

# COMMONWEALTH OF KENTUCKY

KENTUCKY BOARD OF PHARMACY  
State Office Bldg. Annex Third Floor Suite 300  
125 Holmes Street  
Frankfort, Kentucky 40601

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**NUMBER:** W02815      **EXPIRATION DATE:** 09/30/2018

Issued to:

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ISSUED PURSUANT TO KRS CHAPTER 315

MUST BE CONSPICUOUSLY DISPLAYED

KENTUCKY BOARD OF PHARMACY  
PHARMACIST ID

Not Applicable

LICENSE NUMBER:



(Not valid unless signed)

Pursuant to KRS 315.

Expires:

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MAILING ADDRESS