

# UTTAR PRADESH PHARMACY COUNCIL

Flat No. 204, Arif Ashiyana Complex  
Chowk, Lucknow U.P. (INDIA)



Registration No. \_\_\_\_\_  
Date of Registration \_\_\_\_\_

REGD.

18/05/2018

It is hereby certified that within signed \_\_\_\_\_



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

He/She is duly registered u/s 32 (2) of the Pharmacy Act as a  
**Registered Pharmacist**

and is entitled to all the privileges granted under the  
Pharmacy Act 1948 (8th of 1948). In witness whereof are  
herewith affixed the seal of the Uttar Pradesh Pharmacy  
Council and the signature of the Registrar of the said  
Pharmacy Council.

D.O.S. \_\_\_\_\_  
Qualification \_\_\_\_\_

Signature  
Registrar