MINISTRY OF HEALTH

THE PHARMACY AND POISONS ACT
(Cap.244, Sub. Leg.)
(The Pharmacy and Poisons Rules)

ANNUAL PRACTICE LICENCE AS A PHARMACIST

Practitioner Details	Licence No: P2026D03052
Name	DR. JASMILLA ALHAJ MOHAMED
ID Number	TAE302492
Registration Number	5377
Renewal Date	13th June, 2026
Superintendent	YES
Premise	TERMARY HEALTHCARE
Premise Address	Postal Address: 7460-40100, KISUMU Plot No: KAWADHGONE/873

The above named person is hereby licensed to practise as a Pharmacist in accordance with the Pharmacy and Poisons Act.

Note:

1. This Licence is valid upto **31st December, 2026**, subject to compliance with the provisions of the Act.
2. For superintendents, no change of premises is permitted without authority of the Pharmacy and Poisons Board