



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: *Kaoruko Wave Jonas* License #: *12650*

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

ALABAMA BOARD VERIFICATION:

LICENSE #: *12650* Certification Date: *07/01/2015*

Board Signature: _____

A handwritten signature in green ink that reads "D. Boyd Busby".

**D. Boyd Busby
Executive Director**

Date: *04/26/2026*