



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: ***Ikia Michael Felt*** License #: ***3395***

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

ALABAMA BOARD VERIFICATION:

LICENSE #: ***3395*** Certification Date: ***11/08/1985***

Board Signature: _____

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

**D. Boyd Busby
Executive Director**

Date: ***04/25/2026***