

# 2019 FEE SCHEDULE

## Resident & Nonresident Pharmacy Benefit Manager

Make check or money order payable to: DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS			
If your <u>complete</u> application is received in ...	your fee is ...	and your license will expire on ...	
January 2019	\$140.00	3/31/2019	
February 2019	\$140.00	3/31/2019	
March 2019	\$140.00	3/31/2019	
April 2019	\$140.00	3/31/2020	
May 2019	\$140.00	3/31/2020	
June 2019	\$140.00	3/31/2020	
July 2019	\$140.00	3/31/2020	
August 2019	\$140.00	3/31/2020	
September 2019	\$140.00	3/31/2020	
October 2019	\$140.00	3/31/2020	
November 2019	\$140.00	3/31/2020	
December 2019	\$140.00	3/31/2020	

A dishonored check returned by the bank will be assessed a service charge of \$25.00 per check.  
A DISHONORED CHECK WILL VOID ALL TRANSACTIONS.