

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

(334) 395-5117(fax)





LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name: <u>ADAM H LANGSTO</u>		<u>DN</u> License #: <u>5692</u>		
	s and standing of m			release information in dicine and/or surgery in
ALABAMA BOARD VERIFICATION:				
APPLICANT LIC	ENSE NUMBER:	<u>5692</u>	DATE ISSUED	o: <u>08/29/2006</u>
Qualifications for license in year of issue:		GRADUATE - AU 2000, the STATE EXAM		
Current License Status:		ACTIVE STATUS EXPIRATION DATE. 12/31/2025		
Disciplinary Action?		☑ NO	□ Y	ES
Current Disciplinary Action?		☑ NO	□ Y	ES
Pending Disciplinary Action?		☑ NO	□ Y	ES
• • •	olinary action, you w w, and /or Final Ord		1 0	f the Finding of Fact, e.
Board Signature:	•	S. Cargile de Director	Date: <u>05/30</u>	<u>/2025</u>