



**Odisha  
State Pharmacy Council  
Bhubaneswar**



*This is to certify that*

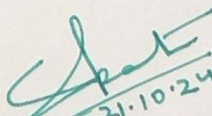
**SUBHANKAR SAHU**

*born on (D/B) 25-02-2003*

*Within signed* Subhankar Sahu

*has been duly registered as a  
Registered Pharmacist  
and is entitled to all the privileges granted  
under the Pharmacy Act 1948 (VIII of 1948), \*  
In witness whereof are herewith affixed the seal of the  
Odisha State Pharmacy Council and the signature of  
the Registrar-cum-Secretary of the said Pharmacy Council.*

Certificate No. 50817  
★ Under Section 31 (a) & 32 (2)  
Date of Registration 21-10-2024  
Period of Validity till DECEMBER - 2033

  
21.10.24  
Registrar-cum-Secretary  
REGISTRAR-CUM SEC  
ODISHA PHARMACY COUNCIL  
BHUBANESWAR

This certificate is the property of Odisha State Pharmacy Council, Bhubaneswar and is issued to the above named Pharmacist.  
Every person receiving a certificate under this Act, shall keep the same conspicuously displayed in the place of business where he/she is working in his/her capacity as a registered pharmacist and shall notify to the Registrar-cum-Secretary of the Pharmacy Council any Change of place of business.



# ODISHA PHARMACY COUNCIL

BHUBANESWAR-751017

REGISTERED PHARMACIST



REGISTRATION No. 50817

Name : SUBHANKAR SAHU

S/o / D/o.: RAJ KISHORE SAHU

Add : At : SAHADEVKHUNTA

P.O. SAHADEVKHUNTA

Dist : BALASORE PIN - 756001

Date of Issue : 21-10-2024

Valid upto : DEC-2033

*[Handwritten Signature]*  
21.10.24

*[Handwritten Signature: Subhankar Sahu]*

Holder's Signature

REGISTRAR-CUM-SECRETARY  
ODISHA PHARMACY COUNCIL  
BHUBANESWAR