

Alabama State Board of Pharmacy
111 Village Street
Birmingham, AL 35242

Your 2017-2018 license/registration/permit has been delayed because you failed to renew before the 12-31-16 deadline. In order to continue processing your application, you must send us a written statement as to whether or not you have been performing pharmacy or drug related duties since your license/registration/permit lapsed. In addition, for individuals we will need a written statement from your supervising pharmacist. You both must reply on the form below.

Please sign, date and return to the address above. Statement must be notarized.

Sincerely,

Susan Alverson, R.P.h.

It is affirmed that all information provided herein is true and correct and it is recognized that providing false information may result in disciplinary action.

Signature _____ License/Registration/Permit # _____

Date _____

Subscribed and sworn to before me this _____ day of _____ 20__.

Notary Public (Seal)

Supervising Pharmacist Signature _____ License # _____

Date _____

Subscribed and sworn to before me this _____ day of _____ 20__.

Notary Public (Seal)