

Executive Director

Board Signature:

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:	REBECCA PARKE	R	License #:	7363
				
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>7363</u>	DATE ISSUED:	06/12/2020
Qualifications for issue:	license in year of	<u>GRADUATE</u>	- ST GEORGES 20	20, the STATE EXAM
turrent License Status:		ACTIVE STATUS EXPIRATION DATE. 12/31/2025		
Disciplinary Actio	on?	☑ NO	☐ YE	S
Current Disciplina	ary Action?	☑ NO	☐ YE	S
Pending Disciplin	ary Action?	☑ NO	☐ YE	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.				
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Tammy S. Cargile **Executive Director** Date: <u>05/30/2025</u>