



Commonwealth of Pennsylvania
Department of Health
Office of Medical Marijuana
625 Forster St. Harrisburg, PA 17120

PERMIT

PERMIT #: [REDACTED]

TO OPERATE A MEDICAL MARIJUANA DISPENSARY FACILITY

This is to certify that

[REDACTED]

has been granted this permit to operate a medical marijuana facility located at [REDACTED].

This permit shall be effective from [REDACTED] in accordance with law.

A handwritten signature in blue ink that reads "Pete Blank".

Pete Blank
Executive Deputy Secretary
Pennsylvania Department of Health

