

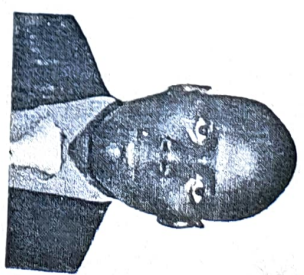


THE REPUBLIC OF UGANDA
THE MEDICAL AND DENTAL PRACTITIONERS STATUTE, 1996

Serial No. ... 5163

Receipt No. 20733

Full Registration Certificate



I hereby certify that the following is a true copy entry in the Main Register of Medical and Dental Practitioners maintained under section 20 (1), (a) of the Medical and Dental Practitioners Statute, 1996

REGISTRATION NUMBER	FULL NAME	ADDRESS	REGISTERED QUALIFICATION WITH DATE OBTAINED AND INSTITUTION	DATE OF REGISTRATION	ADDITIONAL QUALIFICATIONS WITH DATE OF OBTAINING
I-3832	OMONA Alfonse Degozone	P.O.BOX 14130 KAMPALA	M.B.Ch.B. (MUK) 2010	09/09/2011	

Date of Issue 09 SEPTEMBER 2011

[Signature]
DR. KATUMBA SSENTONDO
Registrar

[Signature]
PROF. MED. KAWUMA
Chairperson

OFFICE OF THE REGISTRAR, UGANDA MEDICAL AND DENTAL PRACTITIONERS COUNCIL
P.O BOX 16115, KAMPALA, UGANDA TEL/FAX: 256-414-345844, EMAIL:

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