

## 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>WILLIAM</u>  | <u>R CARR</u>         | License #: 5          | <u>5756</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 NU  | JMBER: <u>5756</u>    | DATE ISSUED:          | 05/13/2007       |
| Qualifications for license in gissue:   | year of <u>GRADUA</u> | TE - TU 2007, the STA | TE EXAM          |
| Current License Status:   | ACTIVE S              | STATUS EXPIRATION     | DATE. 12/31/2025 |
| Disciplinary Action?  | ☑ NO                  | ☐ YES                 | S                |
| Current Disciplinary Action?  | ✓ NO                  | ☐ YES                 | S                |
| Pending Disciplinary Action   | ? <b>I</b> 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: <u>05/30/2</u>  | <u>025</u>       |

**Executive Director**