

## **Continuing Education Certificate**

The North Dakota Dental Association hereby certifies that on **September 18, 2025, Dr. Derrick Bisnett** presented a continuing education course, "**Introduction to CBCT**" in **Fargo, North Dakota**. Attendees of the seminar had the opportunity to obtain **2 hours** in continuing education credits.

William Sherwin, NDDA Executive Director

## **Certification of Attendance**

l,	hereby	certify	that I	attended	**************************************	hour	of	the
aforementioned continuing education course.								