

**PHARMACY BOARD OF SIERRA LEONE**  
**APPLICATION FOR FOOD PRODUCT ADVERTISEMENT**

1. Generic name of product.....

2. Brand name of product (if any).....

3. Name and address of manufacturer:

.....  
.....

4. Name and address of local agent;

.....  
.....

5.

(i) Name and Address of Advertising Company:

.....  
.....

(ii) Proposed media for advertisement:

.....

5. Product Registration Number:.....

6. (i) Has the product been previously advertised?

Yes:                      No: (Tick Yes/No)

(ii) If yes, please attach a copy of the old script, audio or video recording, where applicable.

**NB:** Please attach:

(i) An application letter addressed to the Registrar of the Board

(ii) A copy of the new script, audio or video recording

(iii) A photocopy of a valid certificate of registration/ letter of approval

(iv) Additional documentation substantiating any claims made

