

Tammy S Cargile 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)

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LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name:	MADISON ELIZAB	SETH FOREMA	<u>N</u> License #:	<u>833</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 1	LICENSE NUMBER:	<u>833</u>	DATE ISSUED:	01/10/2019
Qualifications for license in year of ssue:		GRADUATE - JSCC 2018, the STATE EXAM		
Current License Status:		ACTIVE STATUS EXPIRATION DATE. 12/31/2025		
Disciplinary Ac	etion?	☑ NO	☐ YE	S
Current Discipl	inary Action?	☑ NO	☐ YE	S
Pending Discip	linary 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.				
7100				

Tammy S. Cargile **Executive Director** Date: <u>05/30/2025</u>