

Drug Return Form - Medicare A Skilled Returns Only

3 Business Parkway, Suite 2

Brunswick, ME 04011

Phone: 207-373-9077

FAX: 207-373-9088



Facility: _____ Staff Member: _____

Date: _____

<<Note: All credits are final and issued at the discretion of Guardian Pharmacy Maine.>>

PLEASE FAX THIS FORM TO 207-373-9088 FOR CREDIT

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