

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

(334) 395-5117(fax)

www.asbvme.alabama.gov



LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name: AR	RIANA MARIA IO	ONAS	Licens	e#: <i>7</i>	109
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 LICE	NSE NUMBER:	<u>7109</u>	DATE ISSU	ED:	05/19/2018
Qualifications for license in year of issue:		GRADUATE -	LINCOLN 20	18, th	e STATE EXAM
Current License Status:		ACTIVE STATUS EXPIRATION DATE. 12/31/2025			
Disciplinary Action?		☑ NO		l _{YES}	
Current Disciplinary Action?		☑ NO	☐ YES		
Pending Disciplinary Action?		☑ NO	☐ YES		
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 Executive Director					