



**Department of Regulation and Licensing**  
**Dentistry Examining Board**

Hereby certifies that  
**BRIAN D PORTER, DDS**

was granted a license to practice  
**DENTISTRY**

in the State of Wisconsin in accordance with Wisconsin law  
on the 10th day of June, 2008

*The authority granted herein must be renewed each biennium by the granting authority.*

In witness thereof, the State of Wisconsin

Dentistry Examining Board

has caused this certificate to be issued under  
the seal of the Department of Regulation and Licensing



*This license issued this 10th day of June, 2008.*

*Paul R. Borbeau, DDS*  
Chairperson  
*Linda K. Bohacek*  
Secretary