Georgia Board of Pharmacy

2 MLK Jr. Drive, SE, 11th Floor
East Tower
Atlanta, GA 30334
(404) 651-8000 www.gbp.georgia.gov

Decorative Wall Certificate
Order Form

- Complete print/type form below – your name will be printed on the wall certificate the same as on your pocket-card license.
- Submit this form with the $50 fee by personal check, money order or cashier's check made payable to the Georgia Board of Pharmacy.
- **Please do not submit this form and check until you are in receipt of your license.**

Name:_____

Mailing Address:_____

_____
(City) (State) (Zip)

Daytime Telephone #:_____

License #:_____

Return this completed form with the required fee to:

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Please allow eight (8) weeks for delivery.

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