## BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR **DENTAL BOARD OF CALIFORNIA**2005 Evergreen St., Suite 1550, Sacramento, CA 95815 P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



## **Letter of Disassociation for a Fictitious Name Permit**

Registered Fictitious na	ame				
Address:					
Street Add	ess	City	St	ate	Zip
FNP Number		Is	ssue Date		
Dental License Number	<u> </u>	Daytime 1	elephone		
I hereby certify that as	of the date of	I ar	n no longer a	associa	ited with
the office using the ab of practice.	ove fictitious nam	ne. I do not or plan	to use it at ı	my curr	rent place
I hereby certify under pinformation set forth ab		under the laws of the	e State of C	alifornia	a that the
Printed Name					
Sign	nature	Date	<del></del>		