

BEFORE THE GEORGIA BOARD OF

DENTISTS

IN THE MATTER OF:

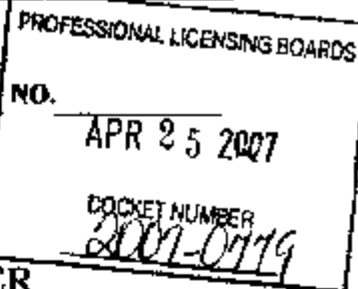
BONNIE BLEWETT

dba :

DOCKET NO.

Jon' Ric International Medical Spa and Salon :

Respondent



VOLUNTARY CEASE AND DESIST ORDER

Respondent, who conducts business at: 229 Fury's Ferry Road Augusta, GA 30907,

currently does not possess a license to practice as a : Dentist in the State of Georgia, pursuant to the Official Code of Georgia annotated (O. C. G. A.), Title 43, Chapter 11, as amended.

Potential violations of this part of O. C. G. A. have been called to the Respondent's attention.

The Respondent has consented to this order and agrees to voluntarily cease and desist from any act or practice that requires licensure under Title 43, Chapter 11, O. C. G. A., as amended, until such time the Respondent becomes properly licensed by the Board.

Respondent freely, knowingly and voluntarily waives the right to a hearing in this matter. Respondent understands that, should the Respondent apply for licensure with the Board, the Board has access to this Order and the entire investigative file in this matter.

This order is effective upon the approval by: THE GEORGIA STATE BOARD OF DENTISTS and docketing with the Division Director, Professional Licensing Boards. The Order shall remain in effect until such time as the respondent is properly licensed with the Board, or until further order. Respondent understands this Order is a public record and evidence of the final disposition of any proceedings presently before the Board.

Any violation of this Cease and Desist Order shall subject the Respondent to a fine of (\$1000.00) for each transaction constituting a violation thereof, pursuant to O. C. G. A. 43-1-20.1.

Wanda L Martin
Name of agent/ inspector serving document

19 APRIL 2007
Date document served

CONSENTED TO:

Bonnie Blewett
SIGNATURE

11/3/62
DOB SOCIAL SECURITY #

Bonnie Blewett
PRINTED NAME

229 Furr's Ferry Rd
MAILING ADDRESS

869-7755
PHONE #

Augusta, Ga 30809
MAILING ADDRESS

Sworn to and subscribed before me, this 19TH Day of APR 2007

[Signature]
NOTARY PUBLIC
My commission expires:
8/3/09

APPROVED BY: Clark Carroll, DMD wife
expressed permission
By Wanda L Martin

CHAIRPERSON

ATTESTED TO: [Signature]
DONALD MUNDAY
ACTING DIVISION DIRECTOR