



Alabama State Board of Public Accountancy

770 Washington Ave, Ste 226
Montgomery, AL 36104-3807
Phone: (334) 242-5700
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LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name: **Foggi Ray Odod** License #: **2117**

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

ALABAMA BOARD VERIFICATION:

LICENSE #: **2117** Certification Date: **08/12/1979**

Board Signature: _____

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

D. Boyd Busby
Executive Director

Date: **07/05/2026**