

## DENTIST

Source:	State of Utah, Department of Commerce, Division of Occupational and Professional Licensing Newsletter
Issue:	April 1, 1996
Name:	Name Changed
Title:	D.D.S.
Provider Type:	Dentist
Provider Cat.:	DENTISTRY
City:	Salt Lake City
State:	UT
Action:	Schedule II controlled substance license revoked beginning 10/18/90.
File Date:	09/17/1990
Licensing State:	UT
Reporting State:	UT
Authority:	State of Utah, Department of Commerce, Division of Occupational and Professional Licensing
Run Date:	04/01/1996
Note 3:	UT Dept. of Commerce, Div. of Occupational & Professional Licensing, 160 East 300 South, P.O. Box 45805, Salt Lake City, UT 84145-0805.