

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:	LAURA BRANNON	<u>V</u>	License #:	<u>6518</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 LI	CENSE NUMBER:	<u>6518</u>	DATE ISSUED:	04/19/2013
Qualifications for license in year of ssue:		GRADUATE - AU 2013, the STATE EXAM		
Current License Status:		SUSPENDED STATUS EXPIRATION DATE. 12/31/2001		
Disciplinary Acti	on?	☑ NO	☐ YE	S
Current Disciplin	ary Action?	☑ NO	☐ YE	S
Pending Disciplin	nary Action?	☑ NO	☐ YE	S
•	iplinary action, you w aw, and /or Final Ord		1 .	
Board Signature	: Tammy	S. Carrile	Date: <u>05/30/2</u>	<u> 2025</u>

Executive Director