



Nº 006876

FORM III

REPUBLIC OF KENYA

REGISTRATION A No.....

**THE MEDICAL PRACTITIONERS AND DENTISTS BOARD**

(THE MEDICAL PRACTITIONERS AND DENTISTS ACT, CAP. 253)

**CERTIFICATE OF REGISTRATION AS A MEDICAL PRACTITIONER**

Dr./Mr./Mrs./Miss Mary Nigandi Kubo  
(Full Names—BLOCK LETTERS)

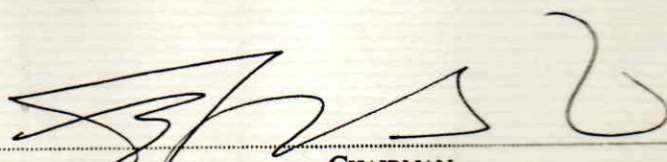
of P.O. Box 60337, Nairobi

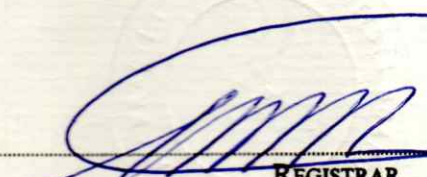
Qualifications M.B; Ch.B (Nairobi) 2008;

has been registered as a Medical Practitioner in accordance with the provisions of section 6 of the Medical Practitioners and Dentists Act, 2007.

Dated this 7<sup>th</sup> day of May, 2010

Seal of the Board.

  
CHAIRMAN  
MEDICAL PRACTITIONERS AND DENTISTS BOARD

  
REGISTRAR  
MEDICAL PRACTITIONERS AND DENTISTS BOARD

FOOTNOTES:

- It shall be the duty of the holder of this certificate to inform the Registrar within 14 days of any change in his registered address (s. 9).
- Reference should be made to the current published list in the Kenya Gazette for evidence of continued registration of the practitioner (s.10).
- Signature of the holder M. Kubo