

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>MARQUI</u>	TA NICOLE N	EWMAN	License #: ¿	<u>842</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 N	TUMBER: <u>842</u>	D	OATE ISSUED:	01/11/2019
Qualifications for license ir	year of <u>GR</u>	ADUATE - JS	CC 2016, the ST	TATE EXAM
Current License Status:		ACTIVE STATUS EXPIRATION DATE. 12/31/2025		
Disciplinary Action?	V	NO	☐ YES	S
Current Disciplinary Action?		NO	☐ YES	S
Pending Disciplinary Action?		NO	☐ YES	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.				
Board Signature: Tammy S. Cargile Date: 05/30/2025				

Executive Director