

TO: COLLEGE OF PHARMACISTS OF MANITOBA
AND TO: COMPANIES OFFICE (MANITOBA)

FROM: _____

RE: APPROVAL TO ADD A BUSINESS NAME TO AN EXISTING PHARMACY

WHEREAS _____ is a licensed pharmacist within Manitoba; AND is the
pharmacy manager of a pharmacy called _____,
(Pharmacy/Business Name)

is requesting the addition of the business name _____
(Pharmacy/Business Name)
to this currently licensed pharmacy.

AND WHEREAS the name of the pharmacy will be approved by the Manitoba Companies Office, subject
to the College of Pharmacists of Manitoba (the "College") giving its consent to the use of such name
pursuant to *The Pharmaceutical Act* (Manitoba).

DATED this _____ day of _____, 20 _____

Signature of Pharmacy Manager

The College hereby acknowledges the foregoing, and gives its consent for the business to add the name
_____ to a currently licensed pharmacy.

DATED this _____ day of _____, 20 _____

COLLEGE OF PHARMACISTS OF MANITOBA

PER: _____
Susan Lessard-Friesen, Registrar