



**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: Mydad Kr Deboise License #: 3619

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

**ALABAMA BOARD VERIFICATION:**

LICENSE #: 3619 Certification Date: 01/07/1987

Board Signature: \_\_\_\_\_

**D. Boyd Busby  
Executive Director**

Date: 04/01/2026