

Remove your new Pocket License from the receipt portion and carry it with you at all times.

Dental Board of California  
2005 Evergreen St., Suite 1550  
Sacramento, CA 95815-3831  
916 263-2300 Toll Free 877 729-7789

11/15  
11/15

CUT HERE

CUT HERE



Dental Board of California  
2005 EVERGREEN ST., STE 1550  
SACRAMENTO, CA 95815-3831  
916 263-2300 (TOLL FREE 877 729-7789)



CUT HERE

**I M P O R T A N T**

1. Please include your License Number on any correspondence to this office.
2. Notify the Board of any name or address change in writing.
3. Report any loss immediately in writing to the Board.
4. Please sign and carry the Pocket License with you.  
TJAHJADI ANDY KUSUMO

**DENTIST**

LICENSE NO. 49917

**TJAHJADI ANDY KUSUMO**  
222 SOUTH EMERALD ST.  
ANAHEIM CA 92804

EXPIRATION  
07/31/17

ORIGINAL  
ISSUE DATE  
08/20/02

RECEIPT NO.  
17000052

LICENSE NO.	EXPIRATION DATE	RECEIPT NO.
49917	07/31/17	17000052

**This is your receipt. Please save for your records.**

Signature \_\_\_\_\_