

North Dakota State Board of Dental Examiners

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For notarization of local anesthesia certificate, present photocopy of local anesthesia certificate with actual copy to Notary Public. Send this completed form with copy of local anesthesia certificate and the completed local anesthesia application to the Board office address above.

Affidavit of a True Copy

State of _____

County of _____

On this _____ day of _____, 20____, I, _____,

declare that the preceding document is a true, exact, complete and unaltered photocopy that I made of my course completion certificate.

Affiant's signature

Subscribed and sworn before me by _____ this _____ day of

_____, 20_____.

Notary Public

SEAL

My commission expires _____.