

**NORTH CAROLINA BOARD OF PHARMACY**

*This is to Certify that Pharmacist License No 18388*

**Valid 11/3/10 thru 12/31/11**

**Erin Leigh Sweet  
1100 Clark Hill Drive  
Belmont NC 28012**

PLEASE NOTIFY BOARD OF NAME  
AND/OR ADDRESS CHANGE

REFER TO YOUR LICENSE NUMBER  
IN ANY COMMUNICATION

NC Law requires notification of address change within 30 days.

License No. **18388**

**NORTH  
BOARD OF**



**CAROLINA  
PHARMACY**

This is to  
Certify that:

**Erin Leigh Sweet**

IS DULY REGISTERED AND ENTITLED TO PRACTICE AS A

**PHARMACIST**

AS AUTHORIZED BY THE NORTH CAROLINA PHARMACY PRACTICE ACT

**FOR THE YEAR ENDING DECEMBER 31, 2011**

THIS CERTIFICATE IS REVOCABLE FOR THE CAUSES SPECIFIED IN THE LAW AND MUST BE  
CONSPICUOUSLY DISPLAYED IN THE PHARMACY WHERE HOLDER PRACTICES

*IN WITNESS WHEREOF, The President and Executive Director Hereunto Affix Their Signatures*

**11/3/10**

**Issued**

*Rebecca Wheeler Chater*

PRESIDENT

EXECUTIVE DIRECTOR