

Executive Director

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



ALABAMA STATE BOARD OF



LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

| Name: <u>T</u> | RACY M MILLER | | License #: | <u>7107</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 NUMBER: | | <u>7107</u> | DATE ISSUED: | 05/08/2018 |
| Qualifications for license in year of issue: | | GRADUATE - AU 2018, the STATE EXAM | | |
| Current License Status: | | ACTIVE STATUS EXPIRATION DATE. 12/31/2025 | | |
| Disciplinary Action? | | ☑ NO | ☐ YE | S |
| Current Disciplinary Action? | | ☑ NO | ☐ YE | S |
| Pending Disciplinary Action? | | ☑ NO | ☐ YE | S |
| | linary action, you w w, and /or Final Ord | | | _ |
| Board Signature: | • | S. Cargile e Director | Date: <u>05/30/2</u> | <u>2025</u> |