



**Alabama State Board of Public Accountancy**

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**LICENSE VERIFICATION REQUEST AND AUTHORIZATION:**

Name: **Shopon An Islam** License #: **13368**

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

**ALABAMA BOARD VERIFICATION:**

LICENSE #: **13368** Certification Date: **04/05/2018**

Board Signature:  Date: **04/26/2026**  
**D. Boyd Busby**  
**Executive Director**