

## 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: BRITTANY JAMES  |  | <u>SON</u> License #: <u>991</u>          |                 |            | <u>991</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>991</u>                                | DATE IS         | SSUED:     | 05/18/2022 |
| Qualifications for license in year of issue:  |  | GRADUATE -                                | <i>JSCC 202</i> | 21, the ST | CATE EXAM  |
| Current License Status:   |  | ACTIVE STATUS EXPIRATION DATE. 12/31/2025 |                 |            |            |
| Disciplinary Action?  |  | ☑ NO                                      |                 | ☐ YES      | S          |
| Current Disciplinary Action?  |  | ☑ NO                                      |                 | ☐ YES      |            |
| 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  |  |   |                 |            |            |