

Executive Director

## 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: <u>HE</u>	me: <u>HEATHER ANN SA</u>		<u>TH</u> License #: <u>766</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>766</u>	DATE IS	SSUED:	05/16/2017
Qualifications for license in year of issue:		GRADUATE - JSCC 2016, the STATE EXAM			
Current License Status:		ACTIVE STAT	TUS EXPL	<u>RATION</u>	DATE. 12/31/2025
Disciplinary Action?		☑ NO		☐ YES	S
Current Disciplinary Action?		☑ NO	☐ YES		S
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: Cayal Date: 05/30/2025 Tammy S. Cargile Executive Director					