

REGISTRATION / CERTIFICATION

USE FORM BELOW FOR NAME AND/OR ADDRESS CHANGES.
 DRUG CONTROL MUST BE NOTIFIED OF THESE CHANGES IMMEDIATELY

DEPARTMENT OF HEALTH AND MENTAL
 HYGIENE
 DIVISION OF DRUG CONTROL

DEPARTMENT OF HEALTH AND MENTAL HYGIENE
 DIVISION OF DRUG CONTROL
 4201 PATTERSON AVE. BALTIMORE, MD 21215
 Telephone number: 410-764-2890

KATHERINE HLADKY MD

KATHERINE HLADKY MD
 325 TAPLOW ROAD
 BALTIMORE MD 21212

CDS REG. NO.	EXPIRATION DATE
M69239	07/31/2017

Audrey P. Clark
 Chief, Division of Drug Control

Van T. Mitchell
 Secretary of Health and Mental Hygiene



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 DIVISION OF DRUG CONTROL
 4201 PATTERSON AVE. BALTIMORE, MD 21215
 Telephone number: 410-764-2890

This registration is granted pursuant to title 5 of the Criminal Law Article of the Annotated Code of Maryland, as amended from time to time and is subject to all applicable statutes, rules and regulations regarding Controlled Dangerous Substances.

KATHERINE HLADKY MD
 330 NORTH HOWARD STREET
 BALTIMORE MD 21201

CDS REG. NO.	EXPIRATION DATE
M69239	07/31/2017

Van T. Mitchell
 Secretary of Health and Mental Hygiene

Audrey P. Clark
 Chief, Division of Drug Control

(Non Transferable)

POST IN A CONSPICUOUS PLACE

ADDRESS AND/OR NAME CHANGE
 FEE \$50-PAYBLE TO DHMH-DRUG CONTROL

ADDRESS AND/OR NAME CHANGE, PLEASE PRINT

- Check box: Business Address Change
- Name Change Request:
 Attach Court Documents
- Mailing Address Change - No Fee
 (other than the address on the CDS permit)

Please complete information at right,
 Detach and return to Drug Control.
 Please print.

CDS Reg. Cert. No.

Last Name and Generational Indicator (JR., III, etc.)

First Name and Middle Name/Initial

Street Address

City State Abbreviated

Zip Code Telephone Number