

CERTIFICATE OF COMPLETION

This letter certifies that the person below participated in the following course given by Align Technology, Inc., Continuing Education Program.

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PROGRAM PROVIDER: **Align Technology, Inc.**

DATE: **September 16, 2010**

COURSE TITLE: **Invisalign Patients First Then Build Your Practice**

EDUCATIONAL METHOD: **Lecture**

INSTRUCTOR NAME: **Dr. Mark Hodge**

COURSE LOCATION: **Honolulu, HI**

CE: **4 hours**

Code: Invisalign Appliances

Course Completion Code: 318219



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Continuing education (CE) hours issued for participation in this course may not apply toward license renewal in all states. It is the responsibility of each participant to verify the requirements of his/her state licensing board(s).