

## 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:

| ame: <u>KARI C ESTES</u>  |  | License #: <u>785</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>785</u>                                | <u>5</u> DATE ISSUED: <u>09/05/2017</u> |       |   |
| qualifications for license in year of sue:  |  | GRADUATE - CACC 2017, the STATE EXAM      |   |       |   |
| Current License Status:   |  | ACTIVE STATUS EXPIRATION 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: Tammy S. Cargile Executive Director  |  |   |   |       |   |