

Date: \_\_\_\_\_

To

The Secretary

Punjab Pharmacy Council

Lahore.

**SUBJECT: RENEWAL OF REGISTRATION CERTIFICATE NO. \_\_\_\_\_ A/B**

Respected Sir,

I \_\_\_\_\_ S/o, D/o \_\_\_\_\_ Registered

With Punjab Pharmacy Council having Registration No. \_\_\_\_\_.

My Registration Certificate is going to be/has been expired on \_\_\_\_\_.

Kindly renew my registration for a period of \_\_\_\_\_ years.

(Upto Maximum 5 Years)

Yours Sincerely

Name \_\_\_\_\_

Registration No. \_\_\_\_\_

Residential/Postal Address:

\_\_\_\_\_

Contact No. \_\_\_\_\_

CNIC No. \_\_\_\_\_

Date of Birth \_\_\_\_\_

Signature \_\_\_\_\_