



**New Mexico Regulation and Licensing Department**

BOARDS AND COMMISSIONS DIVISION

**Board of Pharmacy**

5500 San Antonio Drive NE, Suite C ▪ Albuquerque, New Mexico 87109

(505) 222-9830 ▪ Fax (505) 222-9845 ▪ (800) 565-9102

<http://www.rld.state.nm.us/boards/pharmacy.aspx>

**IN THE MATTER OF THE COMPLAINT OF:**

*(Name, address, telephone numbers, email, contact information of Complainant(s))*

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**AGAINST:**

*(Name, address, telephone number, license number of licensee, additional information, if known.)*

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Comes now the complainant in the above entitled matter alleges: *(Write a detailed statement describing the facts related to the incompetent and/or unprofessional conduct complained of, and attach copies of records, reports, letters, etc., relative to the complaint.*

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Wherefore complainant acknowledges that the above statement is true and prays that an investigation be made as to the matter herein alleged, and if the facts warrant it, the appropriate action be initiated.

\_\_\_\_\_  
(Signature of Complainant(s))

State of New Mexico

County of \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Notary Public)

\_\_\_\_\_  
(My Commission Expires)

If you are not able to have this document notarized, please contact the Board Office and speak with an Inspector. Thank you!