



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: **Boishaki S Hossain** License #: **5727**

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

ALABAMA BOARD VERIFICATION:

LICENSE #: **5727** Certification Date: **02/12/1993**

Board Signature: _____

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

D. Boyd Busby
Executive Director

Date: **07/05/2026**