

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>AMANDA WILLIA</u>		<u>MS</u> License #: <u>830</u>		
	s and standing of m	•		elease information in cine and/or surgery in
ALABAMA BOARD VERIFICATION:				
APPLICANT LIC	ENSE NUMBER:	<u>830</u>	DATE ISSUED:	11/14/2018
Qualifications for license in year of issue:		GRADUATE - MSU 2013, 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
• • •			a certified copy of t es of a pending case.	he Finding of Fact,
Board Signature:		S. Cargile to Director	Date: <u>05/30/2</u>	<u>025</u>