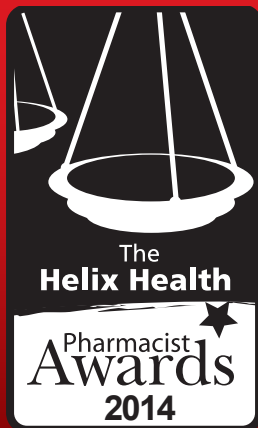


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Please complete the nomination form overleaf:  
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You may also place your completed form in an envelope  
clearly marked FREEPOST and send to the above address.

# The Teva Patient Nominated Award



## Your name and contact details

Your Name:

Your Address:

Telephone:

Mobile:

Email:

## Reason for nomination


## Details of pharmacist you wish to nominate

Pharmacist Name:

Pharmacy Name:

Pharmacy Address:

Telephone:



Winners will be announced on Saturday 29th November 2014, The Mansion House, Dublin 2.

For more information contact: Julie O'Halloran

T: + 353 1 463 3000

E: [julie.ohalloran@helixhealth.com](mailto:julie.ohalloran@helixhealth.com)