

**IOWA BOARD OF PHARMACY**

400 S.W. EIGHTH STREET, SUITE E

DES MOINES, IA 50309-4688

515/281-5944 FAX 515/281-4609

<https://pharmacy.iowa.gov>

**2019**

**Limited Distributor License No. 40417**

**Returns Processor**

ISSUED 04/21/2019

EXPIRES 12/31/2019

LICENSE STATUS: Current/Active

**MAILING ADDRESS**

Guaranteed Returns  
100 Colin Drive  
Holbrook, NY 11741

**LICENSED LOCATION**

Guaranteed Returns  
100 Colin Dr  
Holbrook, NY 11741

Facility Manager: Paul Robert Nick

**IOWA BOARD OF PHARMACY**

400 S.W. EIGHTH STREET, SUITE E

DES MOINES, IA 50309-4688

515/281-5944 FAX 515/281-4609

<https://pharmacy.iowa.gov>

**CSA**

**2020**

**CERTIFICATE OF REGISTRATION**  
**IOWA CONTROLLED SUBSTANCES ACT**

REGISTRATION NUMBER **2210445**

REGISTRATION ISSUED **12/28/2018**

DRUG SCHEDULES REGISTERED **22N33N45**

REGISTRATION EXPIRES **09/30/2020**

**NAME, MAILING ADDRESS**

Guaranteed Returns  
100 Colin Dr  
Holbrook NY 11741

**NAME, REGISTERED LOCATION**

Guaranteed Returns  
100 Colin Dr  
Holbrook NY 11741

Paul Robert Nick , Responsible Individual

COUNTY wa

DEA REGISTRATION NO. RD0188311