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STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS

STATE AND CONSUMER SERVICES AGENCY • ARNOLD SCHWARZENEGGER, GOVERNOR
DENTAL BOARD OF CALIFORNIA
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CERTIFICATION OF TRANSLATION

TO THE DENTAL BOARD OF CALIFORNIA OF THE STATE OF CALIFORNIA

REGARDING: _____
Name of Applicant

I HEREBY CERTIFY that I have prepared the attached translation of

_____
(Title of Documents)

Which the above-named applicant is submitting to the Dental Board of California as apart of the application for the restorative technique and dental licensure examinations.

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA that the translation hereto attached is a true and exact copy of the translation of the accompanying document(s) entitled

_____
(Title of Documents)

EXECUTED AT _____ this _____ Day of _____ _____
Month Year

_____
Typed Name

SEAL OF TRANSLATION SERVICE

_____
Translation Service

_____
Address

_____
Telephone Number

_____
Signature

THIS CERTIFICATION MUST BE ATTACHED TO ORIGINAL COPY OF RECORD(S)