



Alabama State Board of Public Accountancy

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LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name: *Adayessy H. Interiano* License #: *14165*

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

ALABAMA BOARD VERIFICATION:

LICENSE #: *14165* Certification Date: *10/05/2020*

Board Signature:

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

**D. Boyd Busby
Executive Director**

Date: *07/05/2026*