



# Georgia Board of Dentistry

2 MLK Jr. Drive, SE, 11<sup>th</sup> Floor  
East Tower  
Atlanta, GA 30334

(404) 651-8000

www.gbd.georgia.gov

## Roster Request Form

All rosters come in Text format along with instructions on downloading into Excel.

The rosters contain license #, name, address, city, state, zip, county, issue date, and expiration date.

The list is in license number order and does not include phone numbers or email addresses.

Partial lists are not available (i.e., certain counties, cities, zip codes, etc.) The list contains all of the licensees in Georgia. It also contains a record layout of the files.

Payment must accompany request. We accept check or money orders made payable to the Georgia Board of Dentistry.

Please Do Not Send Cash

We do not accept Purchase Orders or Credit Cards.

If you have any questions or concerns regarding our licensee roster, please contact customer service at (404) 651-8000.

Complete the form below and mail with payment to:

Georgia Board of Dentistry  
2 MLK Jr. Drive, SE, 11<sup>th</sup> Floor  
East Tower  
Atlanta, Ga 30334

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Name: \_\_\_\_\_

Company/Business Name: \_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

\*\* Request will not be sent until payment has been received.

\*\* Rosters will be sent via email.

<i>LICENSE TYPE</i>	<i>PRICE</i>
Dental Faculty	\$25.00
Dental Hygienist	\$100.00
Dentist	\$100.00