



**Alabama State Board of Public Accountancy**

770 Washington Ave, Ste 226  
Montgomery, AL 36104-3807  
Phone: (334) 242-5700  
Fax: (334) 242-2711

**LICENSE VERIFICATION REQUEST AND AUTHORIZATION:**

Name: Gurusewak Craig Kalra License #: 10004

I authorize the Alabama State Board of Public Accountancy to release information in regards to the status of my license.

**ALABAMA BOARD VERIFICATION:**

LICENSE #: 10004 Certification Date: 08/25/2005

Board Signature:  Date: 07/05/2026  
**D. Boyd Busby**  
**Executive Director**