



Roberto Beltran  
7229 Abbeyville Dr  
Las Vegas, NV 89119  
(702) 883-6824  
[r\\_beltran\\_jr@yahoo.com](mailto:r_beltran_jr@yahoo.com)

September 27, 2011

Nevada State Board of Pharmacy  
431 W. Plumb Lane  
Reno, NV 89509

To Whom it May Concern:

Due to my termination from school, I am requesting for my pharmacy technician-in-training license to be reinstated. I understand the Board of Pharmacy will be meeting in October in the Las Vegas area. At which time, I would like to appeal to the board for the reinstatement of my license.

Should you need any further information, please contact me at the address or phone number listed above. Thank you for your time, for I understand it is valuable.

Sincerely,

Roberto Beltran



3333 E. Flamingo Rd. • Las Vegas, NV 89121

**RICHARD L. LUEBKE, SR**  
Founder 1972-2008

**MARK P. LUEBKE**  
President

**RICHARD L. LUEBKE, JR**  
Chief Executive Officer

**JO ANN LUEBKE**  
Secretary/Treasurer

CAMPUS LOCATIONS

ALBUQUERQUE CAMPUS  
2201 San Pedro NE B-3 #100  
Albuquerque, NM 87110  
Holly Woelber  
Campus Director

CHULA VISTA CAMPUS  
780 Bay Blvd. #101  
Chula Vista, CA 91910  
James Volpe  
Campus Director

COLORADO SPRINGS CAMPUS  
3770 Citadel Dr., North  
Colorado Springs, CO 80909  
Karen McGrath  
Campus Director

DENVER CAMPUS  
7475 Dakin St., Ste. 100  
Denver, CO 80221  
Susan Anderson  
Campus Director

EAST VALLEY CAMPUS  
2160 S. Power Rd.  
Mesa, AZ 85209  
Steve Buckley  
Campus Director

LAS VEGAS CAMPUS  
3333 E. Flamingo Rd.  
Las Vegas, NV 89121  
Sam Gentile  
Campus Director

MESA CAMPUS  
957 S. Dobson Rd.  
Mesa, AZ 85202  
Kristen Torres  
Campus Director

RENTON CAMPUS  
555 S. Renton Village Pl. #110  
Renton, WA 98050  
Robert Panerio  
Campus Director

SEATTLE CAMPUS  
9709 Third Ave., N.E., Ste. 400  
Seattle, WA 98115  
Carey Hochman  
Campus Director

TUCSON CAMPUS  
3550 E. Grant Rd., Ste. 200  
Tucson, AZ 85716  
Dale Berg  
Campus Director

April 25, 2011

Ms. Jeri Walter  
Nevada State Board of Pharmacy  
431 W Plumb Lane  
Reno, NV 89509

Dear Ms. Walter,

As per our conversation last week, please find herewith the Pharmacy Technician in Training License for Roberto Rafael Beltran. He is in violation of our Student Conduct Policy and therefore will be terminated from the program.

Should you need any further information, please contact me at (702) 458-9650 ext. 213.

Thank you for your time, for I understand it is valuable.

Sincerely,

A handwritten signature in cursive script that reads "Julianne May".

Julianne May  
Career Services Coordinator

APR 28 2011

**(July 24, 2011)**

Nevada State Board of Pharmacy  
431 West Plumb Lane  
Reno, NV 89509-3766

Dear To Whom it may Concern:

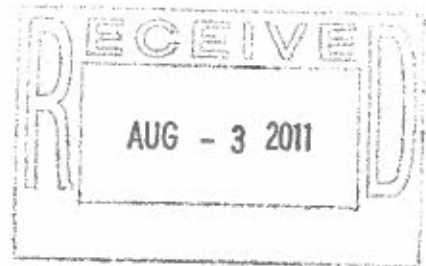
Due to circumstances beyond my control, I missed my hearing date of May 13, 2011 and I would like to take this opportunity to sincerely apologize for the inconvenience to the Board. The circumstances causing this mix-up are that I had recently moved from 2429 Windy Hills Ave. to my current address of 9247 Horseshoe Basin. I left a mail-forwarding request with the post office but unfortunately your forwarded letter was not delivered to my new address until the DAY AFTER the hearing date. I would certainly have attended the hearing had I received your notification in time.

I would like to request a new hearing date at your convenience.

Thank you for your consideration of my request.

Sincerely,

Alexander Frankos  
9247 Horseshoe Basin.  
Las Vegas, NV 89149



Board Action:\*

Motion: Kam Gandhi moved to approve the application for reciprocity for Ms. Ladas.

Second: Keith Macdonald

Action: Passed Unanimously

12. Requests for Pharmaceutical Technician in Training License – Appearance:

A. Brian Fello

Brian Fello appeared and was sworn by President Foster prior to answering questions or offering testimony.

Mr. Fello explained that he was using methamphetamine and expelled from Kaplan College where he was participating in the pharmaceutical technician program.

The Board advised Mr. Fello that they could not grant a pharmaceutical technician in training registration unless he was enrolled in a school or has a job where a managing pharmacist was willing to be responsible for his training. The Board suggested that he speak with the program director at Kaplan again and check into the PRN-PRN program for an evaluation.



B. Alexander G. Frankos



Alexander Frankos appeared and was sworn by President Foster prior to answering questions or offering testimony.

Mr. Frankos explained that he was a student at Anthem participating in their pharmaceutical technician program. He stated that there were three separate incidents with North Las Vegas Police Department that involved his possession and use of marijuana.

Board Action:

Motion: Kirk Wentworth moved to deny Mr. Frankos application for pharmaceutical technician in training.

Second: Cheryl Blomstrom

Action: Passed Unanimously

**NEVADA STATE BOARD OF PHARMACY**  
 431 W. Plumb Lane - Reno, NV 89509 - (775) 850-1440  
**PHARMACEUTICAL TECHNICIAN IN TRAINING APPLICATION**  
 Registration Fee: \$40.00 - (non-refundable)

**New Application**     **Change of Pharmacy**     **Additional Pharmacy (Please check one)**

Complete Name (no abbreviations):  
 First: Alexander    Middle: George    Last: Frankos

Home Address: 2429 Windy Hills Ave.    Apt #: \_\_\_\_\_  
 City: N. Las Vegas    State: NV    Zip Code: 89131

Telephone: \_\_\_\_\_    Social Security Number: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_    Place of Birth: Las Vegas, NV    Sex:  M or F

E-mail Address: \_\_\_\_\_

**I am requesting registration at the following pharmacy or approved training program:**

Pharmacy: Anthem Institute    Store #: \_\_\_\_\_  
 Address: 2320 S. Rancho Drive  
 City: Las Vegas    State: NV    Zip Code: 89102  
 Signature of Managing Pharmacist: [Signature]    Lic #: 204128    Date: 9/16/10

(Without the signature of the managing pharmacist, the application will be returned.)

- 1) Are you 18 years of age or older?    Yes  No
  - 2) Are you a high school graduate or the equivalent?    Yes  No
- (IF YOU ANSWERED "NO" TO QUESTION 1 AND/OR 2, YOU CAN NOT SUBMIT THIS APPLICATION)**
- 3) I have \_\_\_\_\_ I have not  been diagnosed or treated in the last five years for a mental illness or a physical condition that would impair my ability to perform any of the essential functions of my license, including alcohol or substance abuse.
  - 4) I have  I have not \_\_\_\_\_ been charged, arrested or convicted of a misdemeanor  or felony
  - 5) I have \_\_\_\_\_ I have not  been the subject of an administrative action whether completed or pending.
  - 6) I have \_\_\_\_\_ I have not  had a professional license suspended, revoked, surrendered or otherwise disciplined, including any action against my license that was not made public.

If you checked "I have" to questions 3 thru 6, please include the following information and provide documentation and/or an explanation.

a) Board Administrative Action and/or    State: \_\_\_\_\_ Date: \_\_\_\_\_ Case #: \_\_\_\_\_  
 b) Criminal Action    State: Nevada Date: 12-22-2008 Case #: CR013752-08  
     County: Clark    Court: case was closed

In response to federally mandated requirements, the Nevada Legislature and Attorney General require that we include the following questions as part of all applications.

I am \_\_\_\_\_ I am not  subject to a court order for the support of a child.

**IF YOU ARE SUBJECT** to a court order for the support of a child, please mark the appropriate response.

I am \_\_\_\_\_ I am not \_\_\_\_\_ in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order for the support of one or more children.

I hereby certify that the information furnished on this document is true and correct. I agree to abide by all the statutes, rules and regulations governing pharmaceutical technicians in training and understand that a violation of any such statutes, rules and regulations may be grounds for suspension or revocation of this permit.

Signature: [Signature]    Date: 9-9-2010

Board Use Only  
 Received: OCT 05 2010    Check Number: 100    Amount: 40.00

Case number: CR0022154-07

I was pulled over on 3-23-2007 by North Las Vegas Police for a minor traffic violation. In my vehicle I was in possession of marijuana less than an oz. The case was closed.

Case number: CR010142-07

I was pulled over for a minor traffic violation. I was taken to North Las Vegas Police Department where I was asked to give a blood sample. After the results of the blood test came back it was determined that I was driving under the influence of marijuana. The case was closed.



**General Inquiry**

New Search

- Summary
- Parties
- Events
- Dockets
- Fields
- Notes
- Disposition
- Costs

**CRIMINAL NLV - Summary**

CR013752-08 CITY OF NORTH LAS VEGAS CITY OF NORTH LAS VEGAS VS. FRANKOS, ALEXANDER GEORGE

(s)

DEFENDANT(s)

FRANKOS, ALEXANDER GEORGE

Attorney(s)

Attorney(s)

Full Name  
Address

Full Name  
Address

City/State/Zip  
Phone

City/State/Zip  
Phone

CONT-SUB-MARJ

POSSESSION OF CONTROLLED SUBSTANCE -  
LESS 1 OZ MARIJUANA

**Additional Fields**

- ACCIDENT
- AGENT
- AGENT DIVISION
- BASE IDENTIFICATION NUMBER
- COMMERCIAL VEHICLE
- CONSTRUCTION ZONE
- COLLECTIONS WARRANT WALL
- INJURY
- JED WARRANT LETTER TRACKING
- MASTER FILE
- POLICE DEPARTMENT INCIDENT NUMBER 08032955
- SCHOOL ZONE
- SCOPE
- SCOPE SID#
- TR HISTORY NUMBER

10-22-2008

**Case Attributes**

Number CR013752-08  
 Status CLOSED  
 Filed 10-27-2008

**IN THE MUNICIPAL COURT OF THE CITY OF  
NORTH LAS VEGAS**

**COUNTY OF CLARK - STATE OF NEVADA**

**JUDGMENT OF SENTENCE**

**DEFENDANT:** ALEXANDER GEORGE FRANKOS **COURT:** CR010264-06

**SSNO:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_


**DATE OF ARREST/VIOLATION :** 12/04/2006

**VIOLATION OF ORDINANCE (S):**

DRIVING ON A CANCELLED, REVOKED, OR SUSPENDED D/L
POSSESSION OF NARCOTICS PARAPHERNALIA
POSSESSION OF CONTROLLED SUBSTANCE - LESS 1 OZ MARIJUANA
REGISTRATION CERTIFICATE TO BE CARRIED IN VEHICLE
FAIL TO SIGNAL LANE CHANGE ON MARKED HIGHWAY
SPEEDING 11- 20 MPH OVER LIMIT

**DATE OF DISPOSITION** 01/11/2007 **IN OPEN COURT**

<b>FINAL CHARGE (S)</b>	<b>CONVICTION</b>	<b>DISPOSITION OF SENT.</b>
DRIVING WITHOUT VALID LICENSE	PLEA NOLO FOUND GUILTY	FINE 250
POSSESSION OF NARCOTICS PARAPHERNALIA	PLEA GUILTY	FINE 1000
POSSESSION OF CONTROLLED SUBSTANCE - LESS 1 OZ MARIJUANA	DISMISSED	DISMISSED
PARKING VIOLATION	PLEA GUILTY	SS
PARKING VIOLATION	PLEA GUILTY	SS
PARKING VIOLATION	PLEA GUILTY	SS
		CASE CLOSED 1/11/2007

  
\_\_\_\_\_  
**COURT CLERK**

CERTIFIED COPY  
The document to which this certificate is  
attached is a full, true and correct copy  
of the original on file and of record in  
my office.  
DATE 1/26/11  
Municipal Court Administrator of the  
City of North Las Vegas, State of Nevada

  
\_\_\_\_\_  
**MUNICIPAL JUDGE**

**IN THE MUNICIPAL COURT OF THE CITY OF  
NORTH LAS VEGAS  
COUNTY OF CLARK - STATE OF NEVADA**

**JUDGMENT OF SENTENCE**

**DEFENDANT:** ALEXANDER GEORGE FRANKOS **COURT:** CR013752-08

**SSNO:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**DATE OF ARREST/VIOLATION :** 12/22/2008

**VIOLATION OF ORDINANCE (S):** POSSESSION OF CONTROLLED SUBSTANCE - LESS 1 OZ MARIJUANA  
DRIVING WITHOUT HEADLIGHTS  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**DATE OF DISPOSITION** 02/03/2009 **IN OPEN COURT**

<b>FINAL CHARGE (S)</b>	<b>CONVICTION</b>	<b>DISPOSITION OF SENT.</b>
POSSESSION OF CONTROLLED SUBSTANCE - LESS 1 OZ MARIJUANA	PLED GUILTY	FINE 600
DRIVING WITHOUT HEADLIGHTS	PLED GUILTY	SS 2 DYS
		CASE CLOSED 2/3/2009

  
 \_\_\_\_\_  
**COURT CLERK**


  
 \_\_\_\_\_  
**MUNICIPAL JUDGE**

CERTIFIED COPY

The document to which this certificate is attached is a full, true and correct copy of the original on file and of record in my office.

DATE 1/26/11

Municipal Court Administrator of the City of North Las Vegas, State of Nevada.

BY 

**IN THE MUNICIPAL COURT OF THE CITY OF  
NORTH LAS VEGAS  
COUNTY OF CLARK - STATE OF NEVADA**

**JUDGMENT OF SENTENCE**

**DEFENDANT:** ALEXANDER GEORGE FRANKOS **COURT:** CR010142-07


**SSNO:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**DATE OF ARREST/VIOLATION :** 12/04/2006

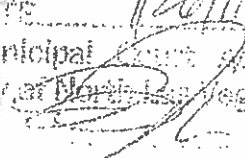
**VIOLATION OF ORDINANCE (S):** DUI-ALCOHOL/ DRUGS  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

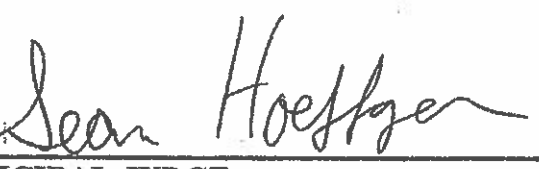
**DATE OF DISPOSITION** 05/27/2008 **IN OPEN COURT**

<b>FINAL CHARGE (S)</b>	<b>CONVICTION</b>	<b>DISPOSITION OF SENT.</b>
RECKLESS DRIVING	PLEA NOLO FOUND GUILTY	FINE 400 VIP DRG/ALC SCH SUS 180 DYS SOOT WCO DRG/ALC EVAL RANDOM DRG TEST - 12 WKS, ABSTAIN FROM ALCOHOL COUNS LEVEL 1 ORDERED: 1 XWK/ 12 WKS
		CASE CLOSED 12/17/2008

  
\_\_\_\_\_  
**COURT CLERK**

**CERTIFIED COPY**  
The document to which this certificate  
attached is a full, true and correct  
of the original on file and of record  
my office.

**MUNICIPAL JUDGE**  
DATE 12/20/11  
Municipal Court Administrator of  
City of North Las Vegas, State of Nevada  




Blank

**NEVADA STATE BOARD OF PHARMACY**  
431 W Plumb Lane ~ Reno, NV 89521 ~ (775) 850-1440

**PHARMACEUTICAL TECHNICIAN IN TRAINING APPLICATION**

**Registration Fee: \$40.00 - (non-refundable money order or cashier's check only, no cash)**

Complete Name (no abbreviations):

First: VINCENT Middle: ANTIPOLO Last: MCCLURE

Home Address: 4350 CHESSMAN WAY Apt #: N/A

City: LAS VEGAS State: NV Zip Code: 89147

Tele: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date: \_\_\_\_\_ Place of Birth: ZAMBALES, PHILIPPINES Sex:  M or  F

E-mail Address: \_\_\_\_\_

**I am requesting registration at the following pharmacy:**

Pharmacy: WELL CARE PHARMACY Store #: \_\_\_\_\_

Address: 542 S. DECATUR BLVD.

City: LAS VEGAS State: NV Zip Code: 89107

Signature of Managing Pharmacist: [Signature] Lic #: 16742 Date: 9/7/11

(Without the signature of the managing pharmacist, the application will be returned.)

1. Are you 18 years of age or older? Yes  No   
 2. Are you a high school graduate or the equivalent? Yes  No   
**(IF YOU ANSWERED "NO" TO QUESTION 1 AND/OR 2, YOU CAN NOT SUBMIT THIS APPLICATION)**

	Yes	No
3. Been charged, arrested or convicted of a felony or misdemeanor in <u>any</u> state?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Been the subject of an administrative action whether completed or pending in <u>any</u> state?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Had your license subjected to any discipline for violation of pharmacy or drug laws in <u>any</u> state?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>

\*If you marked YES to any of the numbered questions (3-5) above, include the following information & provide documentation:

Board Administrative Action:	State	Case #:
Criminal Action:	State	Court
	<u>NV</u>	<u>CARSON CITY JUSTICE AND MUNICIPAL COURT</u>
	<u>09/08/2008</u>	<u>MISDEMEANOR</u>
		<u>EXPIRATED</u>

In response to federally mandated requirements, the Nevada Legislature and Attorney General require that we include the following questions as part of all applications.

- Are you the subject of a court order for the support of a child?..... Yes  No   
**IF you marked YES to the question, above are you in compliance with the court order?.....** Yes  No

I hereby certify that the information furnished on this document is true and correct. I agree to abide by all the statutes, rules and regulations governing pharmaceutical technicians and understand that a violation of any such statutes, rules and regulations may be grounds for suspension or revocation of this permit.

\* \_\_\_\_\_  
Original Signature, no copies or stamps accepted Date

<b>Board Use Only</b> Received: <u>SEP 22 2011</u> Amount: <u>40</u> Entity # <u>58145</u>
--

\* Has been mailed to sign or he can sign his application at the meeting.

**JUDGMENT AND ORDER OF THE COURT  
CARSON CITY JUSTICE AND MUNICIPAL COURT**

**DEFENDANT: MCCLURE, VINCENT A**

COURT CASE #: 08 CR 01804 1C

ORIGINATING CASE #:

LANGUAGE SPOKEN: ENGLISH STATUS: OPEN

PROSECUTING ATTORNEY: CARSON CITY DISTRICT ATTORNEY DEFENSE ATTORNEY: NATHAN YOUNG

CHARGE AND SENTENCE INFORMATION	
CHARGES: 200.508.2B1 - CHILD NEGLECT OR ENDANGERMENT, FIRST OFFENSE	
AMENDED TO: 200.508.2B1 ATTEMPT CHILD NEGLECT OR ENDANGERMENT, 1ST OFFENSE	
PLEA: 11/14/2008 - GUILTY	
DISPOSITION: 11/14/2008 - GUILTY	JAIL: 3 DAYS, - 3 DAYS CREDIT, = 0 DAYS TO SERVE, 177 ADDITIONAL DAYS SUSPENDED FOR 1 YEAR
CHARGES: 454.316.1 - POSSESS DANGEROUS DRUG WITHOUT LEGAL PRESCRIPTION, FIRST OR SECOND OFFENSE	
AMENDED TO: 8.04.125 CS POSSESS DRUG NOT TO BE INTRODUCED INTO INTERSTATE COMMERCE	
PLEA: 11/14/2008 - GUILTY	
DISPOSITION: 11/14/2008 - GUILTY	JAIL: 3 DAYS, - 3 DAYS CREDIT, = 0 DAYS TO SERVE, 177 ADDITIONAL DAYS SUSPENDED FOR 1 YEAR TO RUN CONSECUTIVE TO COUNT I

FINES AND FEES				
	ORIGINAL AMT	AMT PAID	AMT DISMISSED	AMT DUE
ADDITIONAL FEES				
<b>TOTAL OWING AS OF THIS DATE: NO FINES OR FEES ARE DUE ON THIS CASE.</b>				

CONDITIONS INFORMATION			
REQUIREMENTS	DUE DATE	CONDITION(S)	COMPLETED
1 EVALUATION	12/01/2008	SUBSTANCE ABUSE EVALUATION; RECEIVE THE EVALUATION, ENSURE THAT THE COURT RECEIVES IT BY THE DUE DATE ORDERED AND FOLLOW ALL OF THE EVALUATOR'S RECOMMENDATIONS.	
		NO DRUGS OR DRUG PARAPHERNALIA, MEDS RX ONLY	
		SEARCH & SEIZURE; DRUGS/Rx, PARA	
	11/14/2009	SUSPENDED SENTENCE: INFORMAL PROBATION	
1 COURSES	04/01/2009	PARENTING CLASS	
		ENROLL BY 12/01/08	
		OBEY ALL LAWS	


	12/31/2008	MISCELLANEOUS CONDITION
		MUST ATTEND PRIVATE CONSULTATION WITH PUBLIC HEALTH NURSE
		MISCELLANEOUS CONDITION
		NO UNSUPERVISED CONTACT WITH MINOR VICTIM NAASDASKIA BARNS

ARREST/BAIL/BOND INFORMATION				
ARREST DATE	STATUS DATE	CURRENT STATUS	AMOUNT	TYPE OF BAIL
09/08/2008	11/14/2008	EXONERATED	15,000.00	CASH ONLY

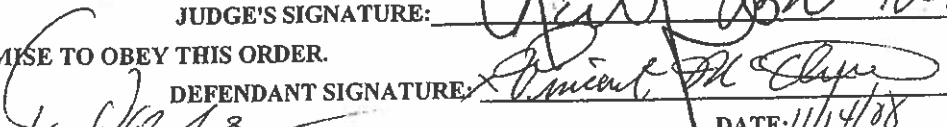
**NEXT COURT HEARING INFORMATION**  
NO FUTURE COURT DATE SCHEDULED AT THIS TIME

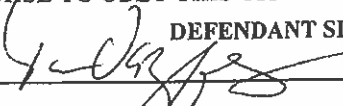
**ADDITIONAL CASE INFORMATION**  
NO FURTHER INFORMATION

JUDGMENT OF CONVICTION AND ORDER OF THE COURT CONFIRMATION: ROBEY WILLIS, 11/14/2008

JUDGE'S SIGNATURE:  DATE: 11/14/08

I UNDERSTAND AND PROMISE TO OBEY THIS ORDER.

DEFENDANT SIGNATURE:  DATE: 11-14-08

ISSUED BY MARSHAL:  DATE: 11/14/08 TIME: 1156

RECEIVED BY DEPUTY: \_\_\_\_\_ DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

**JUDGMENT AND ORDER OF THE COURT**  
**CARSON CITY JUSTICE AND MUNICIPAL COURT**

**DEFENDANT: MCCLURE, VINCENT ANTONIO**

COURT CASE #: 08 CR 01805 1C      ORIGINATING CASE #: 08-6739      LANGUAGE SPOKEN: ENGLISH STATUS: CLOSED

PROSECUTING ATTORNEY: CARSON CITY DISTRICT ATTORNEY      DEFENSE ATTORNEY: NATHAN YOUNG

CHARGE AND SENTENCE INFORMATION	
CHARGES: 454.316.1 - POSSESS DANGEROUS DRUG WITHOUT LEGAL PRESCRIPTION, FIRST OR SECOND OFFENSE	
PLEA: NO PLEA	JAIL:
DISPOSITION: 11/14/2008 - DISMISSED	

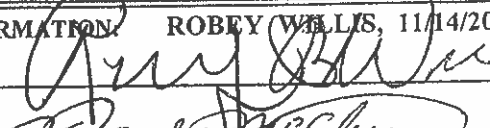
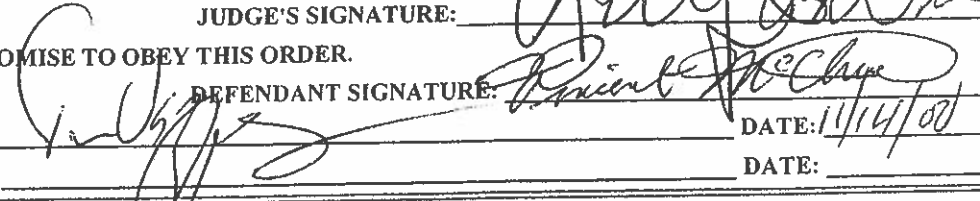

	FINES AND FEES			
	ORIGINAL AMT	AMT PAID	AMT DISMISSED	AMT DUE
ADDITIONAL FEES	15,000.00	15,000.00	0.00	0.00
	15,000.00	15,000.00	0.00	0.00
<b>TOTAL OWING AS OF THIS DATE: 0.00</b>				

CONDITIONS INFORMATION			
REQUIREMENTS	DUE DATE	CONDITION(S)	COMPLETED
		NO CONDITIONS ARE CURRENTLY ORDERED ON THIS CASE.	

ARREST/BAIL/BOND INFORMATION				
ARREST DATE	STATUS DATE	CURRENT STATUS	AMOUNT	TYPE OF BAIL
09/08/2008	11/14/2008	EXONERATED	15,000.00	CASH ONLY

**NEXT COURT HEARING INFORMATION**  
 NO FUTURE COURT DATE SCHEDULED AT THIS TIME

**ADDITIONAL CASE INFORMATION**  
 NO FURTHER INFORMATION

JUDGMENT OF CONVICTION AND ORDER OF THE COURT CONFIRMATION		ROBEY WILLIS, 11/14/2008
JUDGE'S SIGNATURE: 	DATE: 11/14/08	
I UNDERSTAND AND PROMISE TO OBEY THIS ORDER.		
DEFENDANT SIGNATURE: 	DATE: 11/14/08	
ISSUED BY MARSHAL: 	DATE: 11/14/08	TIME: 1155
RECEIVED BY DEPUTY: _____	DATE: _____	TIME: _____

## Letter Of Explanation

I, Israel Ochoa-Tirado, Certificate Of Registration PT-12782, do hereby acknowledge I was recently suspended from Pima Medical Institute #3333 E. Flamingo Rd. Las Vegas, NV for testing positive on the drug screen for the usage of marijuana.

I would like to state my explanation for this situation.

At a birthday reunion, where I was celebrating with others, there was a bowl with homemade snacks made with marijuana. Unaware of the presence of the content in the snack I ate one of them a few of days before my completion of the Pharmaceutical Technician Program. It was later that day when I was told the ingredients of the snacks. I realized the immense error I made. A few days later, The following week, the final meeting of my school program was held and I took the drug screen test which gave a positive result for THC.

I would like to note I am completely aware of the accidental utilization of a C-I substance. My mistake taught me a true lesson for the rest of my life. I have meditated the situation in a personal and professional manner. I take full responsibility for my actions and any disciplinary procedure that may be forthcoming. It is my request to be considered to be included in the next B.O.P meeting agenda so I may again plead my case and be considered for reinstatement of my license.

Thank you in advance for you time, for I understand it is valuable.

Sincerely,

  
Israel Ochoa-Tirado

SEP 15 2011

## Jeri Walter

---

**From:** Julianne May [jmay@pmi.edu]  
**Sent:** Friday, July 15, 2011 12:37 PM  
**To:** Jeri Walter  
**Subject:** Student from Pima  
**Attachments:** PIMA- Pharm Tech Israel Tirado 7-15-2011.pdf

Good Afternoon, Ms. Walter,

I am submitting drug screen results for Israel Ochoa-Tirado PT#12782. Unfortunately, even with a low number, we still have to terminate him from the program.

Please advise if there is anything else you will need from me. Thank you for your assistance in this matter.

**Julianne May** | Career Services Coordinator  
*Pima Medical Institute*  
T: 702.458.9650 | F: 702.898.6864  
[www.pmi.edu](http://www.pmi.edu) | [jmay@pmi.edu](mailto:jmay@pmi.edu)

~~09/14/2011~~

Nevada State Board of Pharmacy

To whom it may concern

I Trina Dela Trinidad was scheduled to appear before The State Board of Pharmacy on wed July 13, 2011 at 2:00pm at The Las Vegas chamber of commerce.

I apologize for my absence, I got lost and couldn't find the address. when I finally found the chamber of commerce the meeting was over. If you could please take it into consideration to give me another chance to appear before you.

Getting my pharmacy Technician Licence in Nevada means a very great deal to me. Once again I do apologize and Thankyou for your time.

Sincerely

Trina Dela Trinidad  
 Trina Dela Trinidad

9-11-11

NEVADA STATE BOARD OF PHARMACY  
 431 W Plumb Lane ~ Reno, NV 89509 ~ 775/850-1440  
**PHARMACEUTICAL TECHNICIAN APPLICATION**  
 Registration Fee: \$40.00 - (non-refundable)

Complete Name (no abbreviations):

First: Trina Middle: DeLa Last: Trinidad

Home Address: 905 E. Twain Ave Apt #: B-12

City: Las Vegas State: NV Zip Code: 89169

Telephone: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: Paramount CA. Sex: M or  F

E-mail Address: N/A

To qualify as a pharmaceutical technician you will need to meet one of the following criteria. Please check the appropriate one and include documentation.

- I have completed a pharmaceutical technician program or school approved by the board. (Include copy of certification of completion.)
- I am currently registered as a pharmaceutical technician in another state. (Include copy of registration or verification letter from the state in which you are registered.)

1) Are you 18 years of age or older?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2) Are you a high school graduate or the equivalent?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<b>(IF YOU ANSWERED "NO" TO QUESTION 1 AND/OR 2, YOU CAN NOT SUBMIT THIS APPLICATION)</b>	
3) I have ___ I have not <input checked="" type="checkbox"/> been diagnosed or treated in the last five years for a mental illness or a physical condition that would impair my ability to perform any of the essential functions of my license, including alcohol or substance abuse.	
4) I have ___ I have not <input checked="" type="checkbox"/> been charged, arrested or convicted of a misdemeanor <input type="checkbox"/> or felony <input type="checkbox"/>	
5) I have ___ I have not <input checked="" type="checkbox"/> been the subject of an administrative action whether completed or pending.	
6) I have ___ I have not <input checked="" type="checkbox"/> had a professional license suspended, revoked, surrendered or otherwise disciplined, including any action against my license that was not made public.	
If you checked "I have" to questions 3 thru 6, please include the following information and provide documentation and/or an explanation:	
a) Board Administrative Action and/or	State: _____ Date: _____ Case #: _____
b) Criminal Action	State: _____ Date: _____ Case #: _____
County: _____	Court: _____

In response to federally mandated requirements, the Nevada Legislature and Attorney General require that we include the following questions as part of all applications.

I am \_\_\_ I am not  subject to a court order for the support of a child.

**IF YOU ARE SUBJECT** to a court order for the support of a child, please mark the appropriate response.

I am \_\_\_ I am not  in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order for the support of one or more children.

I hereby certify that the information furnished on this document is true and correct. I agree to abide by all the statutes, rules and regulations governing pharmaceutical technicians and understand that a violation of any such statutes, rules and regulations may be grounds for suspension or revocation of this permit.

Signature: Trina Trinidad Date: 4-23-11

Board Use Only	Received: <u>MAY 03 2011</u>	Check Number: <u>MO</u>	Amount: <u>40.00</u>
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56752

days of today's hearing. Board staff is given authority to approve application if this Order is complied with.

Second: Leo Basch

1/108

Action: Passed With One Negative Vote

D. Trina Trinidad

Trina Trinidad appeared and was sworn by President Boudreaux prior to answering questions or offering testimony.

Ms. Trinidad was requesting a pharmaceutical technician-in-training application to go to work at Rite Aid. Since her submission of the application Rite Aid has changed ownership and she has no opportunity for employment at this time.

Ms. Trinidad took a correspondence course and asked the Board if she could use that certificate for licensure. Since the correspondence course was not ACPE accredited it could not be considered.

When asked about the affirmative questions she answered on her application, she indicated that she spent 25 days in jail for traffic tickets. She had warrants out for her arrest and some of them were very old so she was jailed. Ms. Trinidad also indicated that she was charged with hitting her mother-in-law but she stated that she was cleared of those charges.

Since Ms. Trinidad has no managing pharmacist or store to work in, the Board can not accept her application for pharmaceutical technician-in-training. The Board directed staff to have Ms. Trinidad re-appear if she pursues a job as a PTT in the future.

12. Request for Correction to September 2007 Minutes – Non Appearance:

Robb Miller – Diabetic Life Supply

Robb Miller made a request to the Board to amend the September 2007 meeting minutes to remove the inference that Robert Maxwell stated that Diabetic Life Foundation was the parent company of Diabetic Life Supply. Diabetic Life Foundation is not the parent company of Diabetic Life Supply.

Board Action:

Motion: Ray Seidlinger moved to amend the September 2007 Board meeting minutes as referenced.

Second: Chad Luebke

Action: Passed Unanimously

Ms. Garcia stated that on her 18<sup>th</sup> birthday she was with someone that committed a crime by using someone else's credit card. Since that person was convicted she was considered guilty by association. Ms. Garcia was told that when she completed probation the conviction would be removed from her record.

Board Action:

Motion: Keith Macdonald moved to approve Ms. Garcia's application for pharmaceutical technician-in-training and have Ms. Garcia provide a copy of the document that verifies her testimony.

Second: Dave Wuest

Action: Passed Unanimously

C. Trina D. Trinidad

1/2006

Trina Trinidad appeared and was sworn by President Kellogg prior to answering questions or offering testimony.

Ms. Trinidad advised the Board that she had been offered a job with Smith's as a pharmaceutical technician-in-training. On her application she noted that she was once a student at Heritage College in the pharmaceutical technician program. Ms. Trinidad advised the Board that she was terminated from enrollment with Heritage because she failed to provide a urine analysis. She maintains that was not true and told the Board that she had gone to do the urine analysis, however she had an emergency and asked if she could come back later so she could leave to attend to her child. Ms. Trinidad said that when she returned close to midnight she was advised that she could not test.

Board Action:

Motion: Keith Macdonald moved to approve Ms. Trinidad's application for pharmaceutical technician-in-training.

Second: Katie Craven

Action: Passed Unanimously

7. Appearances:

A. Your Success Rx Report – Katie Johnson  
Cale Batt  
Dale Hawkins

**Pharmacy Board**

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**From:** Steve Feaver [SFeaver@heritagecollege.com] **Sent:** Tue 12/11/2007 4:48 PM  
**To:** Pharmacy Board  
**Cc:**  
**Subject:** RE: Trina Trinidad  
**Attachments:**

Candy,

Trina Trinidad was a student at Heritage College in 2002. She was dismissed from the college for non-compliance regarding her drug screen. Trina did not return to complete the program and completed less than half of the curriculum before being dismissed. Trina met before the board about a year ago reapplying for licensure, claiming employment. My executive director and I appeared with documentation regarding her drug screen requested by Louis Ling. To make a long story short, she was not employed and was denied licensure.

Feel free to contact me if you need any further information.

Steve

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**From:** Pharmacy Board [mailto:pharmacy@pharmacy.nv.gov]  
**Sent:** Tuesday, December 11, 2007 3:37 PM  
**To:** Steve Feaver  
**Subject:** Trina Trinidad

Hi Steve,

I was wondering if you could tell me if Trina Trinidad completed the requirements for Heritage College. I know she attended the school in 2006.

Any information you can provide would be helpful. She is reapplying for licensure and I'm not sure if she should be a tech or tech in trainee.

Blank