T.R.

MINISTRY of HEALTH

Türkiye Medicines and Medical Devices Agency



RESPONSIBLE MANAGER PHARMACIST CERTIFICATE

DOCUMENT NO	:
DOCUMENT DATE	:
NAME SURNAME	:
T.R. IDENTIFICATION NUM	MBER :
PROFESSION	:
MANUFACTURING SITE T	ITLE :
MANUFACTURING SITE A	DDRESS :
LEGAL BASIS	:
APPROVED BY:	: