

UTTAR PRADESH PHARMACY COUNCIL

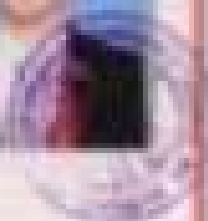
Lal Bahadur Shastri Market-2, 8 Floor, Indira Nagar, Lucknow U.P. (INDIA)



Registration No. _____

Date of Registration: _____

This is to certify that within signature of _____



Name: _____
Sex: _____
Address: _____

has been duly registered w/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 where of an
hereunto affixed the seal of the Uttar Pradesh Pharmacy
Council and the signature of the registrar of the said
Pharmacy Council.

D.O.B. _____

Qualification _____

Registrar

Note: The Certificate is the property of the Uttar Pradesh Pharmacy Council, Lucknow and is loaned to the pharmacist for his use. It is to be returned to the Council on demand.

NOTICE

1. Every Registered Pharmacist should report to the Registrar immediately within 7 days of any change in his registered address and also to advise of any other change that may be reported to the Registrar to report therein, in order that the correct address may be duly reported to the Registrar of Pharmacy.
2. All persons who are registered are legally qualified for the profession of Pharmacy.
3. Every Registered Pharmacist should renew his registration annually before the first day of April every year according to the provisions of section 32 of the Pharmacy Act, 1948.