

8100 SEATON PLACE--SUITE A MONTGOMERY AL 36116 (334) 395-5112 (334) 395-5117(fax)



Executive Director www.asbvme.alabama.gov

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Tammy S. Cargile Executive Director

Board Signature:

LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name:	MEGAN L HATAWA	AY CHRISTJOH	<u>N</u> License #:	<u>7106</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 L	ICENSE NUMBER:	<u>7106</u>	DATE ISSUED:	05/08/2018
Qualifications fo issue: Current License	r license in year of		AU 2018, the STA	<u>ATE EXAM</u> N DATE. 12/31/2025
Current License	Status.	ACTIVE STAT	<u>US EATTKATIO</u>	V DATE. 12/31/2023
Disciplinary Act	ion?	☑ NO	☐ YE	ES
Current Disciplin	nary Action?	☑ NO	☐ YE	ES
Pending Discipli	nary Action?	☑ NO	☐ YE	ES
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.				

Date: <u>05/30/2025</u>

ALABAMA STATE BOARD OF VETERNARY MEDICAL EXAMINERS