qualifications for license in year of issue: | GRADUATE - | LA 2000, the STA | TE EXAM |
| Current License Status: | <u>SUSPENDED</u> | STATUS EXPIRA | TION DATE. 12/31/2023 |
| Disciplinary Action? | ☑ NO | ☐ YE | S |
| Current Disciplinary Action? | ☑ NO | ☐ YE | 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. | | | |
| • | S. Cargile ve Director | Date: <u>05/30/2</u> | <u>025</u> |