



Alabama State Board of Public Accountancy

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LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name: Ndeko Todd Overcomer License #: 3627

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

ALABAMA BOARD VERIFICATION:

LICENSE #: 3627 Certification Date: 01/24/1987

Board Signature:  Date: 07/05/2026
D. Boyd Busby
Executive Director