STATE OF ALABAMA
MONTGOMERY COUNTY

1099

BEFORE THE BOARD OF
DENTAL EXAMINERS OF ALABAMA

THIS indenture made and entered into on the day hereinafter written between the undersigned and the Board of Dental Examiners of Alabama.

W I T N E S S E T H

The undersigned in applying to the Alabama Board of Dental Examiners for a license to practice dentistry in the State of Alabama acknowledges it to be a matter of public interest and concern that the dental profession merit and receive full confidence of the public; that the practice of dentistry affects the public health, safety and welfare of people generally; and that only qualified persons should be permitted to engage in the practice of dentistry in Alabama.

In consideration for the issuance and granting of a license to practice dentistry in Alabama, the undersigned makes the following express representations and warranties:

(a) I have made no fraudulent, deceitful or misleading statement of any material fact in the matter of this license.

(b) If granted a license I agree to conduct every phase of my practice on the highest professional and ethical level.

(c) I will not participate directly or indirectly in any illegal or unethical modes of practice.

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(d) I will not practice under a false or assumed name.

(e) I will not knowingly enter into the employment of or be in association with any person, firm or corporation engaged in the practice of dentistry which advertises in an unethical manner or in a manner which may be contrary to the laws of the State of Alabama.

(f) I will not engage in unlawful advertising or any enterprise or activity which may be considered illegal or unethical conduct.

(g) I will demean myself in the matter of personal habits and conduct so as not to reflect in any manner upon my professional ability.

The undersigned further represents and states that she/he will at all times strictly obey the Code of Ethics of the American Dental Association and the Code of Ethics of the Alabama Dental Association, and the laws of the State of Alabama relating to the practice of dentistry, and covenants and agrees that should she/he/at any time knowingly violate any of the provisions of this indenture, the Alabama Board of Dental Examiners may revoke or suspend his/her license to engage in the practice of dentistry within this State.

IN WITNESS WHEREOF, I hereunto set my hand and seal on this the 19th day of June, 1988.

Joelyn Ann McClelland
Licensee

4244
License Number

10

I CERTIFY THIS INSTRUMENT WAS FILED
88 JUL 18 PM 2:02
JUDGE OF PROBATE

ALABAMA BOARD OF DENTAL EXAMINERS

Joelyn A [redacted] (Seal)

[redacted] Turn both indenture sheets in: you will receive a copy for [redacted] records