

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE**

<p>In re:</p> <p>NVN Liquidation, Inc., et al., f/k/a NOVAN, Inc.,¹</p> <p style="text-align: center;">Debtors.</p>	<p>Chapter 11</p> <p>Case No. 23-10937 (LSS)</p> <p>(Jointly Administered)</p>
<p>NVN LIQUIDATION, INC. LIQUIDATING TRUST, by and through its trustee, Alan D. Halperin,</p> <p style="text-align: center;">Plaintiff,</p> <p>vs.</p> <p>MCKESSON CORPORATION,</p> <p style="text-align: center;">Defendant.</p>	<p>Adversary No. _____</p>

COMPLAINT FOR TURNOVER, BREACH OF CONTRACT, ACCOUNT STATED, GOODS SOLD AND DELIVERED, AND UNJUST ENRICHMENT

The NVN Liquidation, Inc. Liquidating Trust (the “Trust”), successor in interest to certain assets of EPI Health, LLC (“EPI”) and NVN Liquidation, Inc. f/k/a Novan, Inc. (“Novan”, and together with EPI, the “Debtors”), by and through its trustee, Alan D. Halperin, (the “Trustee” or “Plaintiff”), as and for the *Complaint for Turnover, Breach of Contract, Account Stated, Goods Sold and Delivered, and Unjust Enrichment*, alleges as follows:

I.

1. The United States Bankruptcy Court for the District of Delaware (the “Court”) has jurisdiction over this matter pursuant to 28 U.S.C. §§ 157 and 1334 and the *Amended Standing*

¹ The Debtors in these chapter 11 cases, along with the last four digits of the Debtors’ federal tax identification number, are: NVN Liquidation, Inc. (f/k/a Novan, Inc.) (7682) and EPI Health, LLC (9118).



Order of Reference from the United States District Court for the District of Delaware, dated February 29, 2012. This Court retained jurisdiction over the subject matter of this adversary proceeding pursuant to the Section 14.1 of the Plan (as defined below) and paragraph 31 of the Confirmation Order (as defined below).

2. This adversary proceeding is a core proceeding within the meaning of 28 U.S.C. § 157(b)(2), and this Court may enter a final order consistent with these statutes and Article III of the United States Constitution.

3. In accordance with Rule 7008-1 of the Local Rules of Bankruptcy Practice and Procedure of the United States Bankruptcy Court for the District of Delaware, Plaintiff confirms his consent to the entry of a final order by the Court in connection with this Complaint to the extent that it is later determined that the Court, absent consent of the parties, cannot enter final orders or judgments in connection herewith consistent with Article III of the United States Constitution.

4. Venue is proper pursuant to 28 U.S.C. §§ 1408 and 1409.

5. The statutory basis for the relief sought herein are sections 105 and 542 of Title 11 of the United States Code (the “Bankruptcy Code”) and Rules 3007 and 7001(1) of the Federal Rules of Bankruptcy Procedure (the “Bankruptcy Rules”).

II.

PARTIES

6. Plaintiff is Alan D. Halperin, solely in his capacity as Trustee of the Trust.

7. Plaintiff is informed and believes that defendant McKesson Corporation (and its affiliates) (“Defendant”) is an entity with its principal place of business at McKesson Corporation Headquarters, 6555 State Hwy 161, Irving, TX, 75039. At all times pertinent hereto, Defendant was a distributor and reseller of the Debtors’ products, as more fully set forth below.

III.

BACKGROUND

Debtors' Bankruptcy

8. On July 17, 2023 (the "Petition Date"), each of the Debtors filed a voluntary petition for relief under chapter 11 of the Bankruptcy Code in this Court.

9. By order entered on September 20, 2023 [Docket No. 304] (the "Bar Date Order"), the Court fixed October 25, 2023 (the "General Bar Date") as the deadline by which all persons or entities that hold claims of any nature arising prior to the Petition Date were required to file proofs of claim against the Debtors (including secured claims, unsecured priority claims, unsecured non-priority claims, and claims arising under section 503(b)(9) of the Bankruptcy Code). Under the Bar Date Order, any entity who was required but failed to submit a proof of claim in accordance with the Bar Date Order on or before the General Bar Date may be forever barred, estopped, and enjoined from asserting such claim against the Debtors and their property, and is forever enjoined from asserting claims for any and all indebtedness or liability with respect to or arising from such claim in these cases.

10. On January 26, 2024, this Court entered an order [Docket No. 568] (the "Confirmation Order") confirming the Amended Combined Disclosure Statement and Chapter 11 Plan of Liquidation Proposed by the Debtors dated January 26, 2024, together with the Plan Supplement and amendment thereto [Docket Nos. 522, 542 and 543] (collectively, the "Plan").

11. Under the Plan, requests for payment of claims arising during the administration of the cases ("Administrative Expense Claims") were required to be filed no later than May 30, 2024 (the "Administrative Expense Bar Date"). In addition, pursuant to the Plan and Confirmation Order, parties are prohibited from asserting setoff unless such setoff was asserted in a timely filed

claim or pleading prior to the entry of the Confirmation Order. In relevant part, section 10.4 of the Plan states:

Injunction. (a) From and after the Effective Date, all Persons and Entities who have held, hold, or may hold Claims ... that have been released, dismissed, cancelled, settled or waived, or are subject to exculpation, under this Plan or the Confirmation Order, are permanently enjoined from taking any of the following actions against the Estate, the Released Parties, the Liquidating Trust, the Liquidating Trustee, or any of their respective property or assets, on account of any such Claims or Equity Interests: ... (iv) asserting setoff unless such setoff was formally asserted in a timely Filed proof of Claim or in a pleading Filed with the Bankruptcy Court prior to entry of the Confirmation Order (notwithstanding any indication in any proof of Claim or otherwise that such Holder asserts, has, or intends to preserve any right of setoff) or right of subrogation of any kind against any debt, liability, or obligation due to the Debtors ...

In relevant part, paragraph 24 of the Confirmation Order states:

Injunctions. Persons and Entities who have held, hold, or may hold Claims ... that have been released, dismissed, cancelled, settled or waived, or are subject to exculpation, under the Plan or this Confirmation Order, are permanently enjoined from taking any of the following actions against the Estates, the Liquidating Trust, the Liquidating Trustee, or any of their respective property or assets, on account of any such Claims or Equity Interests: ... (iv) asserting setoff unless such setoff was formally asserted in a timely Filed proof of Claim or in a pleading Filed with the Bankruptcy Court prior to entry of this Confirmation Order (notwithstanding any indication in any proof of Claim or otherwise that such Holder asserts, has, or intends to preserve any right of setoff) or right of subrogation of any kind against any debt, liability, or obligation due to the Debtors

12. The Plan became effective on April 30, 2024 [Docket No. 677] (the “Effective Date”).

13. On the Effective Date, in accordance with the Plan and the NVN Liquidating Trust Agreement, the Trust was established and, among other things, all assets of the Debtors and their bankruptcy estates existing as of the Effective Date, including, but not limited to, claims and causes of action against any person or entity that has any outstanding accounts receivable amounts owed

to the Debtors (each an “Account”), were transferred to and vested in the Trust, and the Trustee was appointed trustee with the right, *inter alia*, to collect Accounts and commence causes of action with respect to delinquent Accounts.

Debtor’s Business

14. The Debtors were a medical dermatology enterprise primarily focused on researching, developing and commercializing innovative therapeutic products for skin diseases in the United States. The Debtors promoted dermatological products in the United States through May 31, 2023 and generated revenue from the sale of these branded products to pharmaceutical wholesalers, as well as direct to pharmacies.

Debtors’ Relationship with Defendant

15. Defendant was one of the pharmaceutical wholesalers to which EPI sold branded products. Defendant placed orders for and purchased various branded products (“Products”) from EPI at a specified purchase price subject to certain McKesson Supplier Terms and Conditions (the “T&C”). A true and correct copy of the T&C is attached hereto as Exhibit A.

16. Defendant’s orders for Products were processed as follows:

- Defendant submitted a purchase order (a “Purchase Order”) to EPI via an electronic data interchange portal (“EDI”).
- The electronic order was then converted into a sales order (a “Sales Order”).
- EPI fulfilled the Sales Orders by delivering the ordered Products to Defendant. Proof of delivery was documented in shipment data recorded in EDI (“Proof of Shipment Report”).
- EPI issued to Defendant an invoice (an “Invoice”), which Defendant would be obligated to pay.

17. In addition, EPI and Defendant were parties to a core distribution agreement dated May 17, 2017 (the “Agreement”) under which Defendant provided to EPI distribution,

management and handling services in connection with the Products for a specified service fee (the “Distribution Fee”). A true and correct copy of the Agreement is attached hereto as Exhibit B.

18. Pursuant to the Agreement, Defendant could set-off and apply any amounts owed by it to EPI against any and all Distribution Fees owed by EPI to Defendant without prior written notice. However, under the T&C any deduction taken by Defendant against EPI’s invoice(s) for Product was subject to review by EPI. Therefore, on a monthly basis, Defendant deducted from amounts it paid under EPI’s invoice(s) for Product, the Distribution Fee for services Defendant provided to EPI during the prior month, but the Distribution Fee deduction remained subject to review by EPI.

19. Pursuant to the T&C, Defendant was entitled, in certain circumstances, to return Products to the Debtors and receive a credit for such returns on account once EPI reconciled the returns and confirmed that the return was authorized and proper (“Return Conditions”).

20. As of the Petition Date, Defendant is indebted to EPI in the aggregate sum of \$251,426.58 (“Amount Owed”) for Product sold and delivered to, and received by, Defendant consistent with Purchase Orders and corresponding Sales Orders, which Defendant has not disputed. The Amount Owed is comprised of:

Outstanding Invoices (“ <u>Outstanding Invoices</u> ”)	\$245,322.98
Return Cash Deductions (“ <u>Improper Deductions</u> ”)	\$21,965.76
Issued Credit Memos (“ <u>Credit Memos</u> ”)	\$(15,862.16)
TOTAL	\$251,426.58

21. Copies of the Outstanding Invoices, totaling \$245,322.98, were timely provided to and received by Defendant on account of Product delivered to Defendant, Defendant never disputed the Outstanding Invoices, and despite its obligation to do so, Defendant failed to pay such invoices.

22. A list of the Outstanding Invoices is attached hereto as Exhibit C and incorporated herein by reference. True and correct copies of the Outstanding Invoices are attached hereto as Exhibit D. Each Outstanding Invoice references a specific Sales Order number. True and correct copies of the Sale Orders referenced in the Outstanding Invoices are attached hereto as Exhibit E. A true and correct copy of the Proof of Shipment Report for Products delivered to Defendant under the Outstanding Invoices is attached hereto as Exhibit F.

23. In addition to the Outstanding Invoices, Defendant is indebted to the Debtors for Improper Deductions totaling \$21,965.76 that it took unilaterally for Product returns despite failing to meet the Return Conditions (the “Improper Returns”). Indeed, the Debtors notified Defendant through EDI, and Defendant never disputed, that the Improper Returns failed to meet the Return Conditions and the Improper Deductions are, therefore, not valid. A list of the Improper Deductions are attached hereto as Exhibit G and incorporated herein by reference. True and correct copies of the Improper Deductions are attached hereto as Exhibit H.

24. In July of 2024, Defendant attempted to make a payment to EPI in the amount of, thereby admitting its obligation to EPI for at least, the sum of \$211,087.56 via check to a lockbox that had been closed. Thereafter, following Defendant’s inquiry as to why the payment was getting rejected, the Trustee provided to Defendant with the correct payment instructions for the Trust. However, Defendant failed to make any payment despite multiple follow-up demands by the Trustee.

25. Defendant failed to timely pay the Amount Owed, and demand for payment of the Amount Owed was made on and after July 23, 2024, and again on August 23, 2024. Defendant has failed and continues to fail, to pay the Amount Owed.

26. Notice of the General Bar Date and the Administrative Expense Bar Date were served upon Defendant as set forth in affidavits of service filed with the Court [Docket Nos. 319, 358, and 683]. Defendant failed to file any proof of claim or assert any Administrative Expense Claim against the Debtors in these cases.

I.

FIRST CLAIM FOR RELIEF

For Turnover Pursuant to 11 U.S.C. § 542

27. Plaintiff repeats and realleges the allegations contained in each preceding paragraph of the Complaint as though set forth fully herein.

28. Pursuant to section 541(a) of the Bankruptcy Code, the Amount Owed constituted property of the EPI's bankruptcy estate, all right, title and interest in which were transferred to and vested in the Trust on the Effective Date.

29. Pursuant to Section 542(b) of the Bankruptcy Code, any entity that owes a debt that is property of the estate and that is matured, payable on demand, or payable on order, shall pay such debt to, or on the order of, the trustee, except to the extent that such debt may be offset under section 553 of the Bankruptcy Code against a claim against the debtor.

30. The Amount Owed is property of the Trust that is matured and payable on demand to the Trust as successor to the Debtors pursuant to section 542(b) of the Bankruptcy Code.

31. Pursuant to the Plan and Confirmation Order, as Defendant has failed to file any proof of claim in the Cases asserting setoff therein and failed to otherwise assert setoff in a pleading filed with the Court, the Amount Owed may not be offset against any claim Defendant may have or assert against the Debtors.

32. On or about July 23, 2024 and August 23, 2024, and prior and subsequent thereto, the Plaintiff made demand on Defendant to immediately turn over the Amount Owed.

33. Despite such demand therefor, Defendant has failed and refused to turn over the Amount Owed to the Trust.

34. Plaintiff is entitled to an order directing Defendant to immediately turn over and pay the Amount Owed to the Plaintiff, plus interest at the legal rate from and after at least July 23, 2024.

II.

SECOND CLAIM FOR RELIEF

Breach of Contract

35. Plaintiff repeats and realleges the allegations contained in each preceding paragraph of the Complaint as though set forth fully herein.

36. The issuance of a Purchase Order by Defendant coupled with the delivery of the Products by EPI fulfilling the Purchase Order and issuance of an Invoice by EPI for such Products, constitute an enforceable agreement between Defendant and EPI, whereby, *inter alia*, Defendant was obligated to pay EPI for Products.

37. Each agreement established by each Purchase Order and Invoice is a valid and enforceable contract under which the Defendant was obligated to perform.

38. EPI performed all terms and conditions required of it to be performed under the terms of each agreement.

39. EPI delivered the Outstanding Invoices to Defendant for the sale of Products and Defendant has failed and refused to pay the Outstanding Invoices totaling \$245,322.98.

40. Defendant took Improper Returns and has failed to pay back the Improper Deductions which total \$21,965.76.

41. Demand for payment of the Amount Owed was made before, on, and after July 23, 2024, but Defendant has failed and refused, and continues to fail and refuse, to pay the Amount Owed, which failures constitute material breaches of the parties' agreements.

42. By reason of Defendant's breach of the agreements, Plaintiff, as successor to EPI, has been damaged in the sum of \$251,426.58 plus interest thereon at the legal rate from and after at least July 23, 2024.

III.

THIRD CLAIM FOR RELIEF

Account Stated

43. Plaintiff repeats and realleges the allegations contained in each preceding paragraph of the Complaint as though set forth fully herein.

44. Debtor EPI sent the Outstanding Invoices and notice of the Improper Deductions to Defendant that set forth the amounts due and owing to EPI for Defendant's purchase of Products from EPI.

45. Defendant has never disputed the Outstanding Invoices or the Improper Deductions.

46. The Plaintiff has demanded that Defendant pay for the Products it purchased and received from the Debtors related to the Outstanding Invoices and the Improper Deductions. Defendant has failed and refused to do so.

47. There is an account stated, due and owing to Debtors in the amount of \$251,426.58 for the Amount Owed, and Plaintiff is entitled to a judgment on that amount.

IV.

FOURTH CLAIM FOR RELIEF

Goods Sold and Delivered

48. Plaintiff repeats and realleges the allegations contained in each preceding paragraph of the Complaint as though set forth fully herein.

49. Within two years prior to the Petition Date, Defendant became indebted to Debtors for Products sold and delivered to Defendant and for which Defendant promised to pay.

50. Defendant has failed to pay for the Products, despite the Plaintiff's demand therefor. Plaintiff is therefore entitled to a judgment for the Amount Owed.

V.

FIFTH CLAIM FOR RELIEF

Unjust Enrichment (In the Alternative)

51. Plaintiff repeats and realleges the allegations contained in each preceding paragraph of the Complaint as though set forth fully herein.

52. Debtor EPI conferred a benefit on Defendant in the form of the Products shown on the Outstanding Invoices.

53. Defendant accepted and retained the Products without paying for them.

54. It would be inequitable for Defendant to retain the Products without paying for the value it received.

55. Plaintiff is therefore entitled to a judgment in the amount of \$245,322.98 for the Outstanding Invoices.

WHEREFORE, Plaintiff prays for judgment against Defendant as follows:

- a. On the First Claim for Relief for an order directing Defendant to turn over to the Debtor the sum of \$251,426.58, plus prejudgment interest thereon;

- b. On the Second Claim for Relief, for entry of judgment in the amount of \$251,426.58, plus prejudgment interest thereon;
- c. On the Third Claim for Relief, for entry of judgment in the amount of \$251,426.58, plus prejudgment interest thereon;
- d. On the Fourth Claim for Relief, for entry of judgment in the amount of \$251,426.58, plus prejudgment interest thereon;
- e. On the Fifth Claim for Relief, for entry of judgment in the amount of \$245,322.98, plus prejudgment interest thereon;
- f. For costs of suit incurred herein; and
- g. For such other and further relief as the Court deems just and proper.

Dated: October 10, 2024
Wilmington, Delaware

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EXHIBIT A

MCKESSON SUPPLIER STANDARD TERMS & CONDITIONS**SUPPLIER ACKNOWLEDGEMENT & AGREEMENT***(updated December 11, 2017)*

- Terms and Conditions.** The McKesson Supplier Standard Terms and Conditions referenced herein (“STCs”), including each separate schedule described in Section 2 below (each a “Schedule”) replace any prior standard supplier terms and conditions applicable to the Commercial Relationship between McKesson and the entity listed below (“Supplier”) and such STCs shall apply to Supplier, and govern the Commercial Relationship between McKesson and Supplier, as of the date listed below (the “Effective Date”). Capitalized terms used in these STCs shall have the meanings ascribed to such terms in any Schedule, including Schedule L (Other Terms and Conditions).
- Schedules.** The following is the list of each applicable Schedule in effect as of the Effective Date, which may be modified or supplemented by McKesson, including through the addition or removal of one or more Schedules, upon notification thereof through McKesson’s Supplier Portal or electronic notification to Supplier’s representatives involved in the Commercial Relationship, at least thirty (30) days prior to the effective date of such change:

Schedule	Description	Version	Effective Date
A	Accounting	12/11/2017	2/1/2018
C	Contract Administration, Pricing and Chargebacks	12/11/2017	2/1/2018
F	Standard Fees	12/11/2017	2/1/2018
I	Insurance Requirements	12/11/2017	2/1/2018
L	Other Terms and Conditions	12/11/2017	2/1/2018
M	Master Data, Information and Data Requirements	12/11/2017	2/1/2018
O	Orders, Fulfilment and Shipping Requirements	12/11/2017	2/1/2018
R	Returns Policy	12/11/2017	2/1/2018

- Conflicts.** In the event of a conflict between any provision contained in the STCs and a Commercial Agreement, the applicable conflicting provision of the Commercial Agreement will control, unless otherwise agreed to in writing by McKesson and Supplier. Notwithstanding anything to the contrary, in the event of a conflict between a provision of these STCs and a provision of a separate written agreement between Supplier and a McKesson Affiliate to which McKesson is not a party, the applicable provision of the separate written agreement will control with respect to Supplier and the applicable McKesson Affiliate. Any additional or conflicting terms and conditions, including as may be set forth in any offer, acceptance, shipping document, packing slip, bill of lading, invoice or other document issued by, or on behalf of, Supplier will have no effect on McKesson unless explicitly agreed to in writing by McKesson.

[Signature page follows]

By signing below*, the Supplier's representative represents that he or she has the authority on behalf of Supplier to execute this acknowledgement and agreement and Supplier, on behalf of itself and its affiliates and subsidiaries, will fully comply with the STCs, as modified or supplemented from time to time by McKesson in accordance herewith.

Supplier Full Legal Name:	
Name and Title of Authorized Representative:	
Signature of Authorized Representative:	
Date of Signature:	
Address for Notice:	

** In lieu of executing this Acknowledgement and Agreement, Supplier may acknowledge and agree to these STCs through a separate written agreement which incorporates these STCs by reference and the Effective Date (as defined herein), shall be the effective date of such separate written agreement.*

McKesson Supplier Standard Terms and Conditions**SCHEDULE A - Accounting**

Effective February 1, 2018 (version 12/11/17)

1. Supplier Invoices.

- A. *Invoices.* Unless otherwise agreed to in writing by McKesson and Supplier, Supplier shall invoice McKesson for order shipments on the date of shipment utilizing the EDI 810 (Invoices) transaction set, and in the case of drop ship orders, the EDI transmission will be coded for “drop ship”. Supplier will include the applicable order number provided by McKesson on all invoices.
- B. *Invoice Payment Terms.* All invoices are subject to payment terms as agreed to separately in writing between McKesson and Supplier. The date of a Supplier invoice will be deemed to be the later of (i) the date of the invoice, or (ii) the date the shipment relating to such invoice is shipped. Invoices that are due on a non-Business Day will be considered paid on such date if payment is received by the second (2nd) Business Day following the due date. Payment terms for stocking orders, including the number of days by which McKesson is required to remit payment to receive a prompt pay discount, will be deemed extended by an additional thirty (30) days.
- C. *Invoice Disputes.* In the event of any invoice dispute, McKesson shall pay all undisputed amounts in accordance with Section 1.B and provide Supplier notification through the McKesson Supplier Portal of the disputed amounts and the reasons for any such dispute. Supplier is required to notify McKesson through the McKesson Supplier Portal of any dispute relating to McKesson’s dispute within thirty (30) days of McKesson’s notification of dispute. McKesson and Supplier shall meet to discuss any such invoice dispute, as necessary, and use commercially reasonable efforts to resolve any disputes within sixty (60) days of receipt of such notification of dispute by Supplier.

2. McKesson Invoices.

- A. *Payment Terms.* Supplier shall pay amounts invoiced by McKesson by EFT, debit ACH, or credit memo no later than thirty (30) days following the date of the invoice (a “McKesson Invoice”). Any late payment of a McKesson Invoice may, in the sole discretion of McKesson, (i) bear Interest, and (ii) be deducted by McKesson in accordance with Section 2.C. Notwithstanding the foregoing, undisputed chargebacks which are not paid in full by EFT, debit ACH, or credit memo within five (5) days following submission by McKesson, may be deducted thereafter by McKesson in accordance with Section 2.C. “Interest” means a payment calculated at an annual rate, subject to compliance with applicable laws, equal to the current U.S. short-term, annually compounding applicable federal rate (as published by the U.S. Internal Revenue Service in accordance with Section 1274(d) of the Internal Revenue Code) plus three percent (3.0%), provided, that if the current U.S. short-term, monthly compounding applicable federal rate is less than zero, such annual rate shall be three percent (3.0%). Interest will be applied based on the actual number of days elapsed and a year of three hundred sixty (360) days.
- B. *Invoice Disputes.* Supplier shall pay all undisputed amounts in accordance with the payment terms in Section 2.A and provide McKesson with prompt written notification of any disputed amounts within thirty (30) days of receiving a McKesson Invoice. Such notification shall reasonably detail the nature of such dispute. McKesson and Supplier shall meet to discuss any such invoice dispute, as necessary, and will use commercially reasonable efforts to resolve any dispute within sixty (60) days of McKesson’s receipt of Supplier’s notification of dispute.
- C. *Setoff and Debit Balances.* Notwithstanding anything to the contrary, McKesson may, without prior written notification, notice or separate authorization, set-off, recoup, deduct and apply any past due amounts owed by Supplier or Supplier’s Affiliates to McKesson that are not subject to a good faith dispute timely communicated in writing by Supplier to McKesson, against any amounts owed by McKesson or a McKesson Affiliate to Supplier or any of Supplier’s Affiliates. Notwithstanding the foregoing, Supplier agrees to remit any remaining debit balances immediately by EFT, or debit ACH and any unpaid remaining debit balances may, in the sole discretion of McKesson, bear Interest.

3. Pricing and Price Changes.

- A. *Invoice Pricing.* Supplier will sell products to McKesson at Supplier’s then current Invoice Price in effect on the date of McKesson’s purchase order. “Invoice Price” of a product means, unless otherwise agreed to in writing by McKesson and Supplier, such product’s WAC. “WAC” means Supplier’s then current and published wholesale acquisition cost to wholesalers for a product without regard to prompt payment or other discounts, rebates, incentives or chargebacks. McKesson’s Invoice Price for a product shall at no time be higher than the price charged by Supplier for the same product to other wholesalers and distributors in the United States.

McKesson Supplier Standard Terms and Conditions**SCHEDULE A - Accounting**

Effective February 1, 2018 (version 12/11/17)

- B. *Invoice Price Changes.* Supplier will notify McKesson by email of any changes in a product's Invoice Price using the email address designated by McKesson for such notification. Such Invoice Price change notification shall comply with the following requirements:
- (1) Brand and Generic Pharmaceuticals – an Invoice Price change notification for a brand or generic pharmaceutical product must be delivered by Supplier to McKesson by no later than 3:00 PM Central Time on the Business Day immediately prior to the effective date of a new Invoice Price, unless McKesson and Supplier have agreed in writing to a longer advanced notification period for Invoice Price changes, in which case such longer advanced notification period shall apply. Supplier will indemnify McKesson for any losses that McKesson incurs due to a late notification by Supplier.
 - (2) Non-Pharmaceuticals – an Invoice Price change notification for any products not covered by Section 3.B(1), including, without limitation, any over the counter (OTC), consumer, or home healthcare product must be delivered by Supplier to McKesson by no later than 3:00 PM Central Time on the thirtieth (30th) day immediately prior to the effective date of the new Invoice Price unless McKesson and Supplier have agreed in writing to an alternative notification period for Invoice Price changes, in which case such alternative notification period shall apply. Any late notification by Supplier may result in McKesson's delay in implementing the new Invoice Price and Supplier will indemnify McKesson for any losses that McKesson incurs due to a late notification by Supplier.
- C. *Shelf Stock Credits.* In the event Supplier decreases the Invoice Price for Product, McKesson will be entitled to receive a shelf stock credit in an amount equal to the difference between the Invoice Price in effect immediately prior to the decrease and the new lower Invoice Price multiplied by the number of selling units of such Product in Covered Inventory. Shelf stock credits due in accordance with this Section 3.C will be invoiced by McKesson in accordance with Section 2. "Covered Inventory" as used in this section, means (A) all selling units of a product that as of the effective date of a reduction in the Invoice Price for such Product are: (i) on hand at a McKesson distribution center, or (ii) on order with Supplier or in transit to McKesson from Supplier, and (B) all selling units of a product returned by customers to McKesson in saleable condition which were sold to customers prior to the effective date of the Invoice Price reduction and returned during the thirty (30) days following the effective date of the reduction in the Invoice Price, provided, that, if the reduction in the Invoice Price relates to a New-to-Market Product, (B) will include all selling units of a product returned by customers to McKesson in saleable condition which were sold to customers prior to the effective date of the Invoice Price reduction and returned during the sixty (60) days following the effective date of the reduction in the Invoice Price. "New-to-Market Product" as used in this section, means a generic pharmaceutical drug that is the first Generic Equivalent of a branded pharmaceutical drug that is introduced under an ANDA, 505(b)(2), biosimilar filing, or as the authorized generic of such branded pharmaceutical drug. "Generic Equivalent" means any generic pharmaceutical product with the same dosage form that is "AB," "AB1," "AB2," or "AB3" rated (per Orange Book designation and where the Orange Book Code 3 codes are equivalent) and with the same GPI (as designated by Medi-Span) as a Product sold by Supplier that is subject to an Invoice Price reduction under this section.

4. Accounting Disputes, Limitations on Claims and Customer Claims.

- A. *Accounting Disputes.* Any good faith accounting disputes relating to a previously undisputed McKesson billing, invoice, chargeback, deduction or debit memo submitted by Supplier to McKesson in writing within one hundred eighty (180) days following the date of the underlying transaction to which such dispute applies, will be reviewed by McKesson in the ordinary course of business and McKesson and Supplier shall confer regarding any such accounting dispute and use commercially reasonable efforts to resolve the dispute within sixty (60) days of McKesson's receipt of Supplier's notification of dispute.
- B. *Limitation on Claims.* Any action relating to a breach of contract claim by Supplier in connection with a McKesson billing, invoice, chargeback, deduction or debit memo, including, without limitation, a claim that arises through an audit process, must be commenced by Supplier within three hundred sixty-five (365) days after the cause of action has accrued.
- C. *Customer Claims.* Notwithstanding anything to the contrary, Supplier will promptly indemnify McKesson for any valid claim or dispute submitted by a McKesson customer (including, without limitation, a government customer) or such customer's agent or representative, asserting that Supplier's price for a product was incorrect. McKesson

McKesson Supplier Standard Terms and Conditions

SCHEDULE A - Accounting

Effective February 1, 2018 (*version 12/11/17*)

and Supplier agree that the Statute of Limitations in Contracts for Sale (UCC § 2-725), or other similar applicable law, or the date of the sale of the product giving rise to such customer's claim shall in no way preclude or prejudice McKesson's right to seek indemnity pursuant to this Section 4.C.

5. **Definitions.** Capitalized terms that are not defined herein shall have the meanings ascribed to such terms in other Schedules of the STCs.

McKesson Supplier Standard Terms and Conditions
SCHEDULE C – Contract Administration, Pricing and Chargebacks

Effective February 1, 2018 (version 12/11/17)

1. **EDI Compliance Policy.** Unless otherwise agreed to by McKesson's Chargeback Management Group, Supplier will transact with McKesson in connection with contract administration, pricing and chargebacks using the following EDI transaction sets, in adherence with all applicable HDA EDI standards and data requirements: EDI 845 (Bid Award), EDI 844 (Chargeback), and EDI 849 (Chargeback Reconciliation) using version 4010.
2. **Contract Notification Requirements.** Supplier contract notifications shall be communicated by EDI 845 (Bid Awards) transaction set and will include product identifier, product description, product contract effective and expiration dates, contract bid price, customer eligibility (including effective and expiration dates), eligible class of trade, contract effective and expiration dates, and contract/chargeback reference number. Supplier will communicate to McKesson, in accordance with this Section 2, (i) any updates or changes to existing contracts at least ten (10) days prior to the effective date for such updates or changes, and (ii) all new contracts at least fifteen (15) days prior to the effective date for such new contracts.
3. **Contract Price Changes.** Contract price change notifications will be submitted in accordance with Section 2(above), provided that a contract price change notification for a product on a McKesson Proprietary Program will be in accordance with the additional notification requirements applicable to such product. Adjustments to contract pricing that result in credit/rebill or add-bill due to late notifications by Supplier or a request by Supplier to apply pricing retro-actively may result in additional charges to Supplier based on McKesson's then current rates.
4. **Chargeback Submissions and Disputes.** McKesson will submit chargebacks to Supplier on the difference between the Invoice Price for the product and the applicable contract price using the EDI 844 (Chargeback) transaction set. Any good faith chargeback disputes will be reported by Supplier using the EDI 849 (Chargeback Reconciliation) transaction set and shall include accurate line detail of the disputed lines within five (5) days following McKesson's original chargeback submission, or ten (10) days following McKesson's chargeback resubmission. Disputes which do not comply with the requirements of this section will not be eligible for reversal or repayment by McKesson without McKesson's specific approval.
5. **Payments.** Supplier will pay McKesson for any undisputed chargebacks by EFT, debit ACH or credit memo within five (5) days of McKesson's transmission thereof. McKesson will be entitled to deduct from any outstanding invoices owed to Supplier any chargebacks for which Supplier has not rendered payment, issued a credit or submitted a chargeback dispute in accordance with this section. Any debit balances for chargebacks must be remitted immediately by EFT or debit ACH.
6. **Deductions.** McKesson reserves the right to deduct any denied chargeback for any of the following reasons:
 - (i) Supplier did not provide timely and proper notification of new customer contracts or updates to existing customer contracts relating to such chargeback;
 - (ii) Supplier's dispute of a chargeback did not comply with this Schedule;
 - (iii) The denied chargeback relates to a government contract or an unresolved discrepancy or dispute between Supplier and a customer or a GPO;
 - (iv) The denied chargeback relates to any aged claims resulting from customer audits; or
 - (v) The denial is due to absence of HIN for 340B chargeback submissions.
7. **Dated Claims and Disputes.** Deductions by Supplier for chargebacks disputed in good faith are only permitted during the sixty (60) day period following the original submission by McKesson, unless otherwise agreed to in writing by McKesson.
8. **Definitions.** Capitalized terms that are not defined herein shall have the meanings ascribed to such terms in other Schedules of the STCs.

McKesson Supplier Standard Terms and Conditions**SCHEDULE F – Standard Fees**

Effective February 1, 2018 (version 12/11/17)

FEE TYPE	FEE AMOUNT
Product Returns	
Third Party Credit Processing Fee for Customer Credits	\$10.00 per credit
McKesson Returns Processor Fee for Rx Product (if processed quarterly)	\$0.75 per piece
McKesson Returns Processor Fee for Rx Product (if processed monthly)	\$0.86 per piece
McKesson Returns Processor Fee for Destruction of Product	\$0.50 per piece
McKesson Returns Processor Fee for OTC Product	\$0.30 per piece
Transaction Fees	
Supplier Invoice to McKesson Non-EDI Invoice Transmission Fee (EDI 810)	\$35.00 per invoice
Chargeback Non-EDI Transmission Fee (EDI 844 and EDI 849)	\$2.00 per line
Credit Rebill Fee (all EDI transaction types)	\$5.00 per line
REMS Program Setup Fee (Rx Product non-contracted fee)	\$20,000.00 per program
REMS Program Maintenance Fee (Rx Product non-contracted fee)	\$10,000.00 per year
REMS Program Maintenance Fee (Generic Products only)	1% of Product sales
DC Operations Fees	
Relabeling Fee	\$1.00 per case
Late Receiving Fee (outside of regular receiving hours)	\$500.00 per shipment
Sorting and Segregation Fee	\$200.00 per shipment
Quarantine Fee for Nonconforming Shipments	\$400.00 per shipment

McKesson Supplier Standard Terms and Conditions**SCHEDULE I – Insurance Requirements**

Effective February 1, 2018 (version 12/11/17)

1. **Insurance Requirements and Minimum Limits** – All of Supplier’s insurers must meet the minimum A.M. Best rating of A- VII or better. The limits required under the insurance requirements set forth in this Schedule can be satisfied through any combination of primary and umbrella/excess insurance.
 - A. **Products Liability insurance** with a minimum limit of \$10,000,000 per each occurrence. Coverage shall include bodily injury and property damage, including contractual liability for all products and completed operations and any work supplied pursuant to the terms and conditions of a Commercial Agreement. Stand-alone products liability coverage is not required if products liability is covered under the commercial general liability policy and complies with the requirements of this Section.
 - B. **Commercial General Liability insurance**, including products and completed operations, premises liability, personal and advertising injury and contractual liability. Such policy will have limits of no less than \$3,000,000 per occurrence for premises liability, personal and advertising injury and limits of no less than \$10,000,000 per occurrence for products liability and completed operations and for work supplied pursuant to the terms and conditions of a Commercial Agreement. If the Supplier maintains a stand-alone products liability policy which complies with these requirements, products and completed operations coverage is not required under this commercial general liability policy.
 - C. **Business Auto Liability insurance** with a minimum combined single limit of no less than \$1,000,000 for all vehicles that are owned, non-owned, hired, leased or otherwise used in the performance of Supplier’s obligations pursuant to the terms and conditions of a Commercial Agreement.
 - D. **Umbrella Liability insurance** with a minimum limit of \$5,000,000 per occurrence, providing coverage in excess of underlying products liability or general liability including products liability coverage, business automobile liability, and employers’ liability.
 - E. **Crime (employee dishonesty) insurance** with a minimum limit of \$1,000,000 for loss arising out of or in connection with any fraudulent or dishonest acts committed by the employees or agents of Supplier, acting alone or in collusion with others, including property coverage resulting in the loss of money and securities or other property of McKesson; and, such other insurance as Supplier may reasonably deem necessary to ensure the performance of its obligations pursuant to the terms and conditions of a Commercial Agreement.
 - F. **Workers’ Compensation insurance** with statutory limits in accordance with applicable laws and **Employers’ Liability insurance** with minimum limits of \$1,000,000 bodily injury by accident, \$1,000,000 bodily injury by disease – each employee, and \$1,000,000 bodily injury by disease – policy limit.
2. **Additional Insurance Requirements**
 - A. **Waivers and Endorsements** – At no additional cost to McKesson, Supplier shall obtain a waiver of subrogation in favor of McKesson for Supplier’s Workers’ Compensation policy. Supplier shall cause its insurer(s) to endorse all insurance policies, except Workers’ Compensation and Employers Liability, to: (i) name McKesson Corporation, its subsidiaries and affiliates as an additional insured; (ii) give McKesson at least thirty (30) days prior written notice of any cancellation, material change or termination in coverage required under this Schedule; (iii) include a separation of insured provision, or insured versus insured provision with no cross liability or cross suits exclusions; (iv) state a waiver of the insurer(s)’ subrogation rights against McKesson; and (v) state all insurance maintained by Supplier will be primary and non-contributory.
 - B. **Certificates of Insurance** – Supplier agrees to furnish McKesson with applicable Acord certificates of insurance (“COI”) including all insurance requirements herein and executed by an authorized representative. Supplier will provide a renewal COI prior to the expiration date of each required insurance policy by submitting a renewal COI to McKesson at EDMItemVendor@McKesson.com.
 - C. **Subcontractors** – If Supplier will use a subcontractor(s) to perform its obligations under a Commercial Agreement, then Supplier shall furnish to McKesson prior to subcontractor’s service either (i) a Supplier COI evidencing that Supplier’s insurance meets all requirements included herein and covers such subcontractor(s) including naming such subcontractor as an additional insured under Supplier’s applicable

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insurance policy, or (ii) a subcontractor COI evidencing that such subcontractor of Supplier satisfies all insurance terms required of Supplier by McKesson noted herein, including but not limited to, the requirement to name McKesson as an additional insured on all required insurance policies.

- D. **Claims-Made Policies** – If any insurance policy is a “claims-made” policy, then such claims-made policy must be kept in force for not less than six (6) years immediately following termination of the Commercial Agreement. Evidence of successive policy periods must be made by the annual issuance of a COI to McKesson. Alternatively, Supplier, and Supplier’s subcontractors (if applicable), shall purchase a six (6) year extended reporting (“tail”) policy immediately following termination of the Commercial Agreement with prior acts coverage including the same for any claim arising in connection with the Commercial Agreement with a retroactive date on, or prior to, the earliest Commercial Agreement effective date. Such tail policy or endorsement follows the terms and conditions of the terminated policy.
3. **No Relief from Obligations** – Approval or acceptance of any of Supplier’s insurance policies by McKesson will not relieve Supplier of any obligations contained in this Schedule or in any other agreement, including any of Supplier’s indemnification obligations to McKesson, whether or not McKesson’s claims fall under insurance noted above, and/or within, outside or in excess of Supplier’s policy limits, and regardless of solvency or insolvency of the insurer(s) that issues such coverage. Insurance or lack thereof will not preclude McKesson from taking any actions that are available to McKesson under any contract or applicable law. The failure to provide COIs or add McKesson as an additional insured in accordance with the insurance requirements set forth in this Schedule will not release Supplier in any manner of any liability arising under any Commercial Agreement. Furthermore, in no way shall Supplier’s liability be limited to that which is recoverable by insurance.
4. **Survival** – The insurance requirements set forth in this Schedule shall survive termination of the Commercial Agreement. Supplier and/or Supplier’s subcontractors shall cause all of its successors, assigns and subsequent purchasers to adhere to the insurance requirements set forth in this Schedule and nothing herein shall be deemed to relieve Supplier or Supplier’s subcontractors of any liability for its acts, omissions or obligations occurring or accruing up to and including the effective date of such assignment, sale or transfer.
5. **Definitions** – Capitalized terms that are not defined herein shall have the meanings ascribed to such terms in other Schedules of the STCs.

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- 1. Definitions.** Capitalized terms referenced herein shall have the meanings ascribed to such terms herein or in other Schedules to the STCs.
- A. “Affiliate” means, with respect to either Party, any entity directly or indirectly controlling, controlled by, or under common control with such Party. For the purposes of this definition, “control,” as applied to any entity, means the possession, directly or indirectly, of the power to direct or cause the direction of the management and policies of that entity, whether through the ownership of voting securities, by contract or otherwise.
 - B. “Applicable Laws” means all provisions of constitutions, statutes, rules, codes, regulations, permits, consents, approvals or agreements of governmental bodies or regulatory agencies and all orders, consents and decrees of all courts and arbitrators in applicable proceedings or actions, including any associated regulations, guidance and other requirements, now or hereafter in force or in effect, in each case, applicable to the performance by each Party of its respective obligations under the STCs.
 - C. “Bankruptcy Laws” has the meaning set forth in the definition of “Insolvency”.
 - D. “Business Day” shall mean Monday through Friday, excluding any federally recognized national holiday on which Supplier or McKesson is closed for business.
 - E. “Claim” means any claims, demands, litigation, actions, suits, administrative proceedings, and causes of action brought or asserted by any third party, and all resulting liabilities, judgments, settlements, costs, losses or expenses including attorneys’ and experts’ fees and costs of litigation, and any attorneys’ fees, penalties, or damages paid to such third party.
 - F. “Confidential Information” has the meaning set forth in Section 8.
 - G. “Commercial Agreement” means any agreement underlying the Commercial Relationship between McKesson and Supplier.
 - H. “Commercial Relationship” means the contractual relationship between McKesson and Supplier pertaining to the distribution of Supplier’s Products by McKesson.
 - I. “Divested Product” has the meaning set forth in Section 7.
 - J. “DSCSA” means the Drug Supply Chain Security Act, as amended.
 - K. “FDA” means the U.S. Food and Drug Administration.
 - L. “FDCA” means the U.S. Federal Food, Drug and Cosmetic Act, as amended.
 - M. “Government Authority” means any court or tribunal of competent jurisdiction, any local, regional, national or any governmental authority, department, legislature, agency, council, department, or official of any state that has the power to regulate or decide on any matter arising out of or in connection with the STCs or any Commercial Agreement or which otherwise has jurisdiction over such matters.
 - N. “Indemnified Party” has the meaning set forth in Section 5.
 - O. “Indemnifying Party” has the meaning set forth in Section 5.
 - P. “Insolvency” means that: (i) a Party makes an assignment for the benefit of creditors, or petitions or applies for or arranges for the appointment of a trustee, liquidator or receiver, or commences any proceeding relating to itself under any bankruptcy, reorganization, arrangement, insolvency, readjustment of debt, dissolution or liquidation or similar law of the country under which the insolvent Party is organized or a country in which the insolvent Party conducts business, now or hereafter in effect (collectively “Bankruptcy Laws”), or shall be adjudicated bankrupt or insolvent in such a country; or (ii) a Party gives its approval of, consent to, or acquiesces in, any of the following for a period of sixty (60) days: the filing of a petition or application for the appointment of a trustee, liquidator or receiver against that Party; the commencement of any proceeding under any Bankruptcy Laws against that Party; or the entry of an order appointing any trustee, liquidator or receiver; or (iii) a Party is generally unable to pay its debts when due.
 - Q. “McKesson” means McKesson Corporation and its Affiliates.

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- R. “McKesson Proprietary Program” means a proprietary formulary program of products offered by McKesson to its customers pursuant to: (i) contract pricing that McKesson establishes for each product, or (ii) contract or list pricing established by a supplier for inclusion in such proprietary formulary program.
 - S. “McKesson Supplier Portal” means the web-based portal managed by McKesson for the purpose of communicating with suppliers.
 - T. “Party” means McKesson or Supplier.
 - U. “Product” means any pharmaceutical Product that is manufactured or sold by Supplier, that McKesson and Supplier agree, from time to time, may be purchased and distributed by McKesson pursuant to a Commercial Relationship.
 - V. “Supplier” means the entity with which McKesson has a Commercial Relationship and such entity’s Affiliates involved in the Commercial Relationship.
 - W. “Territory” means the fifty (50) states of the United States of America and its territories, commonwealths, possessions and associated states, including the District of Columbia and the Commonwealth of Puerto Rico, and shall include, solely with respect to shipments of Products to the U.S. Veterans Administration and the U.S. Department of Defense, any specific remote ship-to location in the world to which such customer may require that Products be shipped.
 - X. “TAA” means the United States Trade Agreements Act (19 U.S. C. 2501, et seq.).
- 2. Information Requirements.** Supplier will provide to McKesson in a prompt and timely manner any information required by McKesson in these STCs or any Commercial Agreement, or as is otherwise reasonably requested by McKesson. Supplier will ensure that the information and representations provided by Supplier, or on its behalf, to McKesson shall be accurate, correct and complete at all times and in all material respects. Supplier represents and warrants that the information and representations provided by Supplier with respect to Products, shall be accurate and correct when given and apply to all Products, whether ordered from Supplier, Supplier’s agents, subsidiaries or divisions and may be relied and acted upon by McKesson. Supplier will promptly notify McKesson in writing if it discovers that any information or representations provided by Supplier, or on its behalf, to McKesson are not accurate, correct or complete and Supplier will use its best efforts to take immediate corrective actions to prevent the reoccurrence thereof.
- 3. Compliance with Laws.** The Parties shall comply with all Applicable Laws which are applicable to such Party’s duties and responsibilities under these STCs and any Commercial Agreement. The Parties acknowledge that pricing, discounts and price reductions available hereunder must be fully and accurately reported, to the extent required, under § 1128B(b) of the Social Security Act and 42 C.F.R. § 1001.952(h) and all other Applicable Laws. The Parties shall maintain all documents and take all additional steps necessary to facilitate compliance with the discount safe harbor to the Federal Anti-Kickback Statute and the corresponding regulatory safe harbor and to facilitate accurate price reporting for a Product. Supplier acknowledges that it is solely and exclusively responsible for accurately reporting prices to government agencies and other entities, including characterizing payments to McKesson as fees or discounts for purposes of price reporting, and nothing in these STCs or any Commercial Agreement shall modify such responsibility.
- 4. Terms Relating to Government Contract Requirements.** Supplier and McKesson each agree to abide by the applicable requirements as set forth in this Section 4 with respect to any Commercial Agreements as they relate to Products or services covered under McKesson’s U.S. Government Pharmaceutical Distribution Contracts, including with the Department of Veteran Affairs and the Defense Logistics Agency.
- A. *Incorporation of Clauses.* The following clauses are deemed to be incorporated in the Commercial Agreement(s) by reference and with respect to the rights, duties, and obligations of McKesson and Supplier thereunder, shall be interpreted and construed in such a manner as to recognize and give effect to: (i) the contractual relationship between McKesson and Supplier under the Commercial Agreement(s); and (ii) the rights of the Federal Government with respect thereto under the Pharmaceutical Distribution Contracts between McKesson and the Federal Government. Unless otherwise specifically stated in the clauses referenced below, the terms: (i) “Contractor” shall mean Supplier (except in the term “prime contractor,” which shall mean McKesson), (ii) “subcontractor” shall mean Supplier’s subcontractor (if any), (iii) “Contract” shall mean the Commercial Agreement(s) (except in the term “prime contract,” which

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shall retain its original meaning), (iv) “Contracting Officer” shall mean McKesson’s authorized contract representative, and (v) “Government” shall mean McKesson or as otherwise indicated:

Citation	Title	Reference Date
FAR § 52.203-13	“Contractor Code of Business Ethics and Conduct”	Apr 2010
FAR § 52.203-17	“Contractor Employee Whistleblower Rights of Requirement to Inform Employees of Whistleblower Rights”	April 2014
FAR § 52.203-19	“Prohibition on Requiring Certain Internal Confidentiality Agreements or Statements”	Jan 2017
FAR § 52.219-8	“Utilization of Small Business Concerns”	Oct 2014
FAR § 52-222-21	“Prohibition of Segregated Facilities”	Apr 2015
FAR § 52-222-26	“Equal Opportunity”	Apr 2015
FAR § 52.222-35	“Equal Opportunity for Veterans”	Jul 2014
FAR § 52.222-36	“Equal Opportunity for Workers with Disabilities”	Jul 2014
FAR § 52.222-37	“Employment Reports on Veterans”	Feb 2016
FAR § 52.222-40	“Notification of Employee Rights Under the National Labor Relations Act”	Dec 2010
FAR § 52.222-50	“Combating Trafficking in Persons”	Feb 2009
FAR § 52.225-6	“Trade Agreements Act Certificate”	May 2014
FAR § 52.247-64	“Preference for Privately Owned U.S.-Flag Commercial Vessels”	Feb 2006
DFARS § 252.203-7002	“Requirements to Inform Employees of Whistleblower Rights”	Jan 2009
DFARS § 252.227-7015	“Technical Data – Commercial Items”	Feb 2014

- B. *Trade Agreements Act.* Supplier understands that all Products offered for sale to the United States Government under a Commercial Agreement are subject to the TAA. Supplier agrees to provide TAA certifications and related information applicable to Products through McKesson’s TAA certification portal as established and maintained by McKesson or in another manner mutually agreed to by McKesson and Supplier. If Supplier is not the actual manufacturer of a Product supplied to McKesson, Supplier certifies that it has appropriate information on file from the manufacturer of the Product to support the TAA certification provided to McKesson.
- C. *No Discrimination.* The following clause is incorporated by full-text: **McKesson and Supplier each agree to abide by the requirements of 41 CFR §§ 60-1.4(a), 60-300.5(a) and 60-741.5(a). These regulations prohibit discrimination against qualified individuals based on their status as protected veterans or individuals with disabilities, and prohibit discrimination against all individuals based on their race, color, religion, sex, sexual orientation, gender identity, or national origin. Moreover, these regulations require that covered prime contractors and subcontractors take affirmative action to employ and advance in employment individuals without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, protected veteran status or disability.**

5. Indemnification

- A. *By Supplier.* Supplier shall indemnify and hold harmless McKesson and its respective Affiliates and each of their respective directors, officers, employees and agents from and against all Claims relating to Supplier’s rights or obligations under the STCs and any other transaction contemplated by or relating to the STCs or any Commercial Agreement, that may directly or indirectly arise out of, relate to, or result from the alleged: (i) negligence or willful or wrongful acts or omissions of Supplier, (ii) breach by Supplier of any of its representations, warranties, or covenants under the STCs or any Commercial Agreement, (iii) failure of Supplier to comply with Applicable Laws, (iv) injury to a person resulting from the purchase, use, consumption or recall of any Product, whether or not involving a defect in a Product, its labeling or packaging, or (v) infringement by the Product or its packaging of the patent, copyright, trademark, trade secret or other intellectual property of any other person or entity; except to the extent such Claims

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described in (i) through (v) arise directly or indirectly as a result of any of the matters for which McKesson is providing indemnification pursuant to Section 5.B.

- B. *By McKesson.* McKesson shall indemnify, defend and hold harmless Supplier and its Affiliates and each of their respective directors, officers, employees, and agents from and against all Claims relating to McKesson's rights or obligations under the STCs and any other transactions contemplated by or relating to the STCs or any Commercial Agreement, that may directly or indirectly arise out of, relate to, or result from the alleged: (i) negligence or willful or wrongful acts or omissions of McKesson, (ii) breach by McKesson of any of its representations, warranties or covenants under the STCs, or (iii) failure of McKesson to comply with Applicable Laws; except to the extent such Claims described in (i) through (iii) arise as a result of any of the matters for which Supplier is providing indemnification pursuant to Section 5.A.
- C. *Procedures.* The Party claiming indemnification under this Section 5 (each an "Indemnified Party") shall promptly provide Notice to the Party from which indemnification is being sought (the "Indemnifying Party") in writing, of any Claim for which indemnity may be sought and will thereafter keep such Indemnifying Party reasonably informed with respect thereto, provided that failure to give Indemnifying Party prompt Notice as provided herein shall not relieve the Indemnifying Party of its obligations hereunder except to the extent, if any, it shall have been prejudiced thereby. The Indemnified Party shall fully cooperate with the Indemnifying Party and shall permit the Indemnifying Party to conduct and control the defense and disposition of such Claims, provided however, that the Indemnifying Party shall not admit fault on behalf of the Indemnified Party without Indemnified Party's prior written consent. The Indemnifying Party shall promptly assume, at its cost and expense, the sole defense of such Claim through counsel selected by the Indemnifying Party and reasonably acceptable to the Indemnified Party, provided that in the event that the Indemnifying Party does not assume the defense on a timely basis or reasonably maintain the defense, then, without prejudice to any other rights and remedies available to the Indemnified Party under the STCs or any Commercial Agreement the Indemnified Party may take over such defense with counsel of its choosing at the Indemnifying Party's cost and expense. Notwithstanding that the Indemnified Party takes over such defense with counsel of its own choosing, the Indemnifying Party shall not be precluded from participating in the defense with counsel of its own choosing and at its own cost. If the Indemnifying Party assumes the defense of any Claim as provided in this Section 5, the Indemnified Party shall provide reasonable assistance to the Indemnifying Party in its efforts to investigate and defend the Claim, including providing reasonable access to such documentary evidence and witnesses as are available to the Indemnified Party. In the event that a conflict of interest arises that, under applicable principles of legal ethics prevents a single legal counsel from representing both the Indemnifying Party and the Indemnified Party, the Indemnified Party may take over its defense with counsel of its choosing at the Indemnifying Party's cost and expense. Neither Party shall, without the written consent of the other Party: (i) settle or compromise any Claim without including an unconditional release with respect to all liability under such Claim, or consent to the entry of any judgment which does not include a dismissal with prejudice of the Indemnified Party and Indemnifying Party; (ii) settle or compromise any Claim in any manner that may adversely affect the other Party other than as a result of money damages or other monetary payments; or (iii) settle or compromise any Claim in any manner that includes an admission of fault or liability on the part of the other Party.
- 6. Limitation of Liability.** EXCEPT WITH RESPECT TO INDEMNIFICATION OBLIGATIONS UNDER THE STCS OR ANY OTHER COMMERCIAL AGREEMENT BETWEEN THE PARTIES, UNDER NO CIRCUMSTANCES SHALL EITHER PARTY HERETO BE LIABLE TO THE OTHER FOR ANY: (i) LOST PROFITS; (ii) LOSS OF PROSPECTIVE COMPENSATION OR UNJUST ENRICHMENT; (iii) GOODWILL OR LOSS THEREOF; OR (iv) CONSEQUENTIAL, SPECIAL, PUNITIVE OR EXEMPLARY DAMAGES OF ANY KIND OR CHARACTER, WHETHER ARISING IN TORT, CONTRACT, INDEMNITY, STRICT LIABILITY OR ANY OTHER THEORY OF RECOVERY.
- 7. Divested Products.**
- A. *No Assignment Without Consent.* Supplier will not attempt to assign or transfer any rights or obligations related to these STCs or any a Commercial Agreement or any interest therein in connection with the sale or transfer of the rights to manufacture or sell one or more Products covered by such STCs or Commercial

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Agreement (a “Divested Product”), to any other supplier nor will Supplier enter into an agreement by which, Supplier or its Affiliate, will become the transferee or assignee of any rights or obligations related to a commercial agreement pertaining to a Divested Product between McKesson and another supplier without McKesson’s prior written consent.

- B. *Conditions.* If McKesson provides its written consent to the assignment or transfer of a right or obligation pursuant to these STCs or any Commercial Agreement in connection with a Divested Product, unless waived in writing by McKesson, such assignment or transfer will be conditioned on the assignee or transferee assuming all obligations and liabilities associated with a Divested Product, including indemnification and insurance, which accrued or were in effect prior to and following the transfer or assignment of the Divested Products. Such obligations and liabilities include:
- (1) Pricing and Chargebacks – Product contract pricing and all chargebacks related thereto shall be in accordance with the contract pricing and customer eligibility as in effect on the date of sale by McKesson to its customer and assignee or transferee assumes all obligations associated therewith;
 - (2) Returns – McKesson will be entitled to return any Divested Product purchased by McKesson prior to the transfer or assignment of the Divested Product, on the same terms and conditions as were in effect at the time of purchase.
 - (3) Fees and Payment Terms – If the Divested Product entitled McKesson to a more beneficial fee for service or payment terms, such terms shall remain in effect until March 31st of the year following the assignment or transfer of the Divested Product. Thereafter, such Divested Products will be subject to the applicable service fees and payment terms as set forth in any applicable Commercial Agreement.

8. Confidentiality.

- A. *Permitted Use and Disclosure.* A Party receiving another Party’s Confidential Information in connection with the Commercial Relationship shall only use and disclose such Confidential Information to the extent necessary to perform its obligations in furtherance of the Commercial Agreement. The receiving Party shall use the same degree of care in protecting the disclosing Party’s Confidential Information from unauthorized use, disclosure, or dissemination as the receiving Party uses with respect to its own information of like importance, but no less than a commercially reasonable degree of care. The receiving Party may disclose the disclosing Party’s Confidential Information to the receiving Party’s Affiliates and its and their employees, contractors, advisors, representatives and agents who require access to such Confidential Information in order to fulfill the receiving Party’s obligations under a Commercial Agreement, or as required by the receiving Party’s internal policies and procedures, provided that, in each case, the receiving Party shall cause its Affiliates, employees, contractors, advisors, representatives and agents who or that are receiving access to and/or who observe disclosing Party’s Confidential Information to be bound by confidentiality obligations and non-use restrictions that are no less restrictive than those set forth in this Section 8. Each receiving party shall be liable for any breach of this Section 8.A by such Party’s employees, contractors, representatives and/or agents.
- B. *Confidential Information.* For purposes of this Section 8 “Confidential Information” means: (i) with respect to Supplier, confidential or proprietary information relating to manufacturing of a Product, including active Product ingredients related thereto, contract pricing terms, or information relating to new Product launches or expected supply constraints which are disclosed to McKesson confidentially, and (ii) with respect to McKesson, the terms of the STCs and any Commercial Agreement, any information disclosed to Supplier which relates to McKesson’s demand requirements of Products, the historical sales of such Products to McKesson, any inventory related information of Products held by McKesson, any McKesson contract pricing related pricing information, any business plans, market data, and marketing plans, disclosed confidentially to Supplier, and, any information and reports relating to sales by McKesson to its customers.
- C. *Excluded Information; Legally Compelled Disclosure.* The provisions of this Section 8 shall not apply to information that: (i) after disclosure, becomes available to the public by publication or otherwise, other

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than by breach of the STCs or any Commercial Agreement by the receiving Party; (ii) the receiving Party can establish by prior written record was already known to it or was in its possession without confidentiality obligations to the disclosing Party at the time of disclosure and was not acquired, directly or indirectly, from the other Party or such Party's Affiliates; or (ii) the receiving Party obtains from a third party, provided that such information was not obtained by such third party, directly or indirectly, from the receiving Party, such Party's Affiliates or any other third party under an obligation of confidentiality (iv) was or is later independently developed by the receiving Party without the aid, application or use of the Confidential Information (and such independent development can be properly demonstrated by the receiving Party); or (v) was required disclosure in connection with Section 8 hereof. If a receiving Party is legally required (by oral questions, interrogatories, requests for information or documents, subpoena, civil investigation demand or similar process) to disclose any Confidential Information of a disclosing Party, the receiving Party shall provide prompt Notice, to the extent legally permissible, to the disclosing Party of such request in advance of any such disclosure and shall cooperate with the disclosing Party in seeking to obtain a protective order with respect to such information and thereafter the receiving Party shall disclose only the minimum information, in the reasonable opinion of its legal counsel, required to be disclosed in order to comply, whether or not a protective order or other similar order is obtained by the disclosing Party. Any Confidential Information so disclosed shall maintain its confidentiality protection and non-use restrictions for all purposes other than such legally compelled disclosure.

- D. *Return or Destruction of Confidential Information.* Upon written request of the disclosing Party, the receiving Party shall return promptly to the disclosing Party or destroy any of the disclosing Party's Confidential Information then in the possession of receiving Party and all copies or reproductions thereof and the receiving Party shall make no further use of such information. Any such destruction shall be certified in writing to the disclosing party by an authorized officer of the receiving Party who supervises such destruction. Notwithstanding the foregoing, the receiving Party may retain one (1) copy of the Confidential Information of the disclosing Party for legal archive purposes and such copy shall remain subject to the provisions of this Section 8 and the receiving Party shall not be required to destroy any computer files stored securely by the receiving Party that are created during automatic system back-up.
- E. *Injunctive Relief.* The Parties agree that neither may be adequately compensated by any form of monetary damages if the other breaches or threatens to breach any of the foregoing provisions set forth in this Section 8 and, therefore, each Party agrees that the other shall be entitled, without payment of a bond, to seek in any court of competent jurisdiction an injunction restraining such breach or any other available and appropriate equitable relief in addition to, and without limiting, any other remedies that may be available to the non-breaching Party.
- F. *Survival.* The foregoing provisions shall survive expiration or termination of the Commercial Agreement for so long as the information disclosed by a Party remains Confidential Information.

9. Termination of Commercial Relationship.**A. Termination for Breach.**

- (1) Notwithstanding anything to the contrary, either McKesson or Supplier may terminate the Commercial Relationship in the event of a material breach by the other Party of any material obligation of a Commercial Agreement or these STCs on thirty (30) days' prior written notice, specifying the nature of the breach, unless such breaching Party shall cure such default within such thirty (30) day period.
- (2) Notwithstanding the provisions of Section 9.A(1), either McKesson or Supplier may terminate the Commercial Relationship immediately upon written notice to the other upon the occurrence of any of the following to or by the other Party:
 - (a) a transfer or assignment of a Commercial Agreement without the prior written consent of the non-transferring Party; or
 - (b) the Insolvency of the other Party; provided, however, that the Party which is not subject to Insolvency may waive such termination right in writing.

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- B. *Rights of Parties on Termination.* In connection with the termination of the Commercial Relationship the Parties shall cooperate to prepare a reasonably detailed, written transition and wind-down plan to coordinate an orderly cessation of the activities provided for under a Commercial Agreement or these STCs; provided, however, that the termination of the Commercial Relationship for any reason shall not affect any obligations accrued or amounts owed hereunder before the date of such termination and other than with respect to matters in dispute, all indebtedness of the Parties to each other shall become immediately due and payable without further notice or demand.
 - C. *Survival.* The provisions of the STCs and any Commercial Agreement which by their nature are intended to survive the termination of the Commercial Relationship shall continue as valid and enforceable obligations of the Parties notwithstanding any such termination.
- 10. No Expectation of Sales.** These STCs do not constitute an order and only orders issued pursuant to a McKesson purchase order shall bind McKesson. Supplier acknowledges and agrees that any purchase by McKesson pursuant to a Commercial Agreement does not in any way constitute a promise, commitment or guarantee by McKesson to continue to purchase or distribute any Products from Supplier and Supplier disclaims any expectation of sales to or by McKesson. Supplier acknowledges and agrees that notwithstanding anything to the contrary herein, McKesson is under no obligation to place orders for Products with Supplier and McKesson may, at any time and from time to time, elect, in its sole discretion, to suspend its ordering activity. Supplier further acknowledges and agrees that nothing herein implies in any way that the Supplier will be the exclusive supplier to McKesson or to any of McKesson's customers.
- 11. Forecasts.** Product quantities provided by McKesson, or on McKesson's behalf, to Supplier pursuant to a Commercial Agreement, or otherwise, are forecasts for expected demand and such forecasts do not constitute a commitment by McKesson to purchase or distribute any specific quantity of Products from Supplier.
- 12. Other Miscellaneous.**
- A. *Governing Law.* The STCs and any Commercial Agreement and any and all disputes arising hereunder or relating hereto, whether sounding in contract or tort, shall be governed by and construed in accordance with the laws of the State of Delaware, without regard to the internal law of Delaware regarding conflicts of law.
 - B. *Exclusive Venue.* EACH OF THE PARTIES HEREBY AGREES THAT ANY ACTION REFERRED TO JUDICIAL PROCESS UNDER OR RELATING TO A COMMERCIAL AGREEMENT SHALL BE INSTITUTED IN THE STATE OR FEDERAL COURTS THEN SITTING IN NEW CASTLE COUNTY IN THE STATE OF DELAWARE AND IN NO OTHER FORUM AND EACH OF THE PARTIES HEREBY IRREVOCABLY CONSENTS TO SUCH JURISDICTION AND IRREVOCABLY WAIVES ANY OBJECTIONS, INCLUDING, WITHOUT LIMITATION, ANY OBJECTION TO THE LAYING OF VENUE BASED ON THE GROUNDS OF FORUM NON CONVENIENS, WHICH IT MAY NOW OR HEREAFTER HAVE TO THE BRINGING OF ANY SUCH ACTION OR PROCEEDING IN SUCH RESPECTIVE JURISDICTIONS. THE FOREGOING IS WITHOUT PREJUDICE TO THE RIGHT OF ANY PREVAILING PARTY TO SEEK ENFORCEMENT OF ANY JUDGMENT RENDERED IN A COURT IN ANY JURISDICTION WHERE THE LOSING PARTY OR ITS PROPERTY MAY BE LOCATED.
 - C. *No-Assignment.* Supplier may not assign any rights or obligations under the STCs or any Commercial Agreement nor any interest therein without prior written consent of McKesson, which consent shall not be unreasonably withheld; provided, however, that Supplier may transfer and assign any rights or obligations under the STCs or any Commercial Agreement without McKesson's consent to Supplier's Affiliate or to an entity that acquires substantially all of the Supplier's stock or assets if any such assignee agrees, in writing, to be bound by the terms of the STCs and any applicable Commercial Agreement.
 - D. *No Waiver.* The failure of either Party to enforce at any time or for any period of time any one or more of the provisions hereof shall not be construed to be a waiver of such provisions or of the right of such Party thereafter to enforce each such provision.
 - E. *Independent Contractors.* The Parties are independent contractors. Accordingly, the Commercial Relationship does not constitute a partnership or other joint venture between McKesson and Supplier, and neither Party shall be deemed to be an agent or representative of the other except as set forth herein.

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- F. *Force Majeure*. Except for the obligation to pay money, neither Party will be liable to the other Party for any failure or delay in performance caused by reasons beyond such Party’s reasonable control, including but not limited to acts of God, war, riot, acts of terrorism, fire, shortage of materials or transportation, strikes or acts of civil or military authorities, provided such Party gives prompt written notice thereof to the other party.
- G. *Interpretation*. For the purposes of interpreting and construing the STCs, unless the context indicates otherwise:
 - (1) the word “including” means including without limitation;
 - (2) references to sections and schedules are, unless the context otherwise requires, references to sections of and schedules to the STCs;
 - (3) any reference to a statute, regulation or other legal instrument having the force of law shall be construed as a reference to such statute, regulation or other legal instrument having the force of law as the same may have been, or may from time to time be, amended or re-enacted;
 - (4) words in the singular case shall be construed to include the plural;
 - (5) provisions including the word “agree”, “agreed”, “agreement” or “consent” require the agreement or consent to be in writing and signed by the agreeing parties; and
 - (6) any reference to Supplier’s “products” shall have the same meaning as Products (as defined herein).
- H. *Severability*. If any provision of the STCs or any Commercial Agreement is held by a court of competent jurisdiction to be invalid, prohibited or unenforceable for any reason, such provision shall be more narrowly construed to the extent necessary to render it enforceable.
- I. *Notifications and Notice*.
 - (1) Any “notification” or obligation to “notify” required by Supplier or McKesson may be through electronic means including by email to an email address that the Party sending the notification knows is the correct address or by submission through the McKesson Supplier Portal, provided, that the McKesson Supplier Portal contains the functionality to support such submission.
 - (2) All “Notices” pertaining to the STCs or any Commercial Agreement shall be in writing and will be delivered in person, sent by certified mail, delivered by air courier to a Party at the address shown (i) for McKesson, hereunder, or (ii) for Supplier, the address set forth in the acknowledgment to these STCs or in another Commercial Agreement, or such other address as a Party may notify the other Party from time to time. Notices delivered in person prior to 4:00 PM, recipient’s local time on a Business Day, shall be deemed received on such day. All other Notices shall be deemed to have been received on the Business Day following actual receipt thereof. Notices may also be transmitted electronically between the Parties provided, that proper arrangements are made in advance to facilitate such communications and provide for their security and verification.

Address for Notice:	McKesson Corporation 6555 State Highway 161 Irving, TX 75037 Attn: SVP and CFO, U.S. Pharmaceutical
With a copy (which does not constitute Notice) to:	McKesson Corporation One Post Street, 32 nd Floor San Francisco, CA 94104 Attn: Law Department, U.S. Pharmaceutical, Manufacturer Relations

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SCHEDULE M – Master Data, Information and Data Requirements
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1. Electronic Data Interchange (EDI) Capabilities

- A. *EDI Compliance Policy.* Except as otherwise agreed to in writing by McKesson, Supplier will transact with McKesson using the EDI transaction sets listed in the table below, in adherence with all applicable Healthcare Distribution Alliance (“HDA”) EDI standards and data requirements using version 4010 and in accordance with any additional requirements set forth in the STCs. Transactions that do not adhere to these EDI requirements may be subject to separate processing fees and charges as set forth in Schedule F (Standard Fees).

Transaction Sets	Description	Version
810	Invoice	4010 X12
812	Credit/Debit Adjustments	4010 X12
844	Chargeback	4010 X12
845	Bid Awards	4010 X12
849	Chargeback Reconciliation	4010 X12
850	Purchase Order	4010 X12
852	Product Activity Data	4010 X12
855	Purchase Order Acknowledgement	4010 X12
856	Advance Shipment Notification	4010 X12
867	Product Transfer and Resale Report	4010 X12

- B. *EDI Requirement Waivers.* McKesson’s contract management group may exempt Supplier from one or more of the EDI requirements and agree on an alternative means for transmitting transactional data. Waivers to such requirements may still be subject to additional processing fees and charges as set forth in Schedule F (Standard Fees).
- C. *Third-Party Vendors.* To the extent that Supplier uses a third-party vendor for the receiving or transmission of EDI (e.g. an EDI processor or value-added network (“VAN”) provider): (i) any expense associated with using such third-party vendor will be borne solely by Supplier, (ii) Supplier will ensure that the third-party vendor complies with McKesson’s applicable EDI requirements, and (iii) Supplier will be responsible for any errors or omissions by the third-party vendor.

2. Master Data and Product Information

- A. *New Product Information.* Supplier will submit to McKesson a completed HDA Standard Pharmaceutical Product Information form for all new pharmaceutical products and McKesson product information form for all non-pharmaceutical products that Supplier requests be distributed by McKesson. Supplier represents, warrants and promises that all product information provided by Supplier to McKesson pursuant to this Section 2.A will be accurate and complete at all times.
- B. *Product Changes.* Supplier will provide McKesson’s product manager responsible for Supplier’s products with prompt written notification in the event of any non-pricing related changes in product information and Supplier will submit to McKesson updated forms required by Section 2.A at least two (2) Business Days prior to the intended effective date of such change(s) thereof. Supplier will not ship any products to McKesson that require a national drug code (“NDC”) or item number change without prior approval from McKesson.
- C. *Product Acquisition, Divestiture or Discontinuation.* Supplier will provide McKesson’s product manager responsible for Supplier’s products with prompt written notification of the acquisition or divestiture of any product line or discontinuation of any product.

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- D. *Transportation, Handling or Storage Requirements.* To the extent not already included in the applicable product form provided by Supplier to McKesson in accordance with Sections 2.A or 2.B (above) or Section 3 (below), as applicable, Supplier will notify McKesson in writing of necessary transportation, special-handling instructions (for example, in the case of hazardous materials) or storage requirements.
- E. *Non-Compliance.* Any products shipped by Supplier to McKesson in violation of these requirements may be rejected by McKesson and returned to Supplier at Supplier's expense and Supplier may be assessed a service charge in connection therewith as set forth in Schedule F (Standard Fees). If McKesson agrees to accept the shipment, McKesson's obligation to pay invoices in connection with products shipped by Supplier to McKesson in violation of these requirements will be suspended until such violation is rectified by Supplier.
- 3. Hazardous Items and Materials.** For any product sold to McKesson that is classified under applicable regulation as "hazardous material" Supplier will provide McKesson with (i) a Safety Data Sheet (SDS) for each product regulated by the Occupational Safety & Health Administration, Environmental Protection Agency, Department of Transportation, IATA, or IMDG and submit the SDS form(s) to the McKesson product manager at the time that Supplier provides information to McKesson for product load, and (ii) detailed information for all modes of transport relating to such product including highway, air, water, and rail movements. If requested, Supplier will promptly provide McKesson with a statement of SDS exemption indicating that a product is not classified under applicable regulation as "hazardous material" or is otherwise exempt pursuant to applicable regulation.
- 4. REMS Products.** Supplier will provide McKesson with prompt written notification in the event that the FDA determines that a Supplier's product (a "REMS Product") is required to be distributed only to approved healthcare providers pursuant to a Risk Evaluation and Mitigation Strategy program ("REMS Program") or has other distribution requirements, including without limitation, the distribution of a medication guide. Supplier is solely responsible for maintaining a current and accurate registry of approved healthcare providers for a REMS Program ("REMS Registry") in compliance with FDA requirements. Supplier will promptly notify McKesson in writing and through an electronic data file format acceptable to McKesson of the addition or removal of any healthcare provider from the REMS Registry. McKesson will only fulfill orders for a REMS Product submitted by customers who are listed in the applicable REMS Registry. REMS Products will be subject to additional initial setup and annual maintenance service fees based on McKesson's then current fee rates for such services.
- 5. Definitions.** Capitalized terms that are not defined herein shall have the meanings ascribed to such terms in other Schedules of the STCs.

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SCHEDULE O – Orders, Fulfillment and Shipping Requirements
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1. Orders.

- A. *Purchase Orders and Acknowledgements.* Supplier will maintain effective order management capabilities and fill McKesson's orders in a timely and efficient manner. Unless otherwise agreed to by Supplier and McKesson, all orders will be submitted by McKesson utilizing the EDI 850 Purchase Order transaction set and will be acknowledged and confirmed by Supplier utilizing the EDI 855 Purchase Order Acknowledgement transaction set.
- B. *Notifications and Order Modifications.* Supplier will promptly notify the applicable McKesson representative, no later than three (3) Business Days following order submission, if Supplier identifies any errors or omissions in the order or if there are any other circumstances which prevent Supplier from fulfilling and shipping the order in accordance with the requirements set forth in such order and in this Schedule. The McKesson representative may in consultation with Supplier: (i) re-issue the order to correct any error or omission or make other changes reasonably required by Supplier relating to such order, or (ii) if applicable, authorize a modification or deviation from the requirements as to the item number/NDC of the product, product quantities, dating requirements, or required delivery date of a product included in the order.
- C. *Drop Ship Orders.* McKesson may submit orders to Supplier for products ordered by McKesson customers which are not ordinarily stocked at McKesson distribution centers. McKesson customers who desire to order a designated drop ship product through McKesson will be required to order such products from McKesson in the ordinary course of business. If a McKesson customer contacts Supplier about a designated drop ship order, Supplier will direct such customer to McKesson. McKesson will not be responsible for orders placed by McKesson customers directly with Supplier, unless such direct order is specifically authorized by McKesson and McKesson has provided Supplier with a McKesson issued purchase order number for such drop ship order. Supplier will ensure that drop ship orders comply with all regulatory requirements, and without limiting the foregoing, Supplier will provide the drop ship customer all information required by, and in accordance with, the DSCSA implementing regulations, and applicable state laws, as each may be amended from time to time, and will transmit complete and accurate advance shipping notifications ("ASN"). All other requirements relating to product orders set forth herein shall apply to drop ship orders, including, without limitation, that the drop ship order be delivered in full to the McKesson customer ship-to location by the required delivery date included in the order.
- D. *Supply Constraints and Allocations.* If a product which McKesson orders from Supplier is, or is reasonably expected to be, on allocation for any reason, including without limitation, due to supply shortage, back-order or Drug Enforcement Administration quota restrictions, Supplier will notify McKesson immediately in writing of such allocation, and such notification will identify the allocated product, the expected duration of the supply constraint, and the quantity of product that will be allocated to McKesson in accordance with a fair share pro rata allocation. Such fair share pro rata allocation will be based on the total units of the allocated product supplied by Supplier to McKesson during the ninety (90) day period prior to such allocation, relative to the total volume of such products sold by Supplier in the United States during the same ninety (90) day period. Supplier will take all actions reasonably necessary to supply McKesson on a continuous basis with its fair share pro rata allocation, including, without limitation, by sequestering such allocated product solely for McKesson. Supplier will update McKesson, no less than on a weekly basis, of the status of any supply constraints impacting products which Supplier orders from McKesson.
- E. *Backorders.* Supplier will notify McKesson in accordance with Section 1.B (above) if a product ordered by McKesson is on backorder. Unless McKesson cancels, modifies or re-issues an order relating to a product on backorder, or as may otherwise be agreed to by McKesson and Supplier, such order will remain open until the earlier of (i) when it is filled in its entirety, or (ii) for a period of thirty (30) days from date of order submission for generic prescription products, or sixty (60) days from date of order submission for all other products, including, brand prescription and over the counter (OTC) products.

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2. Order Fulfillment Requirements.

- A. *Substitutions.* Orders for a product will include the applicable item number, Universal Product Code (UPC) or NDC that is maintained for such product based on the product information provided by Supplier to McKesson in accordance with Schedule M (Master Data, Information and Data Requirements). Unless otherwise agreed to in writing by a McKesson representative (which writing may be by email), Supplier will not substitute a product ordered with a product that has an item number, UPC or NDC, as applicable, that varies in any way from the information included in the order.
- B. *Product Dating.* Supplier shall obtain written permission from a McKesson representative (which writing may be by email) prior to shipping any Product that does not hold at least twelve (12) months shelf life to expiration, unless such Product is manufactured with a shorter shelf life, and Supplier has notified McKesson in writing of such shorter shelf life. Any Product delivered with less than the required shelf life is subject to refusal or return to Supplier, at Supplier's expense.
- C. *Supplier Guarantee.*
- (1) Supplier guarantees as to all products sold to McKesson or on behalf of a McKesson account to the following:
- a. That no product constituting, or being part of, any shipment or other delivery now or hereafter made to McKesson or on McKesson's order by Supplier will be adulterated or misbranded within the meaning of the FDCA, or within the meaning of any applicable state or municipal law in which the definitions of adulteration and misbranding are substantially the same as those contained in the FDCA, or will be an article which may not, under the provisions of Sections 404 or 505 of the FDCA, be introduced into interstate commerce;
 - b. That no product comprising or being part of any shipment or other delivery now or hereafter made to McKesson or on McKesson's order by Supplier will be (i) an article that was originally distributed as a sample not intended for resale; (ii) an article that has been obtained from or through persons not lawfully entitled to receive, possess, distribute or resell same; or (iii) an article that has been recalled, altered, relabeled or repackaged since its initial shipment from the manufacturer or supplier thereof;
 - c. That each product comprising or being part of any shipment or other delivery now or hereafter made to McKesson or on McKesson's order by Supplier will be manufactured, sold, classified, described, packaged, marked, labeled or shipped in accordance with, and shall conform to, all applicable standards and requirements and related statutes of all applicable laws, including, without limitation, the Prescription Drug Marketing Act, the Federal Consumer Products Safety Act, the Federal Hazardous Substances Labeling Act, the Federal Insecticide, Fungicide and Rodenticide Act, the Flammable Fabrics Act, the Fair Labor Standards Act of 1938, the Explosive and Combustible Act of 1960 (U.S. Code, Title 18, Sections 831-835), the Transportation Safety Act of 1974 (P.L. 93-633), the Code of Federal Regulations Title 49 parts 170-179, the International Air Transportation Association, the International Maritime Dangerous Goods Code, the Resource Conservation and Recovery Act, the Civil Rights Act of 1964, Executive Orders relative to equal employment opportunity, the Fair Packaging and Labeling Act, the Occupational Safety and Health Act of 1970, the applicable regulations issued by U.S. Customs and Border Protection requiring imported products be marked with a country of origin marking, and the guidance issued and policy statements made by the U.S. Federal Trade Commission relating to the marking of finished products, as any of same have been or are amended, or any rule or regulation promulgated under any of these above-specified laws;
 - d. That Supplier shall create, maintain and transmit in electronic form all records, manifests and other documentation necessary to evidence the pedigree, serialization, identification and traceability as required by state and federal law and regulation, including the DSCSA and Drug Quality and Security Act, and that Supplier's product bar code labels are in accordance with and conform to the FDA's Code of Federal Regulations, Guidance for Industry and 21 Code of Federal

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Regulations 201.25 with respect to any products purchased by McKesson or on McKesson's account from Supplier, including without limitation, any such purchases drop shipped by Supplier or its agent directly to a customer of McKesson;

- e. That Supplier and any agent acting on behalf of Supplier shall be validly licensed to manufacture, sell, package, ship, receive, store, handle, deliver, distribute or otherwise transfer products shipped or delivered to McKesson or on McKesson's order by Supplier, in accordance with, and in the manner prescribed by, all applicable standards and requirements of federal and state law, as applicable, as such laws have been or are amended, and any rules or regulations promulgated thereunder. Upon request by McKesson, Supplier and any agent acting on behalf of Supplier shall provide proof of licensure as required by applicable laws and regulations;
- f. That each product comprising or being part of any shipment or other delivery now or hereafter made to McKesson or on McKesson's order by Supplier either (i) may be sold by McKesson for use by California consumers without a warning required by California Health & Safety Code sections 25249.5 et seq. ("Proposition 65"); or (ii) is labeled with or accompanied by a valid Proposition 65 warning;
- g. That neither Supplier nor any of its affiliates, agents, representatives, joint venturers, officers, directors, employees or contractors involved in the manufacture, sale or distribution of products to McKesson: (i) have been convicted of a criminal offense related to healthcare; (ii) are currently excluded, suspended or debarred from participating in any federal healthcare program; (iii) are under investigation (civil or criminal) by any federal or state enforcement, regulatory, administrative or licensing agency; or (iv) are currently listed on the General Services Administration List of Parties Excluded from the Federal Procurement and Non-Procurement Programs;
- h. Supplier and any agent acting on behalf of Supplier shall comply with all provisions of constitutions, statutes, rules, codes, regulations, permits, consents, approvals or agreements of governmental bodies or regulatory agencies and all orders, consents and decrees of all courts and arbitrators in applicable proceedings or actions, including any associated regulations, guidance and other requirements, now or hereafter in force or in effect, in each case, applicable to the sale of products by Supplier to McKesson;
- i. Supplier holds and shall continue to hold the unencumbered right to distribute, sell and market products in the fifty (50) states of the United States of America and its territories, commonwealths, possessions and associated states, including the District of Columbia and the Commonwealth of Puerto Rico; and
- j. Products sold to McKesson shall not infringe on or violate any third party's intellectual property right, including, without limitation, patent, copyright, trademark, trade dress, trade secret or other exclusive right.

(2) The above guarantees shall be continuing and shall be binding upon Supplier with respect to all products shipped or delivered to McKesson or on McKesson's order by Supplier or Supplier's agent.

3. Shipping and Delivery Requirements.

- A. *Shipping Terms.* Unless otherwise agreed to in writing by McKesson and Supplier, all products shall be delivered F.O.B. (UCC) Destination at the ship-to location specified in the applicable order. Clear unencumbered title and risk of loss to the products shall pass to McKesson upon acceptance of delivery by McKesson and following receipt by McKesson of all required DSCSA transactional information, subject to McKesson's right to return any non-conforming shipment, or portion thereof, in accordance with this Section 3 and Schedule R (Returns). The cost of freight and any related insurance for products shipped by Supplier or returned to Supplier due to non-conformance is the sole responsibility of Supplier.
- B. *Advanced Shipment Notifications.* Unless otherwise agreed to by Supplier and McKesson, Supplier will transmit to McKesson ASNs using the EDI 856 Advance Shipment Notification transaction set. Supplier

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will ensure that the item number, UPC or NDC, as applicable, included in the ASN matches the item number, UPC or NDC, as applicable, included in the order submitted by McKesson.

- C. *Deliveries.* Supplier will ensure that its carrier will deliver product shipments to each McKesson distribution center (each a “DC”) during each DC’s regular receiving days and hours in compliance with posted safety requirements and any reasonable instructions given by McKesson receiving representatives. For any DC that requires advanced scheduling prior to delivery, Supplier will ensure that its carrier schedules deliveries, as required. If a delivery is expected to be late, Supplier or its carrier, will promptly notify the applicable McKesson representative by phone or email of such delay. If a DC agrees to receive a late delivery outside of its regular receiving hours, such late delivery may be subject to an additional late receiving fee as set forth in Schedule F (Standard Fees).
- D. *Documentation, Packaging and Labeling.* Supplier’s shipments shall comply with each of the following requirements:
- (1) All shipping documents must reference the McKesson order number included on the order submitted by McKesson and each bill of lading must be GS1 compliant and match the ASN for the shipment.
 - (2) Each case of product must include products from the same manufacture batch and lot.
 - (3) If Supplier ships multiple orders on the same shipping pallet, the pallet will be clearly and conspicuously identified as containing multiple orders and each order and separate product will be appropriately segmented (using slip sheets). Each pallet, and each case loaded on each separate pallet, must be properly labelled with a GS1 compliant label. Any relabeling by McKesson due to Supplier’s non-compliance with these requirements may be subject to an additional relabeling fee as set forth in Schedule F (Standard Fees).
 - (4) Supplier will comply with any additional McKesson packaging and operational requirements for each DC, including without limitation, any pallet size and type requirements, or restrictions on shipping partial cases.
- E. *Unloading, Sorting and Segregation.* Unless McKesson has a separate arrangement with a carrier used by Supplier whereby such carrier is responsible only for unloading a shipment at a DC, Supplier will ensure that its carrier will, without any additional charge to McKesson, unload deliveries in a safe and efficient manner, and sort and segregate the deliveries in accordance with the applicable requirements for the DC receiving the delivery. If Supplier’s carrier refuses to sort and segregate the delivery as reasonably required by McKesson receiving personnel, McKesson, at its option may (i) reject the shipment in whole, or in part, or (ii) accept the shipment and charge Supplier a separate fee as set forth in Schedule F (Standard Fees).
- F. *Order Discrepancies and Nonconforming Shipments.*
- (1) Product shipments will be received in accordance with the level of line detail included in the bill of lading and any order discrepancies that are reasonably visible at time of receipt, including shortages, overages, incorrect product and damages, will be reported to Supplier within two (2) Business Days of receipt. Any order discrepancies that are not reasonably visible at time of receipt of shipment, including, order discrepancies reported by a McKesson customer, will be reported to Supplier within two (2) Business Days of discovery by McKesson. Returns for order discrepancies and other non-conforming shipments will be subject to Schedule R (Returns).
 - (2) Without limiting any other rights or remedies available to McKesson under law, contract or otherwise, Products delivered by Supplier which do not fully comply with one or more of the requirements set forth in this Schedule may be rejected and returned by McKesson (or a McKesson customer in the case of product delivered directly to such customer through a drop shipment) to Supplier at supplier’s expense or may be quarantined until resolution of such non-conformity. If a shipment, or part thereof, is quarantined, the shipment will not be considered delivered and McKesson’s obligation to pay the invoice for such shipment will be suspended until resolution of the

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non-conformity. Supplier may be required to pay an additional processing fees relating to the quarantine of a non-conforming delivery, as set forth in Schedule F (Standard Fees).

- 4. Definitions.** Capitalized terms that are not defined herein shall have the meanings ascribed to such terms in other Schedules of the STCs.

SCHEDULE R - Returns

Effective February 1, 2018 (version 12/11/17)

1. **Definitions.** Capitalized terms referenced herein shall have the meanings ascribed to such terms herein or in other Schedules to the STCs.
 - A. *“Current Invoice Price”* means (i) the then current WAC of a product in effect on the date of the issuance of a Debit Memo for McKesson’s return, or (ii) if such product does not have a WAC, the then current invoice price in effect on the date of the issuance of a Debit Memo for McKesson’s return.
 - B. *“Dated Product”* means (i) a product that at time of return, which in accordance with its label, will expire within six (6) months or already expired in the prior twelve (12) months, or (ii) if supplier does not provide an expiration date for the product, a product that at the time of return has been in McKesson’s inventory for at least ninety (90) days.
 - C. *“Debit Memo”* means a debit memo relating to a return posted by McKesson through its Supplier Portal.
 - D. *“Direct Customer Return”* means a return of a product by a McKesson customer directly to Supplier, or Supplier’s designee.
 - E. *“Excess Inventory”* means the aggregate number of selling units of a Saleable Product which exceed McKesson’s then current forecasted ninety (90) day demand for such product.
 - F. *“Indirect Customer Return”* means a return of a product by a McKesson customer through a McKesson program for customer returns which was purchased by the customer from McKesson.
 - G. *“McKesson Returns Processor”* means a third party engaged by McKesson to facilitate McKesson’s return of products to suppliers.
 - H. *“Nonconforming Product”* means a product that, at the time of return, did not meet one or more requirements set forth in the STCs, including, without limitation, if such non-conformance is discovered after McKesson’s, or its customer’s, receipt of a product.
 - I. *“Removed Product”* means a product that is subject to a government mandated recall or a voluntary market withdrawal by Supplier.
 - J. *“Saleable Product”* means a product that is not a Dated Product, Nonconforming Product or Removed Product and that is in a condition that meets McKesson’s requirements for sale to its customers.
2. **Nonconforming Products.**
 - A. Nonconforming Products with order discrepancies that are reasonably visible at time of receipt by McKesson, including overages, incorrect product and damages will be reported to Supplier within two (2) Business Days of receipt. Any order discrepancies that are concealed or are not reasonably visible at time of receipt of shipment, including, order discrepancies reported by a McKesson customer, will be reported to Supplier within two (2) Business Days of discovery by McKesson.
 - B. McKesson will post a Debit Memo in accordance with Schedule O (Orders, Fulfillment and Shipping Requirements) for a Nonconforming Product that is eligible for return in accordance with this Schedule. A Debit Memo for non-conformity discovered at time of receipt of the product shipment will be based on the actual invoice price for the product included in the invoice for the applicable shipment. A Debit Memo for any concealed non-conformity discovered after receipt of the product shipment will be based on Current Invoice Price.
 - C. Within five (5) Business Days of McKesson’s return request, Supplier will notify McKesson of its desire to have the Nonconforming Products returned to Supplier directly and the cost of freight and any risk of loss and related insurance shall be the sole responsibility of Supplier and if no such notification is provided by Supplier, McKesson will have the right to dispose of the Nonconforming Product.
3. **Dated Products, Removed Products and Excess Inventory.**
 - A. McKesson will notify Supplier of its request for a return authorization for the return of a Dated Product, Removed Product, or Excess Inventory by posting a Debit Memo on the McKesson Supplier Portal. Returns may be aggregated by McKesson and the Debit Memo will be based on the Current Invoice Price

SCHEDULE R - Returns

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for each of the returned products, provided that for Indirect Customer Returns, the value of the product included in the Debit Memo will be based on the lower of (i) the Current Invoice Price, or (ii) the return customer's current contract price for the product. Supplier will acknowledge the return authorization request within ten (10) Business Days of the posting of McKesson's Debit Memo by issuing McKesson or the McKesson Returns Processor a return authorization number.

- B. Supplier may elect to have such returned products (i) shipped to Supplier, or its designee, at Supplier's expense, subject to a processing and handling fee as set forth in Schedule F (Standard Fees), or (ii) disposed of by the McKesson Returns Processor at no additional charge to Supplier.
- 4. **Direct Customer Returns.** Supplier is required to accept returns directly from McKesson customers for products that qualify for return in accordance with this Schedule R. McKesson customers requesting to return a designated drop ship product will be directed to Supplier for the issuance of a return authorization number. McKesson will process a return credit for a Direct Customer Return and Supplier will pay in connection therewith a Third Party Credit Processing Fee for Customer Credits as set forth in Schedule F (Standard Fees).
- 5. **Ineligible Returns.** Notwithstanding anything to the contrary, McKesson will not return for credit any of the following products, without Supplier's explicit written consent: (i) for product which is labeled by Supplier with a lot number and expiration date and at the time of return the lot number and expiration date is not visible, (ii) product damaged or not properly maintained and handled by McKesson or a McKesson customer, provided that the affixation of a label on the product will not, in and of itself, render it damaged and ineligible for return, (iii) product dispensed to a patient unless the return is a Removed Product, or (iv) product which McKesson explicitly agrees in writing at, or prior to, the time of purchase is ineligible for return.
- 6. **Partials.** The value of a return pursuant to this Schedule for partial bottles, individual containers, cartons, cases, packaging or unused units of inner-packs will be based on the portion of the quantity of units (e.g. pills) of product returned relative to the quantity of units included in the full bottle or container and for all products (other than CII products, which will be based on exact count) such portion will be rounded up as follows:

Percentage Based on Actual Count	Percentage to be Applied (to non-CII products)
Less than 10%	10%
Greater than 10% but less than or equal to 25%	25%
Greater than 25% but less than or equal to 50%	50%
Greater than 50% but less than or equal to 75%	75%
Greater than 75% but less than or equal to 100%	100%

- 7. **Payments.** Supplier will pay McKesson for any undisputed returns by EFT, debit ACH or credit memo within thirty (30) days of McKesson's Debit Memo date. Debit Memos for which Supplier has not rendered payment, issued a credit or submitted a credit memo as required in accordance with this Section 7 may be deducted by McKesson in accordance with Schedule A (Accounting).
- 8. **Disputes.** In the event of any dispute regarding a return, Supplier shall pay all undisputed amounts in accordance with Section 7 (above) and provide McKesson notification through the McKesson Supplier Portal of the disputed amounts and the reasons for any such dispute within thirty (30) days of the date of McKesson's Debit Memo. Any accounting disputes relating to a previously undisputed Debit Memo submitted by Supplier to McKesson in writing will be resolved in accordance with Schedule A (Accounting).
- 9. **Disposition.** If Supplier declines or fails to respond to McKesson's request for a return authorization number in accordance with this Schedule, or Supplier otherwise does not indicate a means for disposition of the returned products, McKesson will have the right, in its discretion, sixty (60) days following the submission of a request for a return authorization number to dispose of the returned products through the McKesson Returns Processor.

SCHEDULE R - Returns

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- 10. McKesson Returns Processor.** Supplier is required to establish a commercial relationship with the McKesson Returns Processor. The McKesson Returns Processor Fee set forth in Schedule F (Standard Fees) will only apply to the extent that Supplier requires that returned products be shipped to Supplier, or Supplier's designee, for any purpose, including unit count confirmation or product disposition.
- 11. Shipping.** If Supplier requests that a product be returned to Supplier, or Supplier's designee, Supplier will be responsible for the cost of freight and any risk of loss and associated insurance costs.
- 12. Recalls and Market Withdrawals.** Notwithstanding anything to the contrary, McKesson may provide Supplier with reasonable assistance in implementing a recall or market withdrawal of a product in accordance with the specific terms (including the fees related thereto) as agreed upon in writing by Supplier and McKesson in connection with such recall or market withdrawal.
- 13. Product Acquisitions.** If Supplier acquires from another supplier one or more products distributed by McKesson, any return of such products will be subject to the terms of this Schedule R.

EXHIBIT B

**MCKESSON CORPORATION
CORE DISTRIBUTION AGREEMENT**

This Core Distribution Agreement (“Agreement”) is entered into between McKesson Corporation (“McKesson”), a pharmaceutical distributor, and EPI Health, LLC (“Manufacturer”), a pharmaceutical manufacturer.

McKesson agrees to perform certain Core Services and Cold Chain Management Services (each as hereinafter defined), as applicable, in connection with the distribution of pharmaceutical products manufactured by Manufacturer (the “Product(s)”). The parties agree that, unless otherwise agreed to in writing by both parties, the term Products applies only to Manufacturer’s brand pharmaceutical products and excludes any generic pharmaceutical or biosimilar pharmaceutical products.

The parties now wish to define more precisely the amount and manner of the consideration to be received by McKesson from Manufacturer for its performance of the Core Services and Cold Chain Management Services in connection with Products.

Now, therefore, McKesson and Manufacturer agree as follows:

I. Obligations of McKesson

- a. McKesson agrees to provide the following core distribution services with regard to Products, to the extent customarily performed by a full-line wholesale pharmaceutical distributor consistent with then current industry practices (“Core Services”):
 - i. Pick, Pack and Ship – shipment of Product from McKesson’s Forward Distribution Centers (“FDC”) to McKesson’s national distribution customer base upon customer’s orders thereof;
 - ii. Efficient Inventory Levels – maintenance of efficient inventory levels to reflect true customer demand and maintain high customer service levels;
 - iii. Enhanced Reporting Package – electronic transmissions of 852 and 867 data via the Electronic Data Interchange (“EDI”), including levels and aggregate sales out by Distribution Center (“DC”). All data metrics available in the 852 and 867 data sets are listed in Attachment A;
 - iv. Returns Processing – receiving and reselling saleable returned Product (excluding Products subject to recalls or market withdrawals) from customers and returning un-saleable Product to the Manufacturer;
 - v. Contract Pricing Administration – updating price changes to existing contracts and adding new customer contracts in a timely manner;
 - vi. Chargeback Processing – accurate and timely processing of customer chargebacks due to contract pricing between the customer and Manufacturer.
- b. McKesson agrees to provide additional management and handling services (“Cold Chain Management Services”) in connection with all Products that in McKesson’s consideration, and in accordance with the applicable product Material Safety Data Sheet (MSDS), require cold chain management (“Cold Chain Products”).

- c. Any other services that are not Core Services or Cold Chain Management Services, including without limitation, services associated with assisting a manufacturer with a recall or market withdrawal of a Product, any marketing services, or redistribution services to DCs (collectively, "Value Added Services") are not included in this Agreement and shall be priced individually and separate from this Agreement, and may be subject to a separate agreement at McKesson's discretion.

II. Obligations of Manufacturer

- a. Manufacturer agrees to maintain effective order management capabilities and fill McKesson's inventory orders in a timely and efficient manner. Manufacturer will include the purchase order numbers provided by McKesson on all invoices.
- b. Manufacturer agrees that all Products shall be delivered F.O.B. at the McKesson Distribution Center location included in the applicable order with insurance in the amounts and coverage adequate to cover a full loss or damage of any shipment. All inventory insurance for Products delivered to McKesson is the sole responsibility of the Manufacturer.
- c. In consideration of the Core Services to be provided pursuant to this Agreement, Manufacturer will pay a service fee to McKesson as determined in accordance with Attachment B.

III. Additional Terms and Conditions

- a. In the event Manufacturer acquires the rights to manufacture or sell pharmaceutical products from a third party ("Seller") after the date on which this Agreement becomes effective and Seller was paying McKesson a higher fee for service with respect to the distribution of such products, Manufacturer agrees, to the extent permitted by law, to pay McKesson the higher fee for service within the same amount and manner as paid by Seller for the period following such acquisition until March 31st. After such period, such products will be subject to fee for service payments as set forth in this Agreement. Manufacturer agrees, as part of such acquisition, to obtain the consent from Seller for disclosure by McKesson to Manufacturer of the information necessary for purposes of complying with the foregoing paragraph.
- b. New NDCs may be added as Products hereunder after the effective date of this Agreement with McKesson's prior written consent (which may also be by email). Such consent may be conditioned on the parties agreeing to additional terms and conditions (including separate fees for service) relating to such new NDCs.

IV. Adjustment of Terms

In the event that Manufacturer provides any other pharmaceutical distributor financial terms with regard to distribution of Products that are more favorable, when taken as a whole (and taking into account the nature and amount of data and services provided), than those offered to McKesson hereunder, then Manufacturer shall offer McKesson the same economic benefit, effective from and after the date that Manufacturer provides such more favorable terms to any other pharmaceutical distributor.

V. Confidentiality and Disclosure

- a. Manufacturer and McKesson each acknowledge that in connection with this Agreement each may have access to and gain knowledge of confidential business and technical information of the other party (“Confidential Information”). Each party agrees to maintain all Confidential Information as confidential, and except as may be required by law or order of any court or governmental agency, not to disclose to any third party any Confidential Information unless such party shall obtain a written release from the other party. Each party further agrees to limit access to Confidential Information to only those of its officers and employees who reasonably need to know such information. A party may provide its agents and representatives, including legal and financial advisors, access to Confidential Information where such access is necessary to support its obligations concerning this Agreement, as long as such parties are subject to confidentiality restrictions no less restrictive than those herein. Manufacturer acknowledges that information generated, compiled or stored by McKesson reflecting the purchase and resale of its Products to customers does not constitute the confidential information of Manufacturer.
- b. For avoidance of doubt, Confidential Information does not include information which: (i) is already known to a party at the time of disclosure by the other party, (ii) is or becomes publicly known through no wrongful act of the receiving party; (iii) is independently developed by a party without benefit of the other’s Confidential Information; or (iv) is received by a party from a third party without restriction and without a breach of an obligation of confidentiality.
- c. If Manufacturer or McKesson is required to disclose Confidential Information as part of a judicial process, government investigation, legal proceeding, or other similar process, if it is reasonably possible to do so, such party shall give the other party prior written notice of the requirement. Reasonable efforts shall be made to provide this notice in sufficient time to allow the other party to seek an appropriate protective order or modification of any disclosure.

VI. Effective Date; Term

- a. This Agreement shall become effective as of April 1, 2017 and shall remain in effect until terminated in accordance with Section VI. b., below.
- b. Either party may terminate this Agreement without cause at any time on thirty (30) days prior written notice to the other party, with the following exception. If Manufacturer is in the process of being acquired or is acquired, the Agreement may not be terminated by Manufacturer without cause for twelve (12) months subsequent to the acquisition date. Either party may terminate the Agreement for cause where the other party has breached the Agreement and failed to cure such breach within thirty (30) days written notice from the non-breaching party of same.
- c. Either party may terminate this Agreement immediately, if (i) the other party is unable to pay its debts, becomes insolvent, makes an assignment for the benefit of creditors or commits any act amounting to a business failure; or (ii) proceedings in bankruptcy or reorganization or for an appointment of a receiver or trustee for or over the other party’s property are instituted by or against such party in any court having jurisdiction thereof, and such proceedings are not vacated, set aside or stayed within ninety (90) days of filing thereof.

VII. General

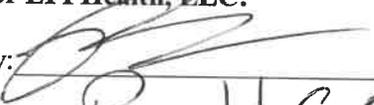
- a. This Agreement is in addition to and shall not supersede any existing agreement in effect between McKesson and Manufacturer, including but not limited to the McKesson Supplier Terms and Conditions.
- b. This Agreement will be governed by and construed in accordance with the laws of California, without regard to or application of conflict of law, rules or principles.
- c. WITH THE EXCEPTION OF INDEMNIFICATION OBLIGATIONS, IN NO EVENT SHALL EITHER PARTY BE LIABLE TO THE OTHER PARTY UNDER THIS AGREEMENT FOR ANY SPECIAL, CONSEQUENTIAL, INCIDENTAL OR INDIRECT DAMAGES, HOWEVER CAUSED, ON ANY THEORY OF LIABILITY AND WHETHER OR NOT EITHER PARTY HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES.
- d. The parties to this Agreement are independent contractors. Accordingly, this Agreement does not constitute a partnership or other joint venture between the parties and neither party shall be deemed to be an agent or representative of the other.
- e. The failure of either party to enforce at any time or for any period of time any one or more of the provisions hereof shall not be construed to be a waiver of such provisions or of the right of such party thereafter to enforce each such provision.
- f. Except for the obligation to pay money, neither party will be liable to the other party for any failure or delay in performance caused by reasons beyond such party's reasonable control, including but not limited to acts of God, war, riot, acts of terrorism, fire, shortage of materials or transportation, strikes or acts of civil or military authorities, provided such party gives prompt written notice thereof to the other party.
- g. In the event Manufacturer requires other services (*e.g.*, distribution, pharmacy, marketing or logistics) that McKesson or any of its subsidiaries or affiliates offer, Manufacturer will provide McKesson or its subsidiaries or affiliates the opportunity to bid on providing these services to Manufacturer at the time they may be put out for bid, along with any other competitor(s) that Manufacturer may so choose.
- h. Manufacturer may not assign this Agreement nor any interest therein without prior written consent from McKesson.
- i. Notwithstanding anything to the contrary in this Agreement, each of McKesson Corporation and its affiliates is hereby authorized to set-off, recoup and apply any amounts owed by it to Manufacturer or any of Manufacturer's affiliates against any and all amounts owed by Manufacturer or its affiliates to any of McKesson Corporation or its affiliates, without prior written notice.
- j. Manufacturer agrees to fully comply with all federal, state and local laws and regulations relating to its obligations under this Agreement or otherwise applicable to the manufacture, handling, pricing, reimbursement, sale or distribution of the Products, including as referenced in Section VII.k herein, and further agrees to defend, indemnify and hold McKesson harmless from any and all liability arising out of or due to Manufacturer's nonadherence with such legal or regulatory requirements.

- k. Manufacturer will comply with, and provide to McKesson all documents and information legally required under, the Drug Supply Chain Security Act (the “DSCSA”) and any FDA regulations and guidance issued pursuant to the DSCSA, in effect during the term of this Agreement, which may include, without limitation, “Transaction Information”, “Transaction History”, and “Transaction Statement”, as those terms are defined in the DSCSA.
- l. Manufacturer and McKesson agree that, as applicable, they will abide by the requirements as set forth in Attachment C.
- m. This Agreement may be executed in multiple counterparts, each of which will be deemed an original but all of which together will constitute one and the same instrument. Facsimile or electronic execution and delivery of this Agreement constitute legal, valid and binding execution and delivery for all purposes.

[Remainder of Page Intentionally Left Blank]

IN WITNESS WHEREOF the parties have caused this Agreement to be duly executed as of the date and year written below and the persons signing warrant that they are duly authorized to sign for and on behalf of the respective parties. This Agreement shall be deemed accepted by McKesson only upon execution by a duly authorized representative of McKesson.

For EPI Health, LLC:

By:  _____

Name: Ronald C. Owens
(Print or Type)

Title: President

Date: 5/17/17

For McKesson Corporation:

By: _____

Name: _____
(Print or Type)

Title: _____

Date: _____

[Signature Page to the Core Distribution Agreement]

Attachment A

852 / 867 DATA

1. Testing Electronic Transmissions
 - 852 and 867 data cannot be sent until the EDI transmission has been tested and certified by the Manufacturer’s EDI data team.

2. Data Frequency
 - 852 data can be sent only in one frequency - daily, weekly, or monthly. It cannot be sent in a combination of frequencies (i.e. daily and monthly).
 - 867 data can be sent only in one frequency - daily, weekly, or monthly. It cannot be sent in a combination of frequencies (i.e. daily and monthly).
 - 852 and 867 can be sent in different frequencies from each other – i.e. 852 can be sent weekly and 867 can be sent monthly.

3. Substitute Data
 - Substitute inventory or sales data can be provided only if a Manufacturer is not EDI compliant or has not contracted with a third party data processor
 - A **MCKINV** report can be substituted for the 852
 - A **MCKSAL** report can be substituted for the 867
 - Relative to 852 and 867, the MCKINV and MCKSAL reports respectively are not as robust, may be subject to system constraints, and may not provide the same level of detail. McKesson strongly encourages Manufacturers to accept the sales and inventory data via EDI transmission.

4. McKesson will not provide any back history sales or inventory data.

5. Transmissions through AS2, a secure Internet transmission protocol, will incur no additional incremental fee. Transmissions through a VAN (Value Added Network) are subject to an additional incremental fee.

Please select the data report type and then select the frequency (choose only one). The default selection is Weekly if no choice is indicated.

Inventory Data (Choose only one and then select frequency for your choice)

- | | | | | |
|--------------------------|--|---------------------------------|--------------------------------|--------------------------|
| <input type="checkbox"/> | 852 Inventory Data via EDI transmission | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> Monthly | <input type="checkbox"/> Weekly | <input type="checkbox"/> Daily | |
| <input type="checkbox"/> | MCKINV Inventory Data Excel Format via Email | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> Monthly | <input type="checkbox"/> Weekly | <input type="checkbox"/> Daily | |

Sales Data (Choose only one and then select frequency for your choice)

- | | | | | |
|--------------------------|--|---------------------------------|--------------------------------|--------------------------|
| <input type="checkbox"/> | 867 Sales Data via EDI transmission | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> Monthly | <input type="checkbox"/> Weekly | <input type="checkbox"/> Daily | |
| <input type="checkbox"/> | MCKSAL Sales Data Excel Format via Email | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> Monthly | <input type="checkbox"/> Weekly | <input type="checkbox"/> Daily | |

Please complete contact information to begin testing and certification process

MANUFACTURER EDI CONTACT

Name:
Phone #:
Email:

MCKESSON EDI CONTACT

Name: Dennis Lim
Phone #: 415-983-9320
Email: dennis.lim@mckesson.com

The following pages are listings and definitions of the available fields for the 852s and 867s. **Please note that due to system constraints, no additional fields are available and these fields and qualifiers are not negotiable.**

Data Fields and Definitions

852s (Limited to fields listed below)

Data Range Start	Start date of the data
Data Range End	End date of the data

DC DEA Number	Distribution Center Drug Enforcement Administration number
NDC	National Drug Code – if available
UPC	Universal Product Code – if available
Econo	McKesson Item Number – if available
Status	Active SKU codes are: A, G, M, N, and W; the rest are inactive

		Qualifiers
Total Orders	Quantity ordered – sales + omits	QX
Sales Quantity	Aggregate of sales including: - customer end sales - dock to dock sales - drop ship sales - repacked sales Note: Transfers out of the Memphis Regional Distribution Center or other DCs are not considered sales and therefore are not included here.	QS
Lost Sales Quantity	Unfiltered omitted units	QO
Saleable On-hand	Actual quantity currently stocked in the warehouse available for sale Note: Pending customer orders not filled are not subtracted out (see QC – Committed quantity)	QA

Ending Saleable On-hand	Same as saleable on-hand	QE
Unsaleable On-hand	On-hand in the reclamation center (a.k.a. morgue) – this is <u>not</u> considered as on-hand for ordering purposes	TS
Total On-order	Total on-order quantity, including orders placed to the manufacturer, transfers from the Memphis Regional Distribution Center, the Denver Strategic Redistribution Center, and transfers from other DCs	QP
Manufacturer On-order	On-order quantity from manufacturer	Q1
DC to DC In-transit	Transfer on-order from McKesson DC to another McKesson DC (inter-DC transfers)	QM
RxPak/Specialty On-order	On-order quantity from McKesson RxPak & McKesson Specialty divisions	QL
Quantity Received	Receipt quantities	QR
Inventory Adjustments	Adjustments to inventory not included in sales, transfers, or receipts	QT
SKU Weekly Forecast	SKU weekly customer demand forecast Note: For the Regional Distribution Center (8194), forecasts are derived by adding the forecasts from all forward DCs plus the forecasts for the RDC's sales to warehouse customers. It is important to note that the buying system does not use this specific number for calculating order quantities.	QD
SKU Four Week Forecast	Weekly forecast times four (QD x 4)	QF
Order Projections 13 weeks out	Based on current information, projected unit order quantities (to the vendor) by week for 13 weeks. (First instance = one week out, second instance = two weeks out, etc.)	OQ
Lines Sold	Unfiltered lines sold, no adjustments	WQ
Lines Lost	Lines Lost is defined as Lines Ordered – Lines Sold	LS
Inter-DC Transfers Out	Quantity transferred out	QW
Inter-DC Transfers In	Quantity transferred received	QZ
SKU Quantity Returned into Inventory	Saleable customer returns	Q2
SKU Quantity Returned to Morgue	Unsaleable customer returns	Q3
SKU Reserved Quantity	Additional quantity maintained in the buying system, typically used for new business and holiday builds	QH
SKU Committed Quantity	Customer orders to be filled	QC
Customer End Sales	Regular sales to customers through McKesson DCs (does not include transfers to McKesson distribution centers)	RE
Dock-to-dock Sales	Dock-to-dock sales	QI

Drop Ship Sales	Drop ship sales	OF
SRC Sales	Sales by the Strategic Redistribution Center (SRC) to outside customers (does not include transfers to McKesson distribution centers)	QK
Repacked Sales	Repack (RxPak) finished goods sales	OP
SKU Standard Deviation	SKU customer forecast standard deviation percent	PA
Planned Inventory Qty	Planned inventory quantity buy, typically manually calculated special quantities	QN
SKU Reorder Point	Buying system reorder point	PO
SKU Lead Time	Buying system SKU lead time	BS
SKU Lead Time Variability	Lead time standard deviation percent	MS

867s (Limited to fields listed below)

Processing Date	Date file is created
Data Range Start	Start date of the data
Data Range End	End date of the data
Transaction Date	Transaction date

Invoice#	Invoice number
Invoice Date	Invoice date
Contract Number	Contract number if contract sale
Manufacturer DEA#	Manufacturer Drug Enforcement Administration number – for Class II as well as III-V vendor numbers
Manufacturer Name	Manufacturer name
DC DEA#	Distribution Center Drug Enforcement Administration number
DC Name	DC name
NDC	National Drug Code – if available
UPC	Universal Product Code – if available
Econo	McKesson Item Number – if available
UOM	Selling unit of measure
Cost	Wholesale acquisition cost (WAC)
Quantity Purchased (or transferred)	Quantity filled – includes: - customer end sales - dock to dock sales - drop ship sales - repacked sales - transfers See Sales Type Codes to distinguish the transaction

Sales Type Code	1 = Customer end sales 2 = Dock to dock 3 = Drop ship 4 = Rx Pak 5 = Returns, saleable 6 = Returns, unsaleable 7 = Inter-DC transfers; regular transfers out 8 = Inter-DC transfers; transfer cancellations
Customer Returns	Saleable and unsaleable returns
Customer Name	Customer name For blocked customer, the name will be "Blocked Per Customer"
Customer DEA#	Customer Drug Enforcement Administration number For blocked customer, the DEA# will not be sent
Customer Address	Customer street address For blocked customer, the address will not be sent
City	Customer city For blocked customer, the city will not be sent
State	Customer state For blocked customer, the state will not be sent
Zip	Customer zip For blocked customer, only the first 3 digits of the zip code will be populated

Note: McKesson will not provide any customer information where it violates the customer contract with McKesson.

* * *

ENHANCED REPORTING PACKAGE ELECTION

Service Level Report

- Yes
- No

Attachment B**DISTRIBUTION SERVICES FEE SCHEDULE**

1. **Core Service Fees.** The fee for service payable by Manufacturer to McKesson for Core Services performed hereunder shall be determined in the following manner:
 - a. For the initial calendar year following the effective date of this Agreement, the fee for Core Services will be at a rate of **eleven percent (11%)**.
 - b. At the end of the initial calendar year and at the end of each calendar year thereafter during the term of the Agreement, the gross purchase volume of Products at wholesale acquisition cost (“WAC”) for the preceding calendar year will be evaluated, and the fee rate for Core Services for the following entire calendar year will be as follows:
 - i. **Twelve percent (12%)**, if McKesson’s gross purchase volume of Products at WAC totaled less than fifty million dollars (\$50,000,000);
 - ii. **Nine percent (9.0%)**, if McKesson’s gross purchase volume of Products at WAC totaled an amount equal to or greater than fifty million dollars (\$50,000,000) and less than seventy-five million dollars (\$75,000,000);
 - iii. **Seven percent (7.0%)**, if McKesson’s gross purchase volume of Products at WAC totaled an amount equal to or greater than seventy-five million dollars (\$75,000,000) and less than one hundred million dollars (\$100,000,000); or
 - iv. **Six and one half percent (6.5%)**, if McKesson’s gross purchase volume of Products at WAC totaled an amount equal to or greater than one hundred million dollars (\$100,000,000).
 - c. The fee for Core Service will be calculated for each calendar month by multiplying the fee rate established by this Section 1 by McKesson’s gross purchases of Products at WAC during such calendar month.
2. **Cold Chain Fees.** In addition to the fees for Core Services set forth in Section 1 (above), Manufacturer shall pay McKesson a service fee of **one-quarter percent (0.25%)** (“Cold Chain Service Fee”) in connection with all Cold Chain Product. The Cold Chain Service Fee will be calculated for each calendar month by multiplying the gross Cold Chain Products purchased at WAC by the Cold Chain Service Fee, and will be paid in accordance with Section 3 (below). Notwithstanding the foregoing and for the avoidance of doubt, the parties agree that the Cold Chain Service Fee shall be calculated apart from, and when applied shall be in addition to, the total fees for Core Services set forth in Section 1 (above).
3. **Payment of Fees.** The fee for Core Services and Cold Chain Service Fee (collectively, the “Fees”) will be invoiced at the end of each calendar month with respect to Products purchased by McKesson from Manufacturer during the calendar month. Manufacturer shall pay the Fees to McKesson by EFT, ACH or check no later than thirty (30) days from the end of the calendar month in which such Fees were earned. Any Fees which Manufacturer does not pay as required by this Section 3 may be deducted by McKesson from any amount owed by McKesson to Manufacturer. **Manufacturer agrees to remit payment by check or EFT in the event deduction amount exceeds amount currently payable to Manufacturer.**

Attachment C**Customer Flow-Down Terms**

This Agreement relates to orders for supplies or services under McKesson's Federal Government Pharmaceutical Distribution Contracts with the Department of Veteran Affairs and the Defense Logistics Agency. The following clauses are required, by statutes and regulations, to be incorporated in this Agreement.

The clauses incorporated below, with respect to the rights, duties, and obligations of McKesson and Manufacturer thereunder, shall be interpreted and construed in such a manner as to recognize and give effect to: (i) the contractual relationship between McKesson and Manufacturer under this Agreement; and (ii) the rights of the Federal Government with respect thereto under the Pharmaceutical Distribution Contracts between McKesson and the Federal Government. Accordingly, unless otherwise specifically stated, the term "Contractor" as used in the clauses below, means Manufacturer (except in the term "prime contractor," which shall mean McKesson), "subcontractor" shall mean Manufacturer's subcontractor (if any), "Contract" means this Agreement (except in the term "prime contract," which shall retain its original meaning), "Contracting Officer" means McKesson's authorized contract representative, "Government" means McKesson or as otherwise indicated.

The following clauses are incorporated by reference:

Citation	Title	Reference Date
FAR § 52.203-13	"Contractor Code of Business Ethics and Conduct"	Apr 2010
FAR § 52.203-15	"Whistleblower Protections Under the American Recovery and Reinvestment Act of 2009"	Jun 2010
FAR § 52.203-17	Contractor Employee Whistleblower Rights of Requirement to Inform Employees of Whistleblower Rights	April 2014
FAR § 52.219-8	"Utilization of Small Business Concerns"	Oct 2014
FAR § 52.222-26	"Equal Opportunity"	Apr 2015
FAR § 52.222-35	"Equal Opportunity for Veterans"	Jul 2014
FAR § 52.222-36	"Equal Opportunity for Workers with Disabilities"	Jul 2014
FAR § 52.222-40	"Notification of Employee Rights Under the National Labor Relations Act"	Dec 2010
FAR § 52.222-50	"Combating Trafficking in Persons"	Feb 2009
FAR § 52.225-6	"Trade Agreements Act Certificate"	May 2014
FAR § 52.242-15	"Stop-Work Order"	Aug 1989
FAR § 52.243-1	"Changes – Fixed-Price"	Aug 1987
FAR § 52.246-4	"Inspection of Services – Fixed Price"	Aug 1996
FAR § 52.247-64	"Preference for Privately Owned U.S.-Flag Commercial Vessels"	Feb 2006
DFARS § 252.203-7002	Requirements to Inform Employees of Whistleblower Rights	Jan 2009
DFARS § 252.227-7014	Rights in Noncommercial Computer Software and Noncommercial Computer Software Documentation	Feb 2014
DFARS § 252.227-7015	Technical Data – Commercial Items	Feb 2014

The following clauses are incorporated by full-text:

McKesson and Manufacturer agree that, as applicable, they shall abide by the requirements of 41 CFR §§ 60-1.4(a), 41 CFR 60-300.5(a) and 41 CFR 60-741.5(a). These regulations prohibit discrimination against qualified individuals based on their status as protected veterans or individuals with disabilities, and prohibit discrimination against all individuals based on their race, color, religion, sex, sexual orientation, gender identity, or national origin. Moreover, these regulations require that covered prime contractors and subcontractors take affirmative action to employ and advance in employment individuals without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, protected veteran status or disability.

EXHIBIT C

Name	Doc Type	Doc Number	Ship To Name	Ship To Address	DEA Number	Doc Date	Order Type	Transaction Text	Name Category	PO Reference	Invoice Due Date	Original Amount	Total Due
MCKESSON FINANCIAL CENTER	DMI	13999044	MCKESSON DRUG COMPANY	4012 SOUTH PURDUE, OKLAHOMA CITY, OK 73179	1402-RM0138328	05/31/2023	ED	DIS invoice	MCK000	8165973173	07/31/2023	\$709.82	\$709.82
MCKESSON FINANCIAL CENTER	DMI	14022174	MCKESSON DRUG COMPANY	4012 SOUTH PURDUE, OKLAHOMA CITY, OK 73179	1402-RM0138328	06/07/2023	ED	DIS invoice	MCK000	8165973929	08/07/2023	\$5,678.56	\$5,678.56
MCKESSON FINANCIAL CENTER	DMI	13980099	MCKESSON DRUG COMPANY	4012 SOUTH PURDUE, OKLAHOMA CITY, OK 73179	1402-RM0138328	05/24/2023	ED	DIS invoice	MCK000	8165972349	07/24/2023	\$8,736.96	\$8,736.96
MCKESSON FINANCIAL CENTER	DMI	14045239	MCKESSON DRUG COMPANY	4012 SOUTH PURDUE, OKLAHOMA CITY, OK 73179	1402-RM0138328	06/14/2023	ED	DIS invoice	MCK000	8165974698	08/14/2023	\$3,549.10	\$3,549.10
MCKESSON FINANCIAL CENTER	DMI	14045240	MCKESSON CORPORATION	3301 POLLOK DRIVE, CONROE, TX 77303	1402-RM0328408	06/14/2023	ED	DIS invoice	MCK000	8115890707	08/14/2023	\$6,279.15	\$6,279.15
MCKESSON FINANCIAL CENTER	DMI	13702613	MCKESSON CORPORATION	3301 POLLOK DRIVE, CONROE, TX 77303	1402-RM0328408	02/28/2023	RB	DIS invoice	MCK000	XI0123189725	04/30/2023	\$246.00	\$246.00
MCKESSON FINANCIAL CENTER	DMI	13702615	MCKESSON CORPORATION	3301 POLLOK DRIVE, CONROE, TX 77303	1402-RM0328408	02/28/2023	RB	DIS invoice	MCK000	XI0722182768	04/30/2023	\$266.50	\$266.50
MCKESSON FINANCIAL CENTER	DMI	14022175	MCKESSON CORPORATION	3301 POLLOK DRIVE, CONROE, TX 77303	1402-RM0328408	06/07/2023	ED	DIS invoice	MCK000	8115889931	08/07/2023	\$5,023.32	\$5,023.32
MCKESSON FINANCIAL CENTER	DMI	13980100	MCKESSON CORPORATION	3301 POLLOK DRIVE, CONROE, TX 77303	1402-RM0328408	05/24/2023	ED	DIS invoice	MCK000	8115888332	07/24/2023	\$2,511.66	\$2,511.66
MCKESSON FINANCIAL CENTER	DMI	13999045	MCKESSON CORPORATION	3301 POLLOK DRIVE, CONROE, TX 77303	1402-RM0328408	05/31/2023	ED	DIS invoice	MCK000	8115889164	07/31/2023	\$2,748.51	\$2,748.51
MCKESSON FINANCIAL CENTER	DMI	14045241	MCKESSON CORPORATION	1995 MCKESSON ST SUITE 101, AURORA, IL 60502	1402-RM0380484	06/14/2023	ED	DIS invoice	MCK000	8144730401	08/14/2023	\$373.17	\$373.17
MCKESSON FINANCIAL CENTER	DMI	14045397	MCKESSON CORPORATION	10 HUDSON CROSSING DR, MONTGOMERY, NY 12549	1402-RM0513401	06/14/2023	ED	DIS invoice	MCK000	8160815089	08/14/2023	\$2,511.66	\$2,511.66
MCKESSON FINANCIAL CENTER	DMI	13980254	MCKESSON CORPORATION	10 HUDSON CROSSING DR, MONTGOMERY, NY 12549	1402-RM0513401	05/24/2023	ED	DIS invoice	MCK000	8160812763	07/24/2023	\$8,790.81	\$8,790.81
MCKESSON FINANCIAL CENTER	DMI	14022171	MCKESSON DRUG COMPANY	1515 KENDRICK LANE, LAKE LAND, FL 33805	1402-PM0000771	06/07/2023	ED	DIS invoice	MCK000	8195942004	08/07/2023	\$30,849.74	\$30,849.74
MCKESSON FINANCIAL CENTER	DMI	13999041	MCKESSON DRUG COMPANY	1515 KENDRICK LANE, LAKE LAND, FL 33805	1402-PM0000771	05/31/2023	ED	DIS invoice	MCK000	8195941299	07/31/2023	\$32,269.38	\$32,269.38
MCKESSON FINANCIAL CENTER	DMI	13980096	MCKESSON DRUG COMPANY	1515 KENDRICK LANE, LAKE LAND, FL 33805	1402-PM0000771	05/24/2023	ED	DIS invoice	MCK000	8195940533	07/24/2023	\$5,897.68	\$5,897.68
MCKESSON FINANCIAL CENTER	DMI	14045237	MCKESSON DRUG COMPANY	1515 KENDRICK LANE, LAKE LAND, FL 33805	1402-PM0000771	06/14/2023	ED	DIS invoice	MCK000	8195942725	08/14/2023	\$34,398.84	\$34,398.84
MCKESSON FINANCIAL CENTER	DMI	14155014	MCKESSON DRUG COMPANY	1515 KENDRICK LANE, LAKE LAND, FL 33805	1402-PM0000771	07/20/2023	CD	DIS invoice	MCK000	4200FEHLK	09/19/2023	\$372.72	\$372.72
MCKESSON FINANCIAL CENTER	DMI	13999042	MCKESSON DRUG COMPANY INC	3775 SEAPORT BOULEVARD, WEST SACRAMENTO, CA 95691	1402-PM0021535	05/31/2023	ED	DIS invoice	MCK000	8182835373	07/31/2023	\$23,096.44	\$23,096.44
MCKESSON FINANCIAL CENTER	DMI	13980097	MCKESSON DRUG COMPANY INC	3775 SEAPORT BOULEVARD, WEST SACRAMENTO, CA 95691	1402-PM0021535	05/24/2023	ED	DIS invoice	MCK000	8182834691	07/24/2023	\$17,745.50	\$17,745.50
MCKESSON FINANCIAL CENTER	DMI	14045238	MCKESSON CORPORATION	1900 SOUTH 4490 WEST, SALT LAKE CITY, UT 84104	1402-PM0023046	06/14/2023	ED	DIS invoice	MCK000	8180752450	08/14/2023	\$4,804.93	\$4,804.93
MCKESSON FINANCIAL CENTER	DMI	13980098	MCKESSON CORPORATION	1900 SOUTH 4490 WEST, SALT LAKE CITY, UT 84104	1402-PM0023046	05/24/2023	ED	DIS invoice	MCK000	8180750971	07/24/2023	\$8,226.74	\$8,226.74
MCKESSON FINANCIAL CENTER	DMI	13999043	MCKESSON CORPORATION	1900 SOUTH 4490 WEST, SALT LAKE CITY, UT 84104	1402-PM0023046	05/31/2023	ED	DIS invoice	MCK000	8180751469	07/31/2023	\$5,214.62	\$5,214.62
MCKESSON FINANCIAL CENTER	DMI	14022172	MCKESSON CORPORATION	1900 SOUTH 4490 WEST, SALT LAKE CITY, UT 84104	1402-PM0023046	06/07/2023	ED	DIS invoice	MCK000	8180751945	08/07/2023	\$10,365.23	\$10,365.23
MCKESSON FINANCIAL CENTER	DMI	13999046	MCKESSON CORPORATION	10504 MCKESSON DRIVE, RUTHER GLEN, VA 22546	1402-RM0424363	05/31/2023	ED	DIS invoice	MCK000	8120626880	07/31/2023	\$709.82	\$709.82
MCKESSON FINANCIAL CENTER	DMI	13980101	MCKESSON CORPORATION	10504 MCKESSON DRIVE, RUTHER GLEN, VA 22546	1402-RM0424363	05/24/2023	ED	DIS invoice	MCK000	8120626091	07/24/2023	\$3,767.49	\$3,767.49
MCKESSON FINANCIAL CENTER	DMI	14045242	MCKESSON CORPORATION	10504 MCKESSON DRIVE, RUTHER GLEN, VA 22546	1402-RM0424363	06/14/2023	ED	DIS invoice	MCK000	8120628350	08/14/2023	\$7,534.98	\$7,534.98
MCKESSON FINANCIAL CENTER	DMI	14022176	MCKESSON CORPORATION	10504 MCKESSON DRIVE, RUTHER GLEN, VA 22546	1402-RM0424363	06/07/2023	ED	DIS invoice	MCK000	8120627609	08/07/2023	\$1,419.64	\$1,419.64
MCKESSON FINANCIAL CENTER	DMI	13999040	MCKESSON CORPORATION	9501 S NORWALK BOULEVARD, SANTA FE SPRINGS, CA 90670	1402-PF0000012	05/31/2023	ED	DIS invoice	MCK000	8147949438	07/31/2023	\$373.17	\$373.17
MCKESSON FINANCIAL CENTER	DMI	14245759	MCKESSON DRUG COMPANY	4836 SOUTHRIDGE BLVD, MEMPHIS, TN 38141	1402-PM0001951	08/17/2023	CD	DIS invoice	MCK000	4226VEHLMD	10/17/2023	\$178.50	\$178.50
MCKESSON FINANCIAL CENTER	DMI	14279519	MCKESSON CORPORATION	1 COMMERCE DRIVE, OFALLON, MO 63366	1402-PM0037374	08/29/2023	CD	DIS invoice	MCK000	4240FEHLSI	10/29/2023	\$379.42	\$379.42
MCKESSON FINANCIAL CENTER	DMI	14022173	MCKESSON CORPORATION	1 COMMERCE DRIVE, OFALLON, MO 63366	1402-PM0037374	06/07/2023	ED	DIS invoice	MCK000	8183869074	08/07/2023	\$2,129.46	\$2,129.46
MCKESSON CORP JEFFERSONVILLE	DMI	14001241	MCKESSON CORP JEFFERSONVILLE	8200 BLUEGRASS RD, JEFFERSONVILLE, OH 43128	1402-RM0623834	05/31/2023	ED	DIS invoice	MCK000	8163625726	07/31/2023	\$1,419.64	\$1,419.64
MCKESSON CORP JEFFERSONVILLE	DMI	13981698	MCKESSON CORP JEFFERSONVILLE	8200 BLUEGRASS RD, JEFFERSONVILLE, OH 43128	1402-RM0623834	05/24/2023	ED	DIS invoice	MCK000	8163624856	07/24/2023	\$709.82	\$709.82
MCKESSON CORP JEFFERSONVILLE	DMI	14047599	MCKESSON CORP JEFFERSONVILLE	8200 BLUEGRASS RD, JEFFERSONVILLE, OH 43128	1402-RM0623834	06/14/2023	ED	DIS invoice	MCK000	8163627249	08/14/2023	\$3,358.53	\$3,358.53
MCKESSON CORP JEFFERSONVILLE	DMI	14024048	MCKESSON CORP JEFFERSONVILLE	8200 BLUEGRASS RD, JEFFERSONVILLE, OH 43128	1402-RM0623834	06/07/2023	ED	DIS invoice	MCK000	8163626492	08/07/2023	\$2,675.47	\$2,675.47
												Total	\$245,322.98

EXHIBIT D



ICS BROOKS RETURNS 3PL DC
420 INTERNATIONAL BLVD SUITE 500
BROOKS, KY 40109

INVOICE	
Return Update A/R - Reverse RA	
Document Number	DMI13702613
Cost Center	1402 RB
Document Date	02/28/2023
Payment Due Date	04/30/2023
Invoice Print	N

Credited To:

MCKESSON FINANCIAL CENTER
 PO BOX 4017
 DOCUMENT PROCESSING
 CONROE DIVISION
 DANVILLE, IL 61834

Returned From:

MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 State License # : 0082692-RX

Account Nbr: 7554725	RGA: 100559405	Customer Ref: XI0123189725
State License: 0082692-RX	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date RGA Created: 02/08/2023	FOB: Free on Board - Destination
State PRMT:	Date Credited: 02/28/2023	Sales Order: 15664048

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0107-01 Bensal HP 30G Tube 3-6% Each NDC: 63801010701 Return Reason: Expired Product Date Product Received: 02/21/2023 Credit Denial Reason: Non-Returnable Product	0586037	12	EACH	\$20.50	\$246.00	\$0.00 0.00 %	\$246.00
Subtotals:						\$246.00	\$0.00	\$246.00

Returned By
MCKESSON CORPORATION 3301 POLLOK DRIVE DBA MCKESSON DRUG CO CONROE, TX 77303

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$246.00
Line Discount	\$0.00
Net Subtotal	\$246.00
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$246.00



ICS BROOKS RETURNS 3PL DC
420 INTERNATIONAL BLVD SUITE 500
BROOKS, KY 40109

INVOICE	
Return Update A/R - Reverse RA	
Document Number	DMI13702615
Cost Center	1402 RB
Document Date	02/28/2023
Payment Due Date	04/30/2023
Invoice Print	N

Credited To:
 MCKESSON FINANCIAL CENTER
 PO BOX 4017
 DOCUMENT PROCESSING
 CONROE DIVISION
 DANVILLE, IL 61834

Returned From:
 MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 State License # : 0082692-RX

Account Nbr: 7554725	RGA: 100534955	Customer Ref: XI0722182768
State License: 0082692-RX	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date RGA Created: 08/12/2022	FOB: Free on Board - Destination
State PRMT:	Date Credited: 02/28/2023	Sales Order: 15664054

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0107-01 Bensal HP 30G Tube 3-6% Each NDC: 63801010701 Return Reason: In-Dated Product Date Product Received: 08/25/2022 Credit Denial Reason: Non-Returnable Product	0586037	10	EACH	\$20.50	\$205.00	\$0.00 0.00 %	\$205.00
2	0107-01 Bensal HP 30G Tube 3-6% Each NDC: 63801010701 Return Reason: Expired Product Date Product Received: 08/25/2022 Credit Denial Reason: Non-Returnable Product	0386029	2	EACH	\$20.50	\$41.00	\$0.00 0.00 %	\$41.00



ICS BROOKS RETURNS 3PL DC
420 INTERNATIONAL BLVD SUITE 500
BROOKS, KY 40109

INVOICE	
Return Update A/R - Reverse RA	
Document Number	DMI13702615
Cost Center	1402 RB
Document Date	02/28/2023
Payment Due Date	04/30/2023
Invoice Print	N

Credited To:
 MCKESSON FINANCIAL CENTER
 PO BOX 4017
 DOCUMENT PROCESSING
 CONROE DIVISION
 DANVILLE, IL 61834

Returned From:
 MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 State License # : 0082692-RX

Account Nbr: 7554725	RGA: 100534955	Customer Ref: XI0722182768
State License: 0082692-RX	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date RGA Created: 08/12/2022	FOB: Free on Board - Destination
State PRMT:	Date Credited: 02/28/2023	Sales Order: 15664054

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
3	0107-01 Bensal HP 30G Tube 3-6% Each NDC: 63801010701 Return Reason: Expired Product Date Product Received: 09/27/2022 Credit Denial Reason: Non-Returnable Product	0586037	1	EACH	\$20.50	\$20.50	\$0.00 0.00 %	\$20.50
Subtotals:						\$266.50	\$0.00	\$266.50

Returned By
MCKESSON CORPORATION 3301 POLLOK DRIVE DBA MCKESSON DRUG CO CONROE, TX 77303

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$266.50
Line Discount	\$0.00
Net Subtotal	\$266.50
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$266.50



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024
ICS State Permit(s): 0218 Exp. Date: 04/30/2025
ICS State Permit(s): 232247 Exp. Date: 04/30/2026

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
LAKELAND DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY
1515 KENDRICK LANE
MCKESSON CORPORATION
LAKELAND, FL 33805
State License # : 2213
FL HC License: N/A

INVOICE	
EDI Sales Order	
Document Number	DMI13980096
Cost Center	1402 ED
Document Date	05/24/2023
Payment Due Date	07/24/2023
Invoice Print	N

Account Nbr: 7554692	Purchase Order: 8195940533	Customer Ref:
State License: 2213	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/24/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/24/2023	Sales Order: 16125970

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	2	EACH	\$709.82	\$1,419.64	\$0.00 0.00 %	\$1,419.64
2	03-0804-45 Cloderm Cream 45gm Tube CTN NDC: 71403080445	TFBW	12	CTN	\$373.17	\$4,478.04	\$0.00 0.00 %	\$4,478.04
Subtotals:						\$5,897.68	\$0.00	\$5,897.68

Shipment Information: 1Z5041EX0308161427
If payment is received by 07/23/2023, Pay \$5,779.73.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401 Seller MNFR Permit#: 46333 Exp. Date: 06-30-2024

INVOICE SUMMARY	
Gross Subtotal	\$5,897.68
Line Discount	\$0.00
Net Subtotal	\$5,897.68
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$5,897.68



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13980098
Cost Center	1402 ED
Document Date	05/24/2023
Payment Due Date	07/24/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
SALT LAKE DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
1900 SOUTH 4490 WEST
DBA MCKESSON DRUG CO
SALT LAKE CITY, UT 84104
State License # : 103539-1710

Account Nbr: 7554701	Purchase Order: 8180750971	Customer Ref:
State License: 103539-1710	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/24/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/24/2023	Sales Order: 16125971

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TGBG	2	EACH	\$1,255.83	\$2,511.66	\$0.00 0.00 %	\$2,511.66
2	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	1	EACH	\$709.82	\$709.82	\$0.00 0.00 %	\$709.82
3	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	6	EACH	\$709.82	\$4,258.92	\$0.00 0.00 %	\$4,258.92



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13980098
Cost Center	1402 ED
Document Date	05/24/2023
Payment Due Date	07/24/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
SALT LAKE DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
1900 SOUTH 4490 WEST
DBA MCKESSON DRUG CO
SALT LAKE CITY, UT 84104
State License # : 103539-1710

Account Nbr: 7554701	Purchase Order: 8180750971	Customer Ref:
State License: 103539-1710	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/24/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/24/2023	Sales Order: 16125971

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
4	03-0804-45 Cloderm Cream 45gm Tube CTN NDC: 71403080445	TFBW	2	CTN	\$373.17	\$746.34	\$0.00 0.00 %	\$746.34
Subtotals:						\$8,226.74	\$0.00	\$8,226.74

Shipment Information: 1Z5041EX0308161525, 1Z5041EXA808161274
If payment is received by 07/23/2023, Pay \$8,062.21.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$8,226.74
Line Discount	\$0.00
Net Subtotal	\$8,226.74
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$8,226.74



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13981698
Cost Center	1402 ED
Document Date	05/24/2023
Payment Due Date	07/24/2023
Invoice Print	N

Bill To:
MCKESSON CORP JEFFERSONVILLE
8200 BLUEGRASS RD
JEFFERSONVILLE, OH 43128

Ship To:
MCKESSON CORP JEFFERSONVILLE
8200 BLUEGRASS RD
JEFFERSONVILLE, OH 43128
State License # : 0132000107

Account Nbr: 7855352	Purchase Order: 8163624856	Customer Ref:
State License: 0132000107	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/24/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/24/2023	Sales Order: 16125973

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	1	EACH	\$709.82	\$709.82	\$0.00 0.00 %	\$709.82
Subtotals:						\$709.82	\$0.00	\$709.82

Shipment Information: 1Z5041EXA808161505
If payment is received by 07/23/2023, Pay \$695.62.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$709.82
Line Discount	\$0.00
Net Subtotal	\$709.82
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$709.82



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13980100
Cost Center	1402 ED
Document Date	05/24/2023
Payment Due Date	07/24/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
CONROE DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
3301 POLLOK DRIVE
DBA MCKESSON DRUG CO
CONROE, TX 77303
State License # : 0082692-RX

Account Nbr: 7554725	Purchase Order: 8115888332	Customer Ref:
State License: 0082692-RX	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/24/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/24/2023	Sales Order: 16125975

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TGBG	2	EACH	\$1,255.83	\$2,511.66	\$0.00 0.00 %	\$2,511.66
Subtotals:						\$2,511.66	\$0.00	\$2,511.66

Shipment Information: 1Z5041EX0308161338
If payment is received by 07/23/2023, Pay \$2,461.43.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$2,511.66
Line Discount	\$0.00
Net Subtotal	\$2,511.66
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$2,511.66



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13980097
Cost Center	1402 ED
Document Date	05/24/2023
Payment Due Date	07/24/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
W SACRAMENTO DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY INC
3775 SEAPORT BOULEVARD
MCKESSON CORPORATION
WEST SACRAMENTO, CA 95691
State License # : WLS 1555

Account Nbr: 7554699	Purchase Order: 8182834691	Customer Ref:
State License: WLS 1555	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/24/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/24/2023	Sales Order: 16125977

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	24	EACH	\$709.82	\$17,035.68	\$0.00 0.00 %	\$17,035.68
2	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	1	EACH	\$709.82	\$709.82	\$0.00 0.00 %	\$709.82
Subtotals:						\$17,745.50	\$0.00	\$17,745.50

Shipment Information: 1Z5041EX0308169849, 1Z5041EXA808169918
If payment is received by 07/23/2023, Pay \$17,390.59.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$17,745.50
Line Discount	\$0.00
Net Subtotal	\$17,745.50
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$17,745.50



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13980099
Cost Center	1402 ED
Document Date	05/24/2023
Payment Due Date	07/24/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
OKLAHOMA CITY DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY
4012 SOUTH PURDUE
MCKESSON CORPORATION
OKLAHOMA CITY, OK 73179
State License # : 1-W-231

Account Nbr: 7554719	Purchase Order: 8165972349	Customer Ref:
State License: 1-W-231	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/24/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/24/2023	Sales Order: 16125978

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	6	EACH	\$709.82	\$4,258.92	\$0.00 0.00 %	\$4,258.92
2	03-0804-45 Cloderm Cream 45gm Tube CTN NDC: 71403080445	TFBW	12	CTN	\$373.17	\$4,478.04	\$0.00 0.00 %	\$4,478.04
Subtotals:						\$8,736.96	\$0.00	\$8,736.96

Shipment Information: 1Z5041EX0308161356
If payment is received by 07/23/2023, Pay \$8,562.22.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$8,736.96
Line Discount	\$0.00
Net Subtotal	\$8,736.96
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$8,736.96



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13980254
Cost Center	1402 ED
Document Date	05/24/2023
Payment Due Date	07/24/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
MONTGOMERY DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
10 HUDSON CROSSING DR
MONTGOMERY, NY 12549
State License # : 034926

Account Nbr: 7582128	Purchase Order: 8160812763	Customer Ref:
State License: 034926	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/24/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/24/2023	Sales Order: 16125979

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	7	EACH	\$1,255.83	\$8,790.81	\$0.00 0.00 %	\$8,790.81
Subtotals:						\$8,790.81	\$0.00	\$8,790.81

Shipment Information: 1Z5041EX0308161347
If payment is received by 07/23/2023, Pay \$8,614.99.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$8,790.81
Line Discount	\$0.00
Net Subtotal	\$8,790.81
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$8,790.81



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13980101
Cost Center	1402 ED
Document Date	05/24/2023
Payment Due Date	07/24/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4018
DOCUMENT PROCESSING
RUTHER GLEN DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
10504 MCKESSON DRIVE
DBA MCKESSON DRUG CO
RUTHER GLEN, VA 22546
State License # : 0215000392

Account Nbr: 7554730	Purchase Order: 8120626091	Customer Ref:
State License: 0215000392	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/24/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/24/2023	Sales Order: 16125981

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	3	EACH	\$1,255.83	\$3,767.49	\$0.00 0.00 %	\$3,767.49
Subtotals:						\$3,767.49	\$0.00	\$3,767.49

Shipment Information: 1Z5041EX0308161418
If payment is received by 07/23/2023, Pay \$3,692.14.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$3,767.49
Line Discount	\$0.00
Net Subtotal	\$3,767.49
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$3,767.49



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13999046
Cost Center	1402 ED
Document Date	05/31/2023
Payment Due Date	07/31/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4018
DOCUMENT PROCESSING
RUTHER GLEN DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
10504 MCKESSON DRIVE
DBA MCKESSON DRUG CO
RUTHER GLEN, VA 22546
State License # : 0215000392

Account Nbr: 7554730	Purchase Order: 8120626880	Customer Ref:
State License: 0215000392	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/31/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/31/2023	Sales Order: 16158402

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	1	EACH	\$709.82	\$709.82	\$0.00 0.00 %	\$709.82
Subtotals:						\$709.82	\$0.00	\$709.82

Shipment Information: 1Z5041EXA808287513
If payment is received by 07/30/2023, Pay \$695.62.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$709.82
Line Discount	\$0.00
Net Subtotal	\$709.82
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$709.82



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13999045
Cost Center	1402 ED
Document Date	05/31/2023
Payment Due Date	07/31/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
CONROE DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
3301 POLLOK DRIVE
DBA MCKESSON DRUG CO
CONROE, TX 77303
State License # : 0082692-RX

Account Nbr: 7554725	Purchase Order: 8115889164	Customer Ref:
State License: 0082692-RX	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/31/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/31/2023	Sales Order: 16158403

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	1	EACH	\$1,255.83	\$1,255.83	\$0.00 0.00 %	\$1,255.83
2	03-0804-45 Cloderm Cream 45gm Tube CTN NDC: 71403080445	TFBW	4	CTN	\$373.17	\$1,492.68	\$0.00 0.00 %	\$1,492.68
Subtotals:						\$2,748.51	\$0.00	\$2,748.51

Shipment Information: 1Z5041EX0308287408
If payment is received by 07/30/2023, Pay \$2,693.54.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$2,748.51
Line Discount	\$0.00
Net Subtotal	\$2,748.51
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$2,748.51



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13999044
Cost Center	1402 ED
Document Date	05/31/2023
Payment Due Date	07/31/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
OKLAHOMA CITY DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY
4012 SOUTH PURDUE
MCKESSON CORPORATION
OKLAHOMA CITY, OK 73179
State License # : 1-W-231

Account Nbr: 7554719	Purchase Order: 8165973173	Customer Ref:
State License: 1-W-231	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/31/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/31/2023	Sales Order: 16158408

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	1	EACH	\$709.82	\$709.82	\$0.00 0.00 %	\$709.82
Subtotals:						\$709.82	\$0.00	\$709.82

Shipment Information: 1Z5041EX0308287499
If payment is received by 07/30/2023, Pay \$695.62.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$709.82
Line Discount	\$0.00
Net Subtotal	\$709.82
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$709.82



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024
ICS State Permit(s): 0218 Exp. Date: 04/30/2025
ICS State Permit(s): 232247 Exp. Date: 04/30/2026

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
LAKELAND DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY
1515 KENDRICK LANE
MCKESSON CORPORATION
LAKELAND, FL 33805
State License # : 2213
FL HC License: N/A

INVOICE	
EDI Sales Order	
Document Number	DMI13999041
Cost Center	1402 ED
Document Date	05/31/2023
Payment Due Date	07/31/2023
Invoice Print	N

Account Nbr: 7554692	Purchase Order: 8195941299	Customer Ref:
State License: 2213	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/31/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/31/2023	Sales Order: 16158409

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	24	EACH	\$1,255.83	\$30,139.92	\$0.00 0.00 %	\$30,139.92
2	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	3	EACH	\$709.82	\$2,129.46	\$0.00 0.00 %	\$2,129.46
Subtotals:						\$32,269.38	\$0.00	\$32,269.38

Shipment Information: 1Z5041EX0308287560
If payment is received by 07/30/2023, Pay \$31,623.99.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401 Seller MNFR Permit#: 46333 Exp. Date: 06-30-2024

INVOICE SUMMARY	
Gross Subtotal	\$32,269.38
Line Discount	\$0.00
Net Subtotal	\$32,269.38
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$32,269.38



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14001241
Cost Center	1402 ED
Document Date	05/31/2023
Payment Due Date	07/31/2023
Invoice Print	N

Bill To:
MCKESSON CORP JEFFERSONVILLE
8200 BLUEGRASS RD
JEFFERSONVILLE, OH 43128

Ship To:
MCKESSON CORP JEFFERSONVILLE
8200 BLUEGRASS RD
JEFFERSONVILLE, OH 43128
State License # : 0132000107

Account Nbr: 7855352	Purchase Order: 8163625726	Customer Ref:
State License: 0132000107	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/31/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/31/2023	Sales Order: 16158413

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	2	EACH	\$709.82	\$1,419.64	\$0.00 0.00 %	\$1,419.64
Subtotals:						\$1,419.64	\$0.00	\$1,419.64

Shipment Information: 1Z5041EXA808287871
If payment is received by 07/30/2023, Pay \$1,391.25.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$1,419.64
Line Discount	\$0.00
Net Subtotal	\$1,419.64
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$1,419.64



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13999040
Cost Center	1402 ED
Document Date	05/31/2023
Payment Due Date	07/31/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
SANTA FE SPRINGS DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
9501 S NORWALK BOULEVARD
DBA MCKESSON DRUG CO
SANTA FE SPRINGS, CA 90670
State License # : WLS 3076

Account Nbr: 7554691	Purchase Order: 8147949438	Customer Ref:
State License: WLS 3076	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/31/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/31/2023	Sales Order: 16158415

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	03-0804-45 Cloderm Cream 45gm Tube CTN NDC: 71403080445	TFBW	1	CTN	\$373.17	\$373.17	\$0.00 0.00 %	\$373.17
Subtotals:						\$373.17	\$0.00	\$373.17

Shipment Information: 1Z5041EX0308291500
If payment is received by 07/30/2023, Pay \$365.71.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$373.17
Line Discount	\$0.00
Net Subtotal	\$373.17
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$373.17



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13999042
Cost Center	1402 ED
Document Date	05/31/2023
Payment Due Date	07/31/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
W SACRAMENTO DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY INC
3775 SEAPORT BOULEVARD
MCKESSON CORPORATION
WEST SACRAMENTO, CA 95691
State License # : WLS 1555

Account Nbr: 7554699	Purchase Order: 8182835373	Customer Ref:
State License: WLS 1555	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/31/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/31/2023	Sales Order: 16158411

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	24	EACH	\$709.82	\$17,035.68	\$0.00 0.00 %	\$17,035.68
2	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	5	EACH	\$709.82	\$3,549.10	\$0.00 0.00 %	\$3,549.10
3	0001-01CA Wyzora Cream 0.005%/0.064% EA CALIFORNIA NDC: 73499000101	TKAC	2	EACH	\$1,255.83	\$2,511.66	\$0.00 0.00 %	\$2,511.66
Subtotals:						\$23,096.44	\$0.00	\$23,096.44

Shipment Information: 1Z5041EX0308294838, 1Z5041EXA808292034
If payment is received by 07/30/2023, Pay \$22,634.51.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$23,096.44
Line Discount	\$0.00
Net Subtotal	\$23,096.44
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$23,096.44



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13999043
Cost Center	1402 ED
Document Date	05/31/2023
Payment Due Date	07/31/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
SALT LAKE DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
1900 SOUTH 4490 WEST
DBA MCKESSON DRUG CO
SALT LAKE CITY, UT 84104
State License # : 103539-1710

Account Nbr: 7554701	Purchase Order: 8180751469	Customer Ref:
State License: 103539-1710	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/31/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/31/2023	Sales Order: 16158412

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	1	EACH	\$1,255.83	\$1,255.83	\$0.00 0.00 %	\$1,255.83
2	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	2	EACH	\$709.82	\$1,419.64	\$0.00 0.00 %	\$1,419.64
3	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	2	EACH	\$709.82	\$1,419.64	\$0.00 0.00 %	\$1,419.64



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI13999043
Cost Center	1402 ED
Document Date	05/31/2023
Payment Due Date	07/31/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
SALT LAKE DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
1900 SOUTH 4490 WEST
DBA MCKESSON DRUG CO
SALT LAKE CITY, UT 84104
State License # : 103539-1710

Account Nbr: 7554701	Purchase Order: 8180751469	Customer Ref:
State License: 103539-1710	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 05/31/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 05/31/2023	Sales Order: 16158412

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
4	03-0804-45 Cloderm Cream 45gm Tube CTN NDC: 71403080445	TFBW	3	CTN	\$373.17	\$1,119.51	\$0.00 0.00 %	\$1,119.51
Subtotals:						\$5,214.62	\$0.00	\$5,214.62

Shipment Information: 1Z5041EX0308287604, 1Z5041EXA808287862
If payment is received by 07/30/2023, Pay \$5,110.33.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$5,214.62
Line Discount	\$0.00
Net Subtotal	\$5,214.62
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$5,214.62



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14024048
Cost Center	1402 ED
Document Date	06/07/2023
Payment Due Date	08/07/2023
Invoice Print	N

Bill To:
MCKESSON CORP JEFFERSONVILLE
8200 BLUEGRASS RD
JEFFERSONVILLE, OH 43128

Ship To:
MCKESSON CORP JEFFERSONVILLE
8200 BLUEGRASS RD
JEFFERSONVILLE, OH 43128
State License # : 0132000107

Account Nbr: 7855352	Purchase Order: 8163626492	Customer Ref:
State License: 0132000107	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/07/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/07/2023	Sales Order: 16195276

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	1	EACH	\$1,255.83	\$1,255.83	\$0.00 0.00 %	\$1,255.83
2	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	2	EACH	\$709.82	\$1,419.64	\$0.00 0.00 %	\$1,419.64
Subtotals:						\$2,675.47	\$0.00	\$2,675.47

Shipment Information: 1Z5041EX0308436452, 1Z5041EXA808436165
If payment is received by 08/06/2023, Pay \$2,621.96.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$2,675.47
Line Discount	\$0.00
Net Subtotal	\$2,675.47
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$2,675.47



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024
ICS State Permit(s): 0218 Exp. Date: 04/30/2025
ICS State Permit(s): 232247 Exp. Date: 04/30/2026

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
LAKELAND DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY
1515 KENDRICK LANE
MCKESSON CORPORATION
LAKELAND, FL 33805
State License # : 2213
FL HC License: N/A

INVOICE	
EDI Sales Order	
Document Number	DMI14022171
Cost Center	1402 ED
Document Date	06/07/2023
Payment Due Date	08/07/2023
Invoice Print	N

Account Nbr: 7554692	Purchase Order: 8195942004	Customer Ref:
State License: 2213	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/07/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/07/2023	Sales Order: 16195271

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	24	EACH	\$1,255.83	\$30,139.92	\$0.00 0.00 %	\$30,139.92
2	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	1	EACH	\$709.82	\$709.82	\$0.00 0.00 %	\$709.82
Subtotals:						\$30,849.74	\$0.00	\$30,849.74

Shipment Information: 1Z5041EX0308436309
If payment is received by 08/06/2023, Pay \$30,232.75.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401 Seller MNFR Permit#: 46333 Exp. Date: 06-30-2024

INVOICE SUMMARY	
Gross Subtotal	\$30,849.74
Line Discount	\$0.00
Net Subtotal	\$30,849.74
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$30,849.74



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14022172
Cost Center	1402 ED
Document Date	06/07/2023
Payment Due Date	08/07/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
SALT LAKE DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
1900 SOUTH 4490 WEST
DBA MCKESSON DRUG CO
SALT LAKE CITY, UT 84104
State License # : 103539-1710

Account Nbr: 7554701	Purchase Order: 8180751945	Customer Ref:
State License: 103539-1710	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/07/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/07/2023	Sales Order: 16195275

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	4	EACH	\$1,255.83	\$5,023.32	\$0.00 0.00 %	\$5,023.32
2	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	5	EACH	\$709.82	\$3,549.10	\$0.00 0.00 %	\$3,549.10
3	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	2	EACH	\$709.82	\$1,419.64	\$0.00 0.00 %	\$1,419.64



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14022172
Cost Center	1402 ED
Document Date	06/07/2023
Payment Due Date	08/07/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
SALT LAKE DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
1900 SOUTH 4490 WEST
DBA MCKESSON DRUG CO
SALT LAKE CITY, UT 84104
State License # : 103539-1710

Account Nbr: 7554701	Purchase Order: 8180751945	Customer Ref:
State License: 103539-1710	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/07/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/07/2023	Sales Order: 16195275

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
4	03-0804-45 Cloderm Cream 45gm Tube CTN NDC: 71403080445	TFBW	1	CTN	\$373.17	\$373.17	\$0.00 0.00 %	\$373.17
Subtotals:						\$10,365.23	\$0.00	\$10,365.23

Shipment Information: 1Z5041EX0308436667, 1Z5041EXA808436101
If payment is received by 08/06/2023, Pay \$10,157.93.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$10,365.23
Line Discount	\$0.00
Net Subtotal	\$10,365.23
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$10,365.23



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14022173
Cost Center	1402 ED
Document Date	06/07/2023
Payment Due Date	08/07/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
OFALLON DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
1 COMMERCE DRIVE
DBA MCKESSON DRUG CO
OFALLON, MO 63366
State License # : 900115

Account Nbr: 7554704	Purchase Order: 8183869074	Customer Ref:
State License: 900115	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/07/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/07/2023	Sales Order: 16195272

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	3	EACH	\$709.82	\$2,129.46	\$0.00 0.00 %	\$2,129.46
Subtotals:						\$2,129.46	\$0.00	\$2,129.46

Shipment Information: 1Z5041EX0308436130
If payment is received by 08/06/2023, Pay \$2,086.87.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$2,129.46
Line Discount	\$0.00
Net Subtotal	\$2,129.46
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$2,129.46



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14022174
Cost Center	1402 ED
Document Date	06/07/2023
Payment Due Date	08/07/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
OKLAHOMA CITY DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY
4012 SOUTH PURDUE
MCKESSON CORPORATION
OKLAHOMA CITY, OK 73179
State License # : 1-W-231

Account Nbr: 7554719	Purchase Order: 8165973929	Customer Ref:
State License: 1-W-231	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/07/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/07/2023	Sales Order: 16195277

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	4	EACH	\$709.82	\$2,839.28	\$0.00 0.00 %	\$2,839.28
2	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	4	EACH	\$709.82	\$2,839.28	\$0.00 0.00 %	\$2,839.28
Subtotals:						\$5,678.56	\$0.00	\$5,678.56

Shipment Information: 1Z5041EX0308436345, 1Z5041EXA808436094
If payment is received by 08/06/2023, Pay \$5,564.99.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$5,678.56
Line Discount	\$0.00
Net Subtotal	\$5,678.56
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$5,678.56



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14022175
Cost Center	1402 ED
Document Date	06/07/2023
Payment Due Date	08/07/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
CONROE DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
3301 POLLOK DRIVE
DBA MCKESSON DRUG CO
CONROE, TX 77303
State License # : 0082692-RX

Account Nbr: 7554725	Purchase Order: 8115889931	Customer Ref:
State License: 0082692-RX	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/07/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/07/2023	Sales Order: 16195265

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	4	EACH	\$1,255.83	\$5,023.32	\$0.00 0.00 %	\$5,023.32
Subtotals:						\$5,023.32	\$0.00	\$5,023.32

Shipment Information: 1Z5041EX0308436283
If payment is received by 08/06/2023, Pay \$4,922.85.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$5,023.32
Line Discount	\$0.00
Net Subtotal	\$5,023.32
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$5,023.32



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14022176
Cost Center	1402 ED
Document Date	06/07/2023
Payment Due Date	08/07/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4018
DOCUMENT PROCESSING
RUTHER GLEN DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
10504 MCKESSON DRIVE
DBA MCKESSON DRUG CO
RUTHER GLEN, VA 22546
State License # : 0215000392

Account Nbr: 7554730	Purchase Order: 8120627609	Customer Ref:
State License: 0215000392	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/07/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/07/2023	Sales Order: 16195268

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	2	EACH	\$709.82	\$1,419.64	\$0.00 0.00 %	\$1,419.64
Subtotals:						\$1,419.64	\$0.00	\$1,419.64

Shipment Information: 1Z5041EXA808436174
If payment is received by 08/06/2023, Pay \$1,391.25.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$1,419.64
Line Discount	\$0.00
Net Subtotal	\$1,419.64
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$1,419.64



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024
ICS State Permit(s): 0218 Exp. Date: 04/30/2025
ICS State Permit(s): 232247 Exp. Date: 04/30/2026

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
LAKELAND DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY
1515 KENDRICK LANE
MCKESSON CORPORATION
LAKELAND, FL 33805
State License #: 2213
FL HC License: N/A

INVOICE	
EDI Sales Order	
Document Number	DMI14045237
Cost Center	1402 ED
Document Date	06/14/2023
Payment Due Date	08/14/2023
Invoice Print	N

Account Nbr: 7554692	Purchase Order: 8195942725	Customer Ref:
State License: 2213	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/14/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/14/2023	Sales Order: 16235074

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	24	EACH	\$1,255.83	\$30,139.92	\$0.00 0.00 %	\$30,139.92
2	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	6	EACH	\$709.82	\$4,258.92	\$0.00 0.00 %	\$4,258.92
Subtotals:						\$34,398.84	\$0.00	\$34,398.84

Shipment Information: 1Z5041EX0308571725
If payment is received by 08/13/2023, Pay \$33,710.86.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401 Seller MNFR Permit#: 46333 Exp. Date: 06-30-2024

INVOICE SUMMARY	
Gross Subtotal	\$34,398.84
Line Discount	\$0.00
Net Subtotal	\$34,398.84
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$34,398.84



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14045397
Cost Center	1402 ED
Document Date	06/14/2023
Payment Due Date	08/14/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
MONTGOMERY DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
10 HUDSON CROSSING DR
MONTGOMERY, NY 12549
State License # : 034926

Account Nbr: 7582128	Purchase Order: 8160815089	Customer Ref:
State License: 034926	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/14/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/14/2023	Sales Order: 16235080

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	2	EACH	\$1,255.83	\$2,511.66	\$0.00 0.00 %	\$2,511.66
Subtotals:						\$2,511.66	\$0.00	\$2,511.66

Shipment Information: 1Z5041EX0308572457
If payment is received by 08/13/2023, Pay \$2,461.43.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$2,511.66
Line Discount	\$0.00
Net Subtotal	\$2,511.66
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$2,511.66



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14047599
Cost Center	1402 ED
Document Date	06/14/2023
Payment Due Date	08/14/2023
Invoice Print	N

Bill To:
MCKESSON CORP JEFFERSONVILLE
8200 BLUEGRASS RD
JEFFERSONVILLE, OH 43128

Ship To:
MCKESSON CORP JEFFERSONVILLE
8200 BLUEGRASS RD
JEFFERSONVILLE, OH 43128
State License # : 0132000107

Account Nbr: 7855352	Purchase Order: 8163627249	Customer Ref:
State License: 0132000107	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/14/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/14/2023	Sales Order: 16235081

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	03-0804-45 Cloderm Cream 45gm Tube CTN NDC: 71403080445	TFBW	9	CTN	\$373.17	\$3,358.53	\$0.00 0.00 %	\$3,358.53
Subtotals:						\$3,358.53	\$0.00	\$3,358.53

Shipment Information: 1Z5041EX0308572751
If payment is received by 08/13/2023, Pay \$3,291.36.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$3,358.53
Line Discount	\$0.00
Net Subtotal	\$3,358.53
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$3,358.53



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14045238
Cost Center	1402 ED
Document Date	06/14/2023
Payment Due Date	08/14/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
SALT LAKE DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
1900 SOUTH 4490 WEST
DBA MCKESSON DRUG CO
SALT LAKE CITY, UT 84104
State License # : 103539-1710

Account Nbr: 7554701	Purchase Order: 8180752450	Customer Ref:
State License: 103539-1710	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/14/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/14/2023	Sales Order: 16235075

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	1	EACH	\$1,255.83	\$1,255.83	\$0.00 0.00 %	\$1,255.83
2	0101-30 Minolira 105MG Tabs 30Ct Each NDC: 71403010130	T2300765	2	EACH	\$709.82	\$1,419.64	\$0.00 0.00 %	\$1,419.64
3	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	3	EACH	\$709.82	\$2,129.46	\$0.00 0.00 %	\$2,129.46
Subtotals:						\$4,804.93	\$0.00	\$4,804.93

Shipment Information: 1Z5041EX0308571734, 1Z5041EXA808571849
If payment is received by 08/13/2023, Pay \$4,708.83.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$4,804.93
Line Discount	\$0.00
Net Subtotal	\$4,804.93
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$4,804.93



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14045239
Cost Center	1402 ED
Document Date	06/14/2023
Payment Due Date	08/14/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
OKLAHOMA CITY DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY
4012 SOUTH PURDUE
MCKESSON CORPORATION
OKLAHOMA CITY, OK 73179
State License # : 1-W-231

Account Nbr: 7554719	Purchase Order: 8165974698	Customer Ref:
State License: 1-W-231	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/14/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/14/2023	Sales Order: 16235077

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0102-30 Minolira 135MG Tabs 30Ct Each NDC: 71403010230	T2201701	5	EACH	\$709.82	\$3,549.10	\$0.00 0.00 %	\$3,549.10
Subtotals:						\$3,549.10	\$0.00	\$3,549.10

Shipment Information: 1Z5041EXA808572142
If payment is received by 08/13/2023, Pay \$3,478.12.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$3,549.10
Line Discount	\$0.00
Net Subtotal	\$3,549.10
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$3,549.10



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14045240
Cost Center	1402 ED
Document Date	06/14/2023
Payment Due Date	08/14/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
CONROE DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
3301 POLLOK DRIVE
DBA MCKESSON DRUG CO
CONROE, TX 77303
State License # : 0082692-RX

Account Nbr: 7554725	Purchase Order: 8115890707	Customer Ref:
State License: 0082692-RX	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/14/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/14/2023	Sales Order: 16235085

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	5	EACH	\$1,255.83	\$6,279.15	\$0.00 0.00 %	\$6,279.15
Subtotals:						\$6,279.15	\$0.00	\$6,279.15

Shipment Information: 1Z5041EX0308572153
If payment is received by 08/13/2023, Pay \$6,153.57.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$6,279.15
Line Discount	\$0.00
Net Subtotal	\$6,279.15
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$6,279.15



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14045241
Cost Center	1402 ED
Document Date	06/14/2023
Payment Due Date	08/14/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
AURORA MCKESSON ST DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
1995 MCKESSON ST SUITE 101
DBA MCKESSON DRUG COMPANY
AURORA, IL 60502
State License # : 004002848

Account Nbr: 7554728	Purchase Order: 8144730401	Customer Ref:
State License: 004002848	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/14/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/14/2023	Sales Order: 16235084

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	03-0804-45 Cloderm Cream 45gm Tube CTN NDC: 71403080445	TFBW	1	CTN	\$373.17	\$373.17	\$0.00 0.00 %	\$373.17
Subtotals:						\$373.17	\$0.00	\$373.17

Shipment Information: 1Z5041EX0308572162
If payment is received by 08/13/2023, Pay \$365.71.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$373.17
Line Discount	\$0.00
Net Subtotal	\$373.17
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$373.17



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
EDI Sales Order	
Document Number	DMI14045242
Cost Center	1402 ED
Document Date	06/14/2023
Payment Due Date	08/14/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4018
DOCUMENT PROCESSING
RUTHER GLEN DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
10504 MCKESSON DRIVE
DBA MCKESSON DRUG CO
RUTHER GLEN, VA 22546
State License # : 0215000392

Account Nbr: 7554730	Purchase Order: 8120628350	Customer Ref:
State License: 0215000392	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 06/14/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 06/14/2023	Sales Order: 16235063

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	0001-01 Wyzora Cream 0.005%/0.064% EA NDC: 73499000101	TKAC	6	EACH	\$1,255.83	\$7,534.98	\$0.00 0.00 %	\$7,534.98
Subtotals:						\$7,534.98	\$0.00	\$7,534.98

Shipment Information: 1Z5041EX0308572180
If payment is received by 08/13/2023, Pay \$7,384.28.
Terms: 2% 60 Net 61

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$7,534.98
Line Discount	\$0.00
Net Subtotal	\$7,534.98
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$7,534.98



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024
ICS State Permit(s): 0218 Exp. Date: 04/30/2025
ICS State Permit(s): 232247 Exp. Date: 04/30/2026

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
LAKELAND DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY
1515 KENDRICK LANE
MCKESSON CORPORATION
LAKELAND, FL 33805
State License # : 2213
FL HC License: N/A

INVOICE	
Chargeback Debit	
Document Number	DMI14155014
Cost Center	1402 CD
Document Date	07/20/2023
Payment Due Date	09/19/2023
Invoice Print	N

Account Nbr: 7554692	Purchase Order: 4200FEHLLK	Customer Ref:
State License: 2213	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 07/20/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 07/20/2023	Sales Order: 16418736

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	03-0804-45 Cloderm Cream 45gm Tube CTN NDC: 71403080445		1	CTN	\$372.72	\$372.72	\$0.00 0.00 %	\$372.72
Subtotals:						\$372.72	\$0.00	\$372.72

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401 Seller MNFR Permit#: 46333 Exp. Date: 06-30-2024

INVOICE SUMMARY	
Gross Subtotal	\$372.72
Line Discount	\$0.00
Net Subtotal	\$372.72
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$372.72



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
Chargeback Debit	
Document Number	DMI14245759
Cost Center	1402 CD
Document Date	08/17/2023
Payment Due Date	10/17/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
MEMPHIS DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON DRUG COMPANY
4836 SOUTHRIDGE BLVD
MCKESSON CORPORATION
MEMPHIS, TN 38141
State License # : 00000032-MWD

Account Nbr: 7554694	Purchase Order: 4226VEHLMD	Customer Ref:
State License: 00000032-MWD	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 08/17/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 08/17/2023	Sales Order: 16572642

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	03-0003-30 Rhofade 1% Cream 30g NDC: 7140300330		1	EACH	\$178.50	\$178.50	\$0.00 0.00 %	\$178.50
Subtotals:						\$178.50	\$0.00	\$178.50

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$178.50
Line Discount	\$0.00
Net Subtotal	\$178.50
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$178.50



**DISTRIBUTED BY INTEGRATED
COMMERCIALIZATION SOLUTIONS, LLC
420 INTERNATIONAL BLVD. SUITE 500
BROOKS, KY 40109**

Distributor DEA License #: RI0248686 Exp. Date: 11/30/2024

INVOICE	
Chargeback Debit	
Document Number	DMI14279519
Cost Center	1402 CD
Document Date	08/29/2023
Payment Due Date	10/29/2023
Invoice Print	N

Bill To:
MCKESSON FINANCIAL CENTER
PO BOX 4017
DOCUMENT PROCESSING
OFALLON DIVISION
DANVILLE, IL 61834

Ship To:
MCKESSON CORPORATION
1 COMMERCE DRIVE
DBA MCKESSON DRUG CO
OFALLON, MO 63366
State License # : 900115

Account Nbr: 7554704	Purchase Order: 4240FEHLSI	Customer Ref:
State License: 900115	Payment Terms: 2% 60 Net 61	Shipped Via: UPS Ground - No guarantee
DEA License:	Date Ordered: 08/29/2023	FOB: Free on Board - Destination
State PRMT:	Date Shipped: 08/29/2023	Sales Order: 16628807

LINE	PRODUCT CODE & DESCRIPTION	LOT	QTY	U/M	UNIT PRICE	GROSS AMT	DISCOUNT VALUE %	NET AMT
1	03-0003-30 Rhofade 1% Cream 30g NDC: 7140300330		1	EACH	\$379.42	\$379.42	\$0.00 0.00 %	\$379.42
Subtotals:						\$379.42	\$0.00	\$379.42

Remit To
EPI Health LLC P.O. Box 744233 Atlanta, GA 30384-4233

Sold By
EPI HEALTH LLC 174 MEETING STREET SUITE 200 CHARLESTON, SC 29401

INVOICE SUMMARY	
Gross Subtotal	\$379.42
Line Discount	\$0.00
Net Subtotal	\$379.42
Other Disc/Fees	\$0.00
Freight	\$0.00
Handling	\$0.00
Tax	\$0.00
Total Due	\$379.42

EXHIBIT E

McKesson Sales Order Details associated with Open McKesson Invoices

Sales Order Details

Order Number: 16125970	Order Submit Date: 05/24/2023	Order Date: 05/24/2023
Order Submit Time: 08:07:47	Order Create Date: 05/24/2023	PO Number: 8195940533
Customer: 7554692 MCKESSON DRUG COMPANY	EDI Supplier no: 1402-PM0000771	Customer Ref:
Third Party: 8195940533	Order Type: ED EDI Sales Order	Order Value: \$5,897.68
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$103,469.41	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON DRUG COMPANY 1515 KENDRICK LANE MCKESSON CORPORATION LAKELAND, FL 33805	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING LAKELAND DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16125977	Order Submit Date: 05/24/2023	Order Date: 05/24/2023
Order Submit Time: 08:07:50	Order Create Date: 05/24/2023	PO Number: 8182834691
Customer: 7554699 MCKESSON DRUG COMPANY INC	EDI Supplier no: 1402-PM0021535	Customer Ref:
Third Party: 8182834691	Order Type: ED EDI Sales Order	Order Value: \$17,745.50
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$41,551.76	MOT: Refer to the MOT column for each line	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON DRUG COMPANY INC 3775 SEAPORT BOULEVARD MCKESSON CORPORATION WEST SACRAMENTO, CA 95691	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING W SACRAMENTO DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16125971	Order Submit Date: 05/24/2023	Order Date: 05/24/2023
Order Submit Time: 08:07:48	Order Create Date: 05/24/2023	PO Number: 8180750971
Customer: 7554701 MCKESSON CORPORATION	EDI Supplier no: 1402-PM0023046	Customer Ref:
Third Party: 8180750971	Order Type: ED EDI Sales Order	Order Value: \$8,226.74
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$28,611.52	MOT: Refer to the MOT column for each line	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON CORPORATION 1900 SOUTH 4490 WEST DBA MCKESSON DRUG CO SALT LAKE CITY, UT 84104	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING SALT LAKE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16125978	Order Submit Date: 05/24/2023	Order Date: 05/24/2023
Order Submit Time: 08:07:50	Order Create Date: 05/24/2023	PO Number: 8165972349
Customer: 7554719 MCKESSON DRUG COMPANY	EDI Supplier no: 1402-RM0138328	Customer Ref:
Third Party: 8165972349	Order Type: ED EDI Sales Order	Order Value: \$8,736.96
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$17,980.04	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON DRUG COMPANY 4012 SOUTH PURDUE MCKESSON CORPORATION OKLAHOMA CITY, OK 73179	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING OKLAHOMA CITY DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16125975	Order Submit Date: 05/24/2023	Order Date: 05/24/2023
Order Submit Time: 08:07:49	Order Create Date: 05/24/2023	PO Number: 8115888332
Customer: 7554725 MCKESSON CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref:
Third Party: 8115888332	Order Type: ED EDI Sales Order	Order Value: \$2,511.66
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON CORPORATION 3301 POLLOK DRIVE DBA MCKESSON DRUG CO CONROE, TX 77303	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16125981	Order Submit Date: 05/24/2023	Order Date: 05/24/2023
Order Submit Time: 08:07:51	Order Create Date: 05/24/2023	PO Number: 8120626091
Customer: 7554730 MCKESSON CORPORATION	EDI Supplier no: 1402-RM0424363	Customer Ref:
Third Party: 8120626091	Order Type: ED EDI Sales Order	Order Value: \$3,767.49
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$13,431.93	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON CORPORATION 10504 MCKESSON DRIVE DBA MCKESSON DRUG CO RUTHER GLEN, VA 22546	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4018 DOCUMENT PROCESSING RUTHER GLEN DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16125979	Order Submit Date: 05/24/2023	Order Date: 05/24/2023
Order Submit Time: 08:07:50	Order Create Date: 05/24/2023	PO Number: 8160812763
Customer: 7582128 MCKESSON CORPORATION	EDI Supplier no: 1402-RM0513401	Customer Ref:
Third Party: 8160812763	Order Type: ED EDI Sales Order	Order Value: \$8,790.81
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$11,302.47	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON CORPORATION 10 HUDSON CROSSING DR MONTGOMERY, NY 12549	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING MONTGOMERY DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16125973	Order Submit Date: 05/24/2023	Order Date: 05/24/2023
Order Submit Time: 08:07:49	Order Create Date: 05/24/2023	PO Number: 8163624856
Customer: 7855352 MCKESSION CORP JEFFERSONVILLE	EDI Supplier no: 1402-RM0623834	Customer Ref:
Third Party: 8163624856	Order Type: ED EDI Sales Order	Order Value: \$709.82
Discount Base: \$0.00	Credit Limit: 250000	Terms Of Payment: 2% 60 Net 61
Balance: \$8,163.46	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORP JEFFERSONVILLE 8200 BLUEGRASS RD JEFFERSONVILLE, OH 43128	Bill To Address: MCKESSION CORP JEFFERSONVILLE 8200 BLUEGRASS RD JEFFERSONVILLE, OH 43128
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Sales Order Details

Order Number: 16158415	Order Submit Date: 05/31/2023	Order Date: 05/31/2023
Order Submit Time: 08:21:26	Order Create Date: 05/31/2023	PO Number: 8147949438
Customer: 7554691 MCKESSION CORPORATION	EDI Supplier no: 1402-PF0000012	Customer Ref:
Third Party: 8147949438	Order Type: ED EDI Sales Order	Order Value: \$373.17
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$373.17	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 9501 S NORWALK BOULEVARD DBA MCKESSION DRUG CO SANTA FE SPRINGS, CA 90670	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING SANTA FE SPRINGS DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16158409	Order Submit Date: 05/31/2023	Order Date: 05/31/2023
Order Submit Time: 08:21:25	Order Create Date: 05/31/2023	PO Number: 8195941299
Customer: 7554692 MCKESSION DRUG COMPANY	EDI Supplier no: 1402-PM0000771	Customer Ref:
Third Party: 8195941299	Order Type: ED EDI Sales Order	Order Value: \$32,269.38
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$103,469.41	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION DRUG COMPANY 1515 KENDRICK LANE MCKESSION CORPORATION LAKELAND, FL 33805	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING LAKELAND DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16158411	Order Submit Date: 05/31/2023	Order Date: 05/31/2023
Order Submit Time: 08:21:25	Order Create Date: 05/31/2023	PO Number: 8182835373
Customer: 7554699 MCKESSION DRUG COMPANY INC	EDI Supplier no: 1402-PM0021535	Customer Ref:
Third Party: 8182835373	Order Type: ED EDI Sales Order	Order Value: \$23,096.44
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$41,551.76	MOT: Refer to the MOT column for each line	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION DRUG COMPANY INC 3775 SEAPORT BOULEVARD MCKESSION CORPORATION WEST SACRAMENTO, CA 95691	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING W SACRAMENTO DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16158412	Order Submit Date: 05/31/2023	Order Date: 05/31/2023
Order Submit Time: 08:21:26	Order Create Date: 05/31/2023	PO Number: 8180751469
Customer: 7554701 MCKESSION CORPORATION	EDI Supplier no: 1402-PM0023046	Customer Ref:
Third Party: 8180751469	Order Type: ED EDI Sales Order	Order Value: \$5,214.62
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$28,611.52	MOT: Refer to the MOT column for each line	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 1900 SOUTH 4490 WEST DBA MCKESSION DRUG CO SALT LAKE CITY, UT 84104	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING SALT LAKE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16158408	Order Submit Date: 05/31/2023	Order Date: 05/31/2023
Order Submit Time: 08:21:25	Order Create Date: 05/31/2023	PO Number: 8165973173
Customer: 7554719 MCKESSION DRUG COMPANY	EDI Supplier no: 1402-RM0138328	Customer Ref:
Third Party: 8165973173	Order Type: ED EDI Sales Order	Order Value: \$709.82
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$17,980.04	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION DRUG COMPANY 4012 SOUTH PURDUE MCKESSION CORPORATION OKLAHOMA CITY, OK 73179	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING OKLAHOMA CITY DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16158403	Order Submit Date: 05/31/2023	Order Date: 05/31/2023
Order Submit Time: 08:21:24	Order Create Date: 05/31/2023	PO Number: 8115889164
Customer: 7554725 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref:
Third Party: 8115889164	Order Type: ED EDI Sales Order	Order Value: \$2,748.51
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 3301 POLLOK DRIVE DBA MCKESSION DRUG CO CONROE, TX 77303	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16158403	Order Submit Date: 05/31/2023	Order Date: 05/31/2023
Order Submit Time: 08:21:24	Order Create Date: 05/31/2023	PO Number: 8115889164
Customer: 7554725 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref:
Third Party: 8115889164	Order Type: ED EDI Sales Order	Order Value: \$2,748.51
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 3301 POLLOK DRIVE DBA MCKESSION DRUG CO CONROE, TX 77303	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16158402	Order Submit Date: 05/31/2023	Order Date: 05/31/2023
Order Submit Time: 08:21:23	Order Create Date: 05/31/2023	PO Number: 8120626880
Customer: 7554730 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0424363	Customer Ref:
Third Party: 8120626880	Order Type: ED EDI Sales Order	Order Value: \$709.82
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$13,431.93	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 10504 MCKESSION DRIVE DBA MCKESSION DRUG CO RUTHER GLEN, VA 22546	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4018 DOCUMENT PROCESSING RUTHER GLEN DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16158413	Order Submit Date: 05/31/2023	Order Date: 05/31/2023
Order Submit Time: 08:21:26	Order Create Date: 05/31/2023	PO Number: 8163625726
Customer: 7855352 MCKESSION CORP JEFFERSONVILLE	EDI Supplier no: 1402-RM0623834	Customer Ref:
Third Party: 8163625726	Order Type: ED EDI Sales Order	Order Value: \$1,419.64
Discount Base: \$0.00	Credit Limit: 250000	Terms Of Payment: 2% 60 Net 61
Balance: \$8,163.46	MOT: 009 UPS Ground - Signature Req'd	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORP JEFFERSONVILLE 8200 BLUEGRASS RD JEFFERSONVILLE, OH 43128	Bill To Address: MCKESSION CORP JEFFERSONVILLE 8200 BLUEGRASS RD JEFFERSONVILLE, OH 43128
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Sales Order Details

Order Number: 16195271	Order Submit Date: 06/07/2023	Order Date: 06/07/2023
Order Submit Time: 07:53:07	Order Create Date: 06/07/2023	PO Number: 8195942004
Customer: 7554692 MCKESSION DRUG COMPANY	EDI Supplier no: 1402-PM0000771	Customer Ref:
Third Party: 8195942004	Order Type: ED EDI Sales Order	Order Value: \$30,849.74
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$103,469.41	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION DRUG COMPANY 1515 KENDRICK LANE MCKESSION CORPORATION LAKELAND, FL 33805	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING LAKELAND DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16195275	Order Submit Date: 06/07/2023	Order Date: 06/07/2023
Order Submit Time: 07:53:07	Order Create Date: 06/07/2023	PO Number: 8180751945
Customer: 7554701 MCKESSION CORPORATION	EDI Supplier no: 1402-PM0023046	Customer Ref:
Third Party: 8180751945	Order Type: ED EDI Sales Order	Order Value: \$10,365.23
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$28,611.52	MOT: Refer to the MOT column for each line	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 1900 SOUTH 4490 WEST DBA MCKESSION DRUG CO SALT LAKE CITY, UT 84104	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING SALT LAKE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16195272	Order Submit Date: 06/07/2023	Order Date: 06/07/2023
Order Submit Time: 07:53:07	Order Create Date: 06/07/2023	PO Number: 8183869074
Customer: 7554704 MCKESSION CORPORATION	EDI Supplier no: 1402-PM0037374	Customer Ref:
Third Party: 8183869074	Order Type: ED EDI Sales Order	Order Value: \$2,129.46
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$3,052.42	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 1 COMMERCE DRIVE DBA MCKESSION DRUG CO OFALLON, MO 63366	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING OFALLON DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16195277	Order Submit Date: 06/07/2023	Order Date: 06/07/2023
Order Submit Time: 07:53:08	Order Create Date: 06/07/2023	PO Number: 8165973929
Customer: 7554719 MCKESSION DRUG COMPANY	EDI Supplier no: 1402-RM0138328	Customer Ref:
Third Party: 8165973929	Order Type: ED EDI Sales Order	Order Value: \$5,678.56
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$17,980.04	MOT: Refer to the MOT column for each line	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION DRUG COMPANY 4012 SOUTH PURDUE MCKESSION CORPORATION OKLAHOMA CITY, OK 73179	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING OKLAHOME CITY DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16195265	Order Submit Date: 06/07/2023	Order Date: 06/07/2023
Order Submit Time: 07:53:06	Order Create Date: 06/07/2023	PO Number: 8115889931
Customer: 7554725 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref:
Third Party: 8115889931	Order Type: ED EDI Sales Order	Order Value: \$5,023.32
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 3301 POLLOK DRIVE DBA MCKESSION DRUG CO CONROE, TX 77303	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16195268	Order Submit Date: 06/07/2023	Order Date: 06/07/2023
Order Submit Time: 07:53:06	Order Create Date: 06/07/2023	PO Number: 8120627609
Customer: 7554730 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0424363	Customer Ref:
Third Party: 8120627609	Order Type: ED EDI Sales Order	Order Value: \$1,419.64
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$13,431.93	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 10504 MCKESSION DRIVE DBA MCKESSION DRUG CO RUTHER GLEN, VA 22546	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4018 DOCUMENT PROCESSING RUTHER GLEN DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16195276	Order Submit Date: 06/07/2023	Order Date: 06/07/2023
Order Submit Time: 07:53:08	Order Create Date: 06/07/2023	PO Number: 8163626492
Customer: 7855352 MCKESSION CORP JEFFERSONVILLE	EDI Supplier no: 1402-RM0623834	Customer Ref:
Third Party: 8163626492	Order Type: ED EDI Sales Order	Order Value: \$2,675.47
Discount Base: \$0.00	Credit Limit: 250000	Terms Of Payment: 2% 60 Net 61
Balance: \$8,163.46	MOT: Refer to the MOT column for each line	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORP JEFFERSONVILLE 8200 BLUEGRASS RD JEFFERSONVILLE, OH 43128	Bill To Address: MCKESSION CORP JEFFERSONVILLE 8200 BLUEGRASS RD JEFFERSONVILLE, OH 43128
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Sales Order Details

Order Number: 16235074	Order Submit Date: 06/14/2023	Order Date: 06/14/2023
Order Submit Time: 07:37:00	Order Create Date: 06/14/2023	PO Number: 8195942725
Customer: 7554692 MCKESSION DRUG COMPANY	EDI Supplier no: 1402-PM0000771	Customer Ref:
Third Party: 8195942725	Order Type: ED EDI Sales Order	Order Value: \$34,398.84
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$103,469.41	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION DRUG COMPANY 1515 KENDRICK LANE MCKESSION CORPORATION LAKELAND, FL 33805	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING LAKELAND DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16235075	Order Submit Date: 06/14/2023	Order Date: 06/14/2023
Order Submit Time: 07:37:01	Order Create Date: 06/14/2023	PO Number: 8180752450
Customer: 7554701 MCKESSION CORPORATION	EDI Supplier no: 1402-PM0023046	Customer Ref:
Third Party: 8180752450	Order Type: ED EDI Sales Order	Order Value: \$4,804.93
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$28,611.52	MOT: Refer to the MOT column for each line	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 1900 SOUTH 4490 WEST DBA MCKESSION DRUG CO SALT LAKE CITY, UT 84104	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING SALT LAKE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16235077	Order Submit Date: 06/14/2023	Order Date: 06/14/2023
Order Submit Time: 07:37:01	Order Create Date: 06/14/2023	PO Number: 8165974698
Customer: 7554719 MCKESSION DRUG COMPANY	EDI Supplier no: 1402-RM0138328	Customer Ref:
Third Party: 8165974698	Order Type: ED EDI Sales Order	Order Value: \$3,549.10
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$17,980.04	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION DRUG COMPANY 4012 SOUTH PURDUE MCKESSION CORPORATION OKLAHOMA CITY, OK 73179	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING OKLAHOMA CITY DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16235085	Order Submit Date: 06/14/2023	Order Date: 06/14/2023
Order Submit Time: 07:37:02	Order Create Date: 06/14/2023	PO Number: 8115890707
Customer: 7554725 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref:
Third Party: 8115890707	Order Type: ED EDI Sales Order	Order Value: \$6,279.15
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 3301 POLLOK DRIVE DBA MCKESSION DRUG CO CONROE, TX 77303	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16235084	Order Submit Date: 06/14/2023	Order Date: 06/14/2023
Order Submit Time: 07:37:02	Order Create Date: 06/14/2023	PO Number: 8144730401
Customer: 7554728 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0380484	Customer Ref:
Third Party: 8144730401	Order Type: ED EDI Sales Order	Order Value: \$373.17
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: -\$8,839.44	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 1995 MCKESSION ST SUITE 101 DBA MCKESSION DRUG COMPANY AURORA, IL 60502	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING AURORA MCKESSION ST DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16235063	Order Submit Date: 06/14/2023	Order Date: 06/14/2023
Order Submit Time: 07:36:59	Order Create Date: 06/14/2023	PO Number: 8120628350
Customer: 7554730 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0424363	Customer Ref:
Third Party: 8120628350	Order Type: ED EDI Sales Order	Order Value: \$7,534.98
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$13,431.93	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 10504 MCKESSION DRIVE DBA MCKESSION DRUG CO RUTHER GLEN, VA 22546	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4018 DOCUMENT PROCESSING RUTHER GLEN DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16235080	Order Submit Date: 06/14/2023	Order Date: 06/14/2023
Order Submit Time: 07:37:02	Order Create Date: 06/14/2023	PO Number: 8160815089
Customer: 7582128 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0513401	Customer Ref:
Third Party: 8160815089	Order Type: ED EDI Sales Order	Order Value: \$2,511.66
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$11,302.47	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 10 HUDSON CROSSING DR MONTGOMERY, NY 12549	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING MONTGOMERY DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16235081	Order Submit Date: 06/14/2023	Order Date: 06/14/2023
Order Submit Time: 07:37:02	Order Create Date: 06/14/2023	PO Number: 8163627249
Customer: 7855352 MCKESSON CORP JEFFERSONVILLE	EDI Supplier no: 1402-RM0623834	Customer Ref:
Third Party: 8163627249	Order Type: ED EDI Sales Order	Order Value: \$3,358.53
Discount Base: \$0.00	Credit Limit: 250000	Terms Of Payment: 2% 60 Net 61
Balance: \$8,163.46	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON CORP JEFFERSONVILLE 8200 BLUEGRASS RD JEFFERSONVILLE, OH 43128	Bill To Address: MCKESSON CORP JEFFERSONVILLE 8200 BLUEGRASS RD JEFFERSONVILLE, OH 43128
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Sales Order Details

Order Number: 16418736	Order Submit Date: 07/20/2023	Order Date: 07/20/2023
Order Submit Time: 06:40:47	Order Create Date: 07/20/2023	PO Number: 4200FEHLLK
Customer: 7554692 MCKESSON DRUG COMPANY	EDI Supplier no: 1402-PM0000771	Customer Ref:
Third Party: 4200FEHLLK	Order Type: CD Chargeback Debit	Order Value: \$372.72
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$103,469.41	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON DRUG COMPANY 1515 KENDRICK LANE MCKESSON CORPORATION LAKELAND, FL 33805	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING LAKELAND DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16572642	Order Submit Date: 08/17/2023	Order Date: 08/17/2023
Order Submit Time: 16:10:19	Order Create Date: 08/17/2023	PO Number: 4226VEHLMD
Customer: 7554694 MCKESSON DRUG COMPANY	EDI Supplier no: 1402-PM0001951	Customer Ref:
Third Party: 4226VEHLMD	Order Type: CD Chargeback Debit	Order Value: \$178.50
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$178.50	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON DRUG COMPANY 4836 SOUTHRIDGE BLVD MCKESSON CORPORATION MEMPHIS, TN 38141	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING MEMPHIS DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 16628807	Order Submit Date: 08/29/2023	Order Date: 08/29/2023
Order Submit Time: 06:31:48	Order Create Date: 08/29/2023	PO Number: 4240FEHLSI
Customer: 7554704 MCKESSON CORPORATION	EDI Supplier no: 1402-PM0037374	Customer Ref:
Third Party: 4240FEHLSI	Order Type: CD Chargeback Debit	Order Value: \$379.42
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$3,052.42	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON CORPORATION 1 COMMERCE DRIVE DBA MCKESSON DRUG CO OFALLON, MO 63366	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING OFALLON DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 14747034	Order Submit Date: 08/30/2022	Order Date: 08/30/2022
Order Submit Time: 18:22:10	Order Create Date: 08/30/2022	PO Number: XI0722182768
Customer: 7554725 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref: 100534955-1
Third Party: 100534955-1	Order Type: RI Return - Inventory	Order Value: \$0.00
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 3301 POLLOK DRIVE DBA MCKESSION DRUG CO CONROE, TX 77303	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 14886900	Order Submit Date: 09/27/2022	Order Date: 09/27/2022
Order Submit Time: 22:18:12	Order Create Date: 09/27/2022	PO Number: XI0722182768
Customer: 7554725 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref: 100534955-2
Third Party: 100534955-2	Order Type: RI Return - Inventory	Order Value: \$0.00
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 3301 POLLOK DRIVE DBA MCKESSION DRUG CO CONROE, TX 77303	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 15581776	Order Submit Date: 02/13/2023	Order Date: 02/13/2023
Order Submit Time: 10:16:56	Order Create Date: 02/13/2023	PO Number: XI0722182768
Customer: 7554725 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref: 100534955-3
Third Party: 100534955-3	Order Type: RF Return - Financial	Order Value: \$836.04
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 3301 POLLOK DRIVE DBA MCKESSION DRUG CO CONROE, TX 77303	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 15664053	Order Submit Date: 02/28/2023	Order Date: 02/28/2023
Order Submit Time: 08:19:36	Order Create Date: 02/28/2023	PO Number: X10722182768
Customer: 7554725 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref: 100534955-4
Third Party: 100534955-4	Order Type: RA Return Update A/R No Inventory	Order Value: \$0.00
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 3301 POLLOK DRIVE DBA MCKESSION DRUG CO CONROE, TX 77303	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 15664054	Order Submit Date: 02/28/2023	Order Date: 02/28/2023
Order Submit Time: 08:19:36	Order Create Date: 02/28/2023	PO Number: X10722182768
Customer: 7554725 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref: 100534955-5
Third Party: 100534955-5	Order Type: RB Return Update A/R - Reverse RA	Order Value: \$266.50
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 3301 POLLOK DRIVE DBA MCKESSION DRUG CO CONROE, TX 77303	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 15637364	Order Submit Date: 02/23/2023	Order Date: 02/23/2023
Order Submit Time: 06:47:38	Order Create Date: 02/23/2023	PO Number: X10123189725
Customer: 7554725 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref: 100559405-1
Third Party: 100559405-1	Order Type: RI Return - Inventory	Order Value: \$0.00
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 3301 POLLOK DRIVE DBA MCKESSION DRUG CO CONROE, TX 77303	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 15645731	Order Submit Date: 02/24/2023	Order Date: 02/24/2023
Order Submit Time: 09:17:14	Order Create Date: 02/24/2023	PO Number: X10123189725
Customer: 7554725 MCKESSION CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref: 100559405-2
Third Party: 100559405-2	Order Type: RF Return - Financial	Order Value: \$1,161.92
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSION CORPORATION 3301 POLLOK DRIVE DBA MCKESSION DRUG CO CONROE, TX 77303	Bill To Address: MCKESSION FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 15664047	Order Submit Date: 02/28/2023	Order Date: 02/28/2023
Order Submit Time: 08:19:35	Order Create Date: 02/28/2023	PO Number: XI0123189725
Customer: 7554725 MCKESSON CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref: 100559405-3
Third Party: 100559405-3	Order Type: RA Return Update A/R No Inventory	Order Value: \$0.00
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON CORPORATION 3301 POLLOK DRIVE DBA MCKESSON DRUG CO CONROE, TX 77303	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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Sales Order Details

Order Number: 15664048	Order Submit Date: 02/28/2023	Order Date: 02/28/2023
Order Submit Time: 08:19:35	Order Create Date: 02/28/2023	PO Number: XI0123189725
Customer: 7554725 MCKESSON CORPORATION	EDI Supplier no: 1402-RM0328408	Customer Ref: 100559405-4
Third Party: 100559405-4	Order Type: RB Return Update A/R - Reverse RA	Order Value: \$246.00
Discount Base: \$0.00	Credit Limit: 1000000	Terms Of Payment: 2% 60 Net 61
Balance: \$36,755.81	MOT: 006 UPS Ground - No guarantee	Program Type: NONE
222 Form no:	222 Form Issue Date:	

Ship To Address: MCKESSON CORPORATION 3301 POLLOK DRIVE DBA MCKESSON DRUG CO CONROE, TX 77303	Bill To Address: MCKESSON FINANCIAL CENTER PO BOX 4017 DOCUMENT PROCESSING CONROE DIVISION DANVILLE, IL 61834
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EXHIBIT F

Shipment Proof of Delivery

McKesson, Open Invoices

Recipient Type	Order Date	Product Code	Product Code Description	Order Type	Ship Date	Order Number	PO Number	Quantity	Lot	Invoice Number
Wholesaler	2023-06-07 07:53:06	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	06/07/2023	16195268	8120627609	2	T2201701	14022176
Wholesaler	2023-05-31 08:21:23	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	05/31/2023	16158402	8120626880	1	T2201701	13999046
Wholesaler	2023-06-14 07:37:00	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	06/14/2023	16235074	8195942725	6	T2300765	14045237
Wholesaler	2023-05-24 08:07:47	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	05/24/2023	16125970	8195940533	2	T2300765	13980096
Wholesaler	2023-05-31 08:21:25	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	05/31/2023	16158409	8195941299	3	T2300765	13999041
Wholesaler	2023-06-07 07:53:07	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	06/07/2023	16195271	8195942004	1	T2300765	14022171
Wholesaler	2023-05-31 08:21:25	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	05/31/2023	16158411	8182835373	5	T2201701	13999042
Wholesaler	2023-05-24 08:07:50	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	05/24/2023	16125977	8182834691	1	T2201701	13980097
Wholesaler	2023-05-24 08:07:49	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	05/24/2023	16125973	8163624856	1	T2201701	13981698
Wholesaler	2023-05-31 08:21:26	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	05/31/2023	16158413	8163625726	2	T2201701	14001241
Wholesaler	2023-06-07 07:53:08	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	06/07/2023	16195276	8163626492	2	T2201701	14024048
Wholesaler	2023-06-14 07:37:01	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	06/14/2023	16235077	8165974698	5	T2201701	14045239
Wholesaler	2023-06-07 07:53:08	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	06/07/2023	16195277	8165973929	4	T2201701	14022174
Wholesaler	2023-06-07 07:53:07	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	06/07/2023	16195271	8195942004	24	TKAC	14022171
Wholesaler	2023-05-31 08:21:25	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	05/31/2023	16158409	8195941299	24	TKAC	13999041
Wholesaler	2023-06-07 07:53:07	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	06/07/2023	16195272	8183869074	3	T2300765	14022173
Wholesaler	2023-06-14 07:36:59	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	06/14/2023	16235063	8120628350	6	TKAC	14045242
Wholesaler	2023-05-24 08:07:51	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	05/24/2023	16125981	8120626091	3	TKAC	13980101
Wholesaler	2023-05-24 08:07:47	1402 03-0804-45	Cloderm Cream 45gm Tube CTN	ED	05/24/2023	16125970	8195940533	12	TFBW	13980096
Wholesaler	2023-06-14 07:37:00	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	06/14/2023	16235074	8195942725	24	TKAC	14045237
Wholesaler	2023-06-14 07:37:01	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	06/14/2023	16235075	8180752450	3	T2201701	14045238
Wholesaler	2023-05-31 08:21:26	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	05/31/2023	16158412	8180751469	2	T2201701	13999043
Wholesaler	2023-06-07 07:53:07	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	06/07/2023	16195275	8180751945	2	T2201701	14022172
Wholesaler	2023-05-24 08:07:48	1402 0102-30	Minolira 135MG Tabs 30Ct Each	ED	05/24/2023	16125971	8180750971	6	T2201701	13980098
Wholesaler	2023-05-31 08:21:25	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	05/31/2023	16158411	8182835373	24	T2300765	13999042
Wholesaler	2023-05-24 08:07:50	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	05/24/2023	16125977	8182834691	24	T2300765	13980097
Wholesaler	2023-05-31 08:21:25	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	05/31/2023	16158408	8165973173	1	T2300765	13999044
Wholesaler	2023-06-07 07:53:08	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	06/07/2023	16195277	8165973929	4	T2300765	14022174
Wholesaler	2023-05-24 08:07:50	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	05/24/2023	16125978	8165972349	6	T2300765	13980099
Wholesaler	2023-06-14 07:37:02	1402 03-0804-45	Cloderm Cream 45gm Tube CTN	ED	06/14/2023	16235081	8163627249	9	TFBW	14047599
Wholesaler	2023-06-14 07:37:02	1402 03-0804-45	Cloderm Cream 45gm Tube CTN	ED	06/14/2023	16235084	8144730401	1	TFBW	14045241
Wholesaler	2023-05-24 08:07:50	1402 03-0804-45	Cloderm Cream 45gm Tube CTN	ED	05/24/2023	16125978	8165972349	12	TFBW	13980099
Wholesaler	2023-05-31 08:21:24	1402 03-0804-45	Cloderm Cream 45gm Tube CTN	ED	05/31/2023	16158403	8115889164	4	TFBW	13999045
Wholesaler	2023-05-31 08:21:26	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	05/31/2023	16158412	8180751469	2	T2300765	13999043
Wholesaler	2023-06-14 07:37:01	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	06/14/2023	16235075	8180752450	2	T2300765	14045238
Wholesaler	2023-06-07 07:53:07	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	06/07/2023	16195275	8180751945	5	T2300765	14022172
Wholesaler	2023-05-24 08:07:48	1402 0101-30	Minolira 105MG Tabs 30Ct Each	ED	05/24/2023	16125971	8180750971	1	T2300765	13980098
Wholesaler	2023-05-31 08:21:26	1402 03-0804-45	Cloderm Cream 45gm Tube CTN	ED	05/31/2023	16158412	8180751469	3	TFBW	13999043
Wholesaler	2023-06-07 07:53:07	1402 03-0804-45	Cloderm Cream 45gm Tube CTN	ED	06/07/2023	16195275	8180751945	1	TFBW	14022172
Wholesaler	2023-05-24 08:07:48	1402 03-0804-45	Cloderm Cream 45gm Tube CTN	ED	05/24/2023	16125971	8180750971	2	TFBW	13980098
Wholesaler	2023-05-31 08:21:26	1402 03-0804-45	Cloderm Cream 45gm Tube CTN	ED	05/31/2023	16158415	8147949438	1	TFBW	13999040
Wholesaler	2023-06-07 07:53:08	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	06/07/2023	16195276	8163626492	1	TKAC	14024048
Wholesaler	2023-05-31 08:21:24	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	05/31/2023	16158403	8115889164	1	TKAC	13999045
Wholesaler	2023-06-07 07:53:06	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	06/07/2023	16195265	8115889931	4	TKAC	14022175
Wholesaler	2023-06-14 07:37:02	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	06/14/2023	16235085	8115890707	5	TKAC	14045240
Wholesaler	2023-05-24 08:07:49	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	05/24/2023	16125975	8115888332	2	TGBG	13980100
Wholesaler	2023-06-14 07:37:02	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	06/14/2023	16235080	8160815089	2	TKAC	14045397
Wholesaler	2023-05-24 08:07:50	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	05/24/2023	16125979	8160812763	7	TKAC	13980254
Wholesaler	2023-06-07 07:53:07	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	06/07/2023	16195275	8180751945	4	TKAC	14022172
Wholesaler	2023-05-31 08:21:26	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	05/31/2023	16158412	8180751469	1	TKAC	13999043
Wholesaler	2023-06-14 07:37:01	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	06/14/2023	16235075	8180752450	1	TKAC	14045238
Wholesaler	2023-05-24 08:07:48	1402 0001-01	Wynzora Cream 0.005%/0.064% EA	ED	05/24/2023	16125971	8180750971	2	TGBG	13980098
Wholesaler	2023-05-31 08:21:25	1402 0001-01CA	Wynzora Cream 0.005%/0.064% EA CALIFORNIA	ED	05/31/2023	16158411	8182835373	2	TKAC	13999042

Customer Number	MOT	Delivery Date	Customer Name	Tracking No	Rec Name	City and State	Weight	Delivery Location
7554730	UPS Ground - No guarantee	2023-06-09 10:03:58	MCKESSON CORPORATION	1Z5041EXA808436174	MILLS	RUTHER GLEN, VA	0.88	DOCK
7554730	UPS Ground - No guarantee	2023-06-02 10:00:21	MCKESSON CORPORATION	1Z5041EXA808287513	MILLS	RUTHER GLEN, VA	0.71	DOCK
7554692	UPS Ground - No guarantee	2023-06-16 10:39:34	MCKESSON DRUG COMPANY	1Z5041EX0308571725	LEO	LAKELAND, FL	6.77	FRONT DESK
7554692	UPS Ground - No guarantee	2023-05-26 10:28:54	MCKESSON DRUG COMPANY	1Z5041EX0308161427	Rivera	LAKELAND, FL	2.76	DOCK
7554692	UPS Ground - No guarantee	2023-06-02 10:44:24	MCKESSON DRUG COMPANY	1Z5041EX0308287560	RIVERA	LAKELAND, FL	5.92	DOCK
7554692	UPS Ground - No guarantee	2023-06-09 10:21:50	MCKESSON DRUG COMPANY	1Z5041EX0308436309	RIVERA	LAKELAND, FL	5.61	DOCK
7554699	UPS Ground - No guarantee	2023-06-05 10:14:01	MCKESSON DRUG COMPANY INC	1Z5041EXA808292034	NAVARRO	WEST SACRAMENTO, CA	1.36	RECEPTION
7554699	UPS Ground - No guarantee	2023-05-30 11:32:44	MCKESSON DRUG COMPANY INC	1Z5041EXA808169918	SAETERN	WEST SACRAMENTO, CA	0.71	DOCK
7855352	UPS Ground - No guarantee	2023-05-25 10:21:00	MCKESSON CORP	1Z5041EXA808161505	CLARK	JEFFERSONVILLE, OH	0.70	INSIDE DELIV
7855352	UPS Ground - No guarantee	2023-06-01 11:00:49	MCKESSON CORP	1Z5041EXA808287871	burns	JEFFERSONVILLE, OH	0.88	INSIDE DELIV
7855352	UPS Ground - No guarantee	2023-06-08 10:05:05	MCKESSON CORP	1Z5041EXA808436165	vansickle	JEFFERSONVILLE, OH	1.88	DOCK
7554719	UPS Ground - No guarantee	2023-06-16 11:18:26	MCKESSON DRUG COMPANY	1Z5041EXA808572142	DON	OKLAHOMA CITY, OK	1.00	DOCK
7554719	UPS Ground - No guarantee	2023-06-09 11:53:23	MCKESSON DRUG COMPANY	1Z5041EXA808436094	MEANS	OKLAHOMA CITY, OK	1.18	DOCK
7554692	UPS Ground - No guarantee	2023-06-09 10:21:50	MCKESSON DRUG COMPANY	1Z5041EX0308436309	RIVERA	LAKELAND, FL	5.61	DOCK
7554692	UPS Ground - No guarantee	2023-06-02 10:44:24	MCKESSON DRUG COMPANY	1Z5041EX0308287560	RIVERA	LAKELAND, FL	5.92	DOCK
7554704	UPS Ground - No guarantee	2023-06-09 08:23:21	MCKESSON CORPORATION	1Z5041EX0308436130	MCNAMEE	O FALLON, MO	0.95	RECEIVER
7554730	UPS Ground - No guarantee	2023-06-16 10:07:19	MCKESSON CORPORATION	1Z5041EX0308572180	MILLS	RUTHER GLEN, VA	1.69	DOCK
7554730	UPS Ground - No guarantee	2023-05-26 09:58:31	MCKESSON CORPORATION	1Z5041EX0308161418	JUSTIN	RUTHER GLEN, VA	1.11	DOCK
7554692	UPS Ground - No guarantee	2023-05-26 10:28:54	MCKESSON DRUG COMPANY	1Z5041EX0308161427	Rivera	LAKELAND, FL	2.76	DOCK
7554692	UPS Ground - No guarantee	2023-06-16 10:39:34	MCKESSON DRUG COMPANY	1Z5041EX0308571725	LEO	LAKELAND, FL	6.77	FRONT DESK
7554701	UPS Ground - No guarantee	2023-06-19 10:30:18	MCKESSON CORPORATION	1Z5041EXA808571849	TJ	SALT LAKE CITY, UT	1.03	DOCK
7554701	UPS Ground - No guarantee	2023-06-05 10:28:48	MCKESSON CORPORATION	1Z5041EXA808287862	EKTOR	SALT LAKE CITY, UT	0.87	DOCK
7554701	UPS Ground - No guarantee	2023-06-12 10:02:46	MCKESSON CORPORATION	1Z5041EXA808436101	AARON	SALT LAKE CITY, UT	0.84	DOCK
7554701	UPS Ground - No guarantee	2023-05-30 09:38:10	MCKESSON CORPORATION	1Z5041EXA808161274	JOHN	SALT LAKE CITY, UT	1.50	DOCK
7554699	UPS Ground - No guarantee	2023-06-05 10:14:01	MCKESSON DRUG COMPANY INC	1Z5041EX0308294838	NAVARRO	WEST SACRAMENTO, CA	4.67	RECEPTION
7554699	UPS Ground - No guarantee	2023-05-30 11:32:44	MCKESSON DRUG COMPANY INC	1Z5041EX0308169849	SAETERN	WEST SACRAMENTO, CA	4.27	DOCK
7554719	UPS Ground - No guarantee	2023-06-02 11:59:17	MCKESSON DRUG COMPANY	1Z5041EX0308287499	BLACK	OKLAHOMA CITY, OK	0.69	DOCK
7554719	UPS Ground - No guarantee	2023-06-09 11:53:23	MCKESSON DRUG COMPANY	1Z5041EX0308436345	MEANS	OKLAHOMA CITY, OK	1.09	DOCK
7554719	UPS Ground - No guarantee	2023-05-26 11:38:45	MCKESSON DRUG COMPANY	1Z5041EX0308161356	don waters	OKLAHOMA CITY, OK	3.34	DOCK
7855352	UPS Ground - No guarantee	2023-06-15 10:05:28	MCKESSON CORP	1Z5041EX0308572751	Lugo	JEFFERSONVILLE, OH	2.05	DOCK
7554728	UPS Ground - No guarantee	2023-06-15 10:03:39	MCKESSON CORPORATION	1Z5041EX0308572162	PENA	AURORA, IL	0.70	RECEIVER
7554719	UPS Ground - No guarantee	2023-05-26 11:38:45	MCKESSON DRUG COMPANY	1Z5041EX0308161356	don waters	OKLAHOMA CITY, OK	3.34	DOCK
7554725	UPS Ground - No guarantee	2023-06-05 08:47:51	MCKESSON CORPORATION	1Z5041EX0308287408	PEREZ	CONROE, TX	1.31	DOCK
7554701	UPS Ground - No guarantee	2023-06-05 10:28:48	MCKESSON CORPORATION	1Z5041EX0308287604	EKTOR	SALT LAKE CITY, UT	1.67	DOCK
7554701	UPS Ground - No guarantee	2023-06-19 10:30:18	MCKESSON CORPORATION	1Z5041EX0308571734	TJ	SALT LAKE CITY, UT	1.03	DOCK
7554701	UPS Ground - No guarantee	2023-06-12 10:02:46	MCKESSON CORPORATION	1Z5041EX0308436667	AARON	SALT LAKE CITY, UT	2.13	DOCK
7554701	UPS Ground - No guarantee	2023-05-30 09:38:10	MCKESSON CORPORATION	1Z5041EX0308161525	JOHN	SALT LAKE CITY, UT	1.36	DOCK
7554701	UPS Ground - No guarantee	2023-06-05 10:28:48	MCKESSON CORPORATION	1Z5041EX0308287604	EKTOR	SALT LAKE CITY, UT	1.67	DOCK
7554701	UPS Ground - No guarantee	2023-06-12 10:02:46	MCKESSON CORPORATION	1Z5041EX0308436667	AARON	SALT LAKE CITY, UT	2.13	DOCK
7554701	UPS Ground - No guarantee	2023-05-30 09:38:10	MCKESSON CORPORATION	1Z5041EX0308161525	JOHN	SALT LAKE CITY, UT	1.36	DOCK
7554691	UPS Ground - No guarantee	2023-06-06 08:33:51	MCKESSON CORPORATION	1Z5041EX0308291500	MORENO	SANTA FE SPRINGS, CA	0.68	DOCK
7855352	UPS Ground - No guarantee	2023-06-08 10:05:05	MCKESSON CORP	1Z5041EX0308436452	vansickle	JEFFERSONVILLE, OH	0.72	DOCK
7554725	UPS Ground - No guarantee	2023-06-05 08:47:51	MCKESSON CORPORATION	1Z5041EX0308287408	PEREZ	CONROE, TX	1.31	DOCK
7554725	UPS Ground - No guarantee	2023-06-09 08:32:30	MCKESSON CORPORATION	1Z5041EX0308436283	MANCINI	CONROE, TX	1.30	DOCK
7554725	UPS Ground - No guarantee	2023-06-19 08:48:55	MCKESSON CORPORATION	1Z5041EX0308572153	MANCINI	CONROE, TX	1.51	DOCK
7554725	UPS Ground - No guarantee	2023-05-30 08:47:35	MCKESSON CORPORATION	1Z5041EX0308161338	KHAFID	CONROE, TX	0.91	DOCK
7582128	UPS Ground - No guarantee	2023-06-16 10:00:22	MCKESSON CORPORATION	1Z5041EX0308572457	MAIDASICO	MONTGOMERY, NY	0.95	INSIDE DELIV
7582128	UPS Ground - No guarantee	2023-05-26 10:49:40	MCKESSON CORPORATION	1Z5041EX0308161347	KARANCKEK	MONTGOMERY, NY	1.88	INSIDE DELIV
7554701	UPS Ground - No guarantee	2023-06-12 10:02:46	MCKESSON CORPORATION	1Z5041EX0308436667	AARON	SALT LAKE CITY, UT	2.13	DOCK
7554701	UPS Ground - No guarantee	2023-06-05 10:28:48	MCKESSON CORPORATION	1Z5041EX0308287604	EKTOR	SALT LAKE CITY, UT	1.67	DOCK
7554701	UPS Ground - No guarantee	2023-06-19 10:30:18	MCKESSON CORPORATION	1Z5041EX0308571734	TJ	SALT LAKE CITY, UT	1.03	DOCK
7554701	UPS Ground - No guarantee	2023-05-30 09:38:10	MCKESSON CORPORATION	1Z5041EX0308161525	JOHN	SALT LAKE CITY, UT	1.36	DOCK
7554699	UPS Ground - No guarantee	2023-06-05 10:14:01	MCKESSON DRUG COMPANY INC	1Z5041EX0308294838	NAVARRO	WEST SACRAMENTO, CA	4.67	RECEPTION

EXHIBIT G

Debtor Name	Doc Type	Doc Number	Doc Date	Order Type	Transaction Text	Name Category	PO Reference	Invoice Due Date	Original Amount	Total Due
MCKESSON FINANCIAL CENTER	RET	386573	02/01/2023		ALB221210114	MCK000	ALB221210114	02/01/2023	\$2,787.81	\$178.57
MCKESSON FINANCIAL CENTER	RET	391002	03/17/2023		XI0123189725	MCK000	XI0123189725	03/17/2023	\$11,319.10	\$10,157.18
MCKESSON FINANCIAL CENTER	RET	402651	06/23/2023		DDI052316848	MCK000	DDI052316848	06/23/2023	\$568.75	\$25.21
MCKESSON FINANCIAL CENTER	RET	383249	01/09/2023		XO1122202244	MCK000	XO1122202244	01/09/2023	\$8,477.56	\$213.88
MCKESSON FINANCIAL CENTER	RET	387824	02/17/2023		MKRX88711A/DMC7 1287274	MCK000	MKRX88711A	02/17/2023	\$543.54	\$543.54
MCKESSON FINANCIAL CENTER	RET	394808	04/20/2023		XO0222194064/7243 4248	MCK000	XO0222194064	04/20/2023	(\$478.52)	(\$478.52)
MCKESSON FINANCIAL CENTER	RET	396365	04/28/2023		XP3976102182	MCK000	XP3976102182	04/28/2023	\$746.34	\$746.34
MCKESSON FINANCIAL CENTER	RET	396365	04/28/2023		XI1222188388/DMC7 2460796	MCK000	XI1222188388	04/28/2023	\$1,732.00	\$1,732.00
MCKESSON FINANCIAL CENTER	RET	386573	02/01/2023		XO1222203103	MCK000	XO1222203103	02/01/2023	\$1,950.67	\$50.10
MCKESSON FINANCIAL CENTER	RET	355690	05/12/2022		CC220342035	MCK000	CC220342035	05/12/2022	\$749.75	\$749.75
MCKESSON FINANCIAL CENTER	RET	399488	05/25/2023		WMT23070102518	MCK000	WMT23070102518	05/25/2023	\$1,543.22	\$36.12
MCKESSON FINANCIAL CENTER	RET	394145	04/13/2023		XI0223191088	MCK000	XI0223191088	04/13/2023	\$4,732.62	\$2,694.87
MCKESSON FINANCIAL CENTER	RET	405470	07/20/2023		ALB230614332	MCK000	ALB230614332	07/20/2023	\$747.84	\$33.64
MCKESSON FINANCIAL CENTER	RET	391002	03/17/2023		HEB2301118370	MCK000	HEB2301118370	03/17/2023	\$3,445.07	\$411.48
MCKESSON FINANCIAL CENTER	RET	386573	02/01/2023		7000273645	MCK000	7000273645	02/01/2023	\$2,403.50	\$2,403.50
MCKESSON FINANCIAL CENTER	RET	381444	12/23/2022		VMC11221675	MCK000	VMC11221675	12/23/2022	\$866.86	\$846.36
MCKESSON FINANCIAL CENTER	RET	365690	08/05/2022		7000264708	MCK000	7000264708	08/05/2022	\$749.80	\$749.80
MCKESSON FINANCIAL CENTER	RET	404809	07/14/2023		XP4083382182	MCK000	XP4083382182	07/14/2023	\$709.82	\$709.82
MCKESSON FINANCIAL CENTER	RET	403640	06/29/2023		WMT23080103743	MCK000	WMT23080103743	06/29/2023	\$3,086.54	\$20.59
MCKESSON FINANCIAL CENTER	RET	370412	09/15/2022		ALB22086624	MCK000	ALB22086624	09/15/2022	\$4,187.59	\$141.53
Total									\$21,965.76	

EXHIBIT H

RGAs Details

RGAs Information

RGAs: 100559405
Credit Memo Issued
Turnaround Time: 6 days, 11 hours
EPI Health LLC - 1402
Customer Type: Direct
RGAs Faxed To: 817-868-5341
Debit Memo #: XI0123189725
Debit Memo Amount: \$11,307.92
Debit Memo Date: 02/03/2023
Debit Memo Receipt Date: 02/08/2023
Third Party Processor: Inmar RX Solutions Inc
Third Party RAF: 1402_206
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554725
MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 United States Of America
Phone:
Fax:
DEA #:

RGAs Creation
Created Date: 02/08/2023 09:41:59
Created By: Import180 Automated
Faxed Date & Time: 02/08/2023 11:55:14
Faxed By: Angela Robinson
Last Saved Date & Time: 02/28/2023 08:03:25
Last Saved By: John Caldwell

Return Receipt Info
of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued

Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 02/21/2023
Received By: Francisca Santellan
Receiving Facility: BROOKS 3PL
Total Days in Transit: 18

Return Confirmation Information
Confirmed Date: 02/23/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 15637364

Itemized Return Information
Itemized Date: 02/22/2023
Itemized By: Devlin Jones

Credit Memo Information
AR Transaction #: 15664048, Correction
Credit Memo Number: 13702613
Credit Memo Date: 02/28/2023
AR Transaction #: 15664047, Correction
Credit Memo Number: 72370439
Credit Memo Date: 02/28/2023
AR Transaction #: 15645731
Credit Memo Number: 72362129
Credit Memo Date: 02/24/2023
Turnaround Time: 6 days, 11 hours

Credit Assessment Information
Assessed Date: 02/23/2023
Assessed By: John Caldwell

Client Approval Information
Approved Date: 02/24/2023
Approved By: Bob Hill

Debit Memo Items

Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0586037	08/31/2022	08/31/2022	8	\$866.00	\$6,928.00	\$20.50
2	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	UNKNOWN	01/01/1900	01/01/1900	4	\$866.00	\$3,464.00	\$0.00
3	7140304902	1402 03-0049-02 R	Sitavig 50MG 2 Blstr Pack CTN	1014	01/31/2023	01/31/2023	1	\$915.92	\$915.92	\$915.92

The Debit Total is: \$1,079.92
 The Customer's Extended Total is: \$11,307.92

Received Items

Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	7140304902	1402 03-0049-02 R	Sitavig 50MG 2 Blstr Pack CTN	1014	01/31/2023	Full	1	\$915.92	\$915.92		
1	2	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0586037	08/31/2022	Full	12	\$0.00	\$0.00	NRP	

The Credit Memo Total is: \$915.92

ReturnConnect - RGA Details

9/16/24, 10:17 AM

<https://returnconnect.icsconnect.com/ReturnConnect/RGADetailsFriendly.aspx?RGAIID=100559405>

RGAs Details

RGAs Information

RGAs: 100559192
Credit Memo Issued
Turnaround Time: 2 days, 9 hours
EPI Health LLC - 1402
Customer Type: Indirect - Credit
RGAs Faxed To: 817-868-5341
Debit Memo #: HEB2301118370
Debit Memo Amount: \$3,441.63
Debit Memo Date: 02/07/2023
Debit Memo Receipt Date: 02/07/2023
Third Party Processor: Inmar RX Solutions Inc
Third Party RAF: 1402_205
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554725
MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 United States Of America
Phone:
Fax:
DEA #:

Indirect Customer
Indirect Customer #: EDI7852
H.E.B. Stores
 646 S. Main Ave
 San Antonio, TX 78203
 United States Of America
Phone:
Fax:
DEA #: RR0191902

RGAs Creation

Created Date: 02/07/2023 10:41:03
Created By: Import180 Automated
Faxed Date & Time: 02/17/2023 02:45:43
Faxed By: Angela Robinson
Last Saved Date & Time: 03/02/2023 10:06:54
Last Saved By: Bob Hill

Return Receipt Info
of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued
Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 02/27/2023
Received By: Ellen Files
Receiving Facility: BROOKS 3PL
Total Days in Transit: 20

Return Confirmation Information
Confirmed Date: 02/28/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 15663153

Itemized Return Information
Itemized Date: 02/28/2023
Itemized By: Devlin Jones

Credit Memo Information
AR Transaction #: 15678793
Credit Memo Number: 72376357
Credit Memo Date: 03/02/2023
Turnaround Time: 2 days, 9 hours

Credit Assessment Information
Assessed Date: 03/01/2023
Assessed By: Barbara Reiter

Client Approval Information
Approved Date: 03/02/2023
Approved By: Bob Hill

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0486031	07/31/2022	07/31/2022	1	\$866.00	\$866.00	\$20.50
2	7140304902	1402 03-0049-02 R	Sitavig 50MG 2 Blstr Pack CTN	1014	01/31/2023	01/31/2023	1	\$915.92	\$915.92	\$915.92
3	7140304902	1402 03-0049-02 R	Sitavig 50MG 2 Blstr Pack CTN	1014	01/31/2023	01/31/2023	.50	\$915.92	\$457.96	\$915.92
4	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	RPCB	11/30/2022	11/30/2022	1	\$1201.75	\$1,201.75	\$1150.00

The Debit Total is: \$2,544.38
 The Customer's Extended Total is: \$3,441.63

Received Items												
Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	7140304902	1402 03-0049-02 R	Sitavig 50MG 2 Blstr Pack CTN	1014	01/31/2023	Full	2	\$915.92	\$1,831.84		
1	2	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0486031	07/31/2022	Full	1	\$0.00	\$0.00	NRP	
1	3	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	RPCB	11/30/2022	Full	1	\$1201.75	\$1,201.75		

The Credit Memo Total is: \$3,033.59

PHARMACEUTICAL RETURNS DEBIT INVOICE

	INVOICE #	HEB2301118370	REMIT TO:	MCKESSON
	INVOICE DATE:	02/07/2023		P.O. BOX 4017
	PAYMENT DUE BY:	02/07/2023		DANVILLE IL 61834
	PRODUCT HELD UNTIL:	04/08/2023		
	VENDOR #	12592		
DEA#	A/P #	12592	DEA #:	RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Regular Piece Processed Value	\$.00	\$3441.63	\$3441.63
State Rtn Piece Processed Val	\$.00	\$.00	\$.00
Regular Pieces Processed	0	4	4
State Rtn Pieces Processed	0	0	0
Piece Fee per Piece	\$0.86	\$0.86	
Piece Processing Fee	\$0.00	\$3.44	\$3.44
Total Due	\$.00	\$3445.07	\$3445.07

IF WE DO NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY ON FILE FOR YOUR COMPANY, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN AUTHORIZATION/DESTRUCTION. PLEASE CONFIRM THE 'SHIP TO' ADDRESS ABOVE AND WHETHER YOUR RETURN SHOULD BE INSURED. PLEASE CONTACT CUSTOMER SERVICE AT OUR PROCESSING COMPANY (MEDTURN, A CLS COMPANY) WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX 817-868-5341 OR EMAIL RXRA@INMAR.COM. IF WE HAVE NOT RECEIVED YOUR REPLY WITHIN 20 DAYS FROM THE ABOVE INVOICE DATE, WE WILL DEDUCT THE TOTAL DUE AMOUNTS PLUS PROCESSING COSTS. IF NO REPLY IS RECEIVED WITHIN 60 DAYS OF INVOICE DATE, WE WILL DESTROY THE PRODUCT ACCORDING TO FEDERAL REGULATION.

IF YOU ARE UNABLE TO PROCESS ITEMS, THEY SHOULD BE RETURNED BACK TO MEDTURN AT THE ADDRESS NOTED BELOW. NO PRODUCT SHOULD BE RETURNED BACK TO MCKESSON OR H.E.B. STORES. REMIT PAYMENT IN THE FORM OF A CREDIT MEMO OR CHECK AND REFERENCE THE ABOVE INVOICE NUMBER. QUESTIONS REGARDING DEDUCTIONS REFERENCING THE ABOVE INVOICE NUMBER SHOULD BE REFERRED TO VIA THE MCKESSON SUPPLIER WEB PORTAL OR 972-446-4800. ALL OTHER QUESTIONS SHOULD BE DIRECTED TO MEDTURN CUSTOMER SERVICE AT (817)868-5300.

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Returned By:	Remit To:
H.E.B. Stores	McKesson Shared Services Center
646 S. Main Ave	6555 North State Highway 161
San Antonio, TX 78203	Irving, TX 75039
DEA # RH0277067	

Processed by :
 INMAR RX SOLUTIONS, INC
 3845 Grand Lakes Way
 Grand Prairie, TX 75050
 DEA# RR0191902

These products are not intended for consumers - Do Not Redistribute "FOR DESTRUCTION ONLY"

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICELINK.INMAR.COM](https://www.clsinvoiceLink.inmar.com)
 using WEB ACCESS KEY: 47000213-984395148141463

PHARMACEUTICAL RETURNS DEBIT INVOICE

	INVOICE #	HEB2301118370	REMIT TO:	MCKESSON
	INVOICE DATE:	02/07/2023		P.O. BOX 4017
	PAYMENT DUE BY:	02/07/2023		DANVILLE IL 61834
	PRODUCT HELD UNTIL:	04/08/2023		
	VENDOR #	12592		
DEA#	A/P #	12592	DEA #:	RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

RX PRODUCT

NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
63801010701	BENSAL HP 3% OINTMENT	0486031	07/31/2022	F	1		866.00	866.00
71403004902	SITAVIG 50 MG BUCCAL TABLET	1014	01/31/2023	F	1		915.92	915.92
71403004902	SITAVIG 50 MG BUCCAL TABLET	1014	01/31/2023	P	1	50%	915.92	457.96
73499000101	WYNZORA 0.005%-0.064% CREAM	RPCB	11/30/2022	F	1		1201.75	1201.75
Sub-Total Rx Regular Piece Processed Value								\$3441.63
Total Rx Regular Pieces Processed								4
Sub-Total Rx State Rtn Piece Processed Value								\$.00
Total Rx State Rtn Pieces Processed								
Piece Processing Fee @ \$.86/piece								\$3.44
Sub-Total Processing Fees								\$3.44
Sub-Total								\$3445.07
Total Due								===== \$3445.07 =====

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: HEB2301118370

IF WE DO NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY ON FILE FOR YOUR COMPANY, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN AUTHORIZATION/DESTRUCTION. PLEASE CONFIRM THE 'SHIP TO' ADDRESS ABOVE AND WHETHER YOUR RETURN SHOULD BE INSURED. PLEASE CONTACT CUSTOMER SERVICE AT OUR PROCESSING COMPANY (MEDTURN, A CLS COMPANY) WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX 817-868-5341 OR EMAIL RXRA@INMAR.COM. IF WE HAVE NOT RECEIVED YOUR REPLY WITHIN 20 DAYS FROM THE ABOVE INVOICE DATE, WE WILL DEDUCT THE TOTAL DUE AMOUNTS PLUS PROCESSING COSTS. IF NO REPLY IS RECEIVED WITHIN 60 DAYS OF INVOICE DATE, WE WILL DESTROY THE PRODUCT ACCORDING TO FEDERAL REGULATION.

IF YOU ARE UNABLE TO PROCESS ITEMS, THEY SHOULD BE RETURNED BACK TO MEDTURN AT THE ADDRESS NOTED BELOW. NO PRODUCT SHOULD BE RETURNED BACK TO MCKESSON OR H.E.B. STORES. REMIT PAYMENT IN THE FORM OF A CREDIT MEMO OR CHECK AND REFERENCE THE ABOVE INVOICE NUMBER. QUESTIONS REGARDING DEDUCTIONS REFERENCING THE ABOVE INVOICE NUMBER SHOULD BE REFERRED TO VIA THE MCKESSON SUPPLIER WEB PORTAL OR 972-446-4800. ALL OTHER QUESTIONS SHOULD BE DIRECTED TO MEDTURN CUSTOMER SERVICE AT (817)868-5300.

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Returned By:
H.E.B. Stores
646 S. Main Ave
San Antonio, TX 78203
DEA # RH0277067

Remit To:
McKesson Shared Services Center
6555 North State Highway 161
Irving, TX 75039

These products are not intended for consumers - Do Not Redistribute "FOR DESTRUCTION ONLY"

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: HEB2301118370

RX Return Services

1115 N OLD COACHMAN RD
 Clearwater, FL 33765
 Ph: 727-754-7848 Fax: 727-724-4156
 DEA License: RRO477946
 State License: 5229

PACKING SLIP

Debit Memo: MKRX88711A
 Manufacturer: EPI HEALTH LLC
 Date: 08/20/2021

PROCESSED FOR	REMIT TO	RETURN TO	NOTES
BOP - FCC Pollock 1000 AIRBASE ROAD POLLOCK Pollock, LA 71467 FC8729711	Mckesson PO BOX 4017 DANVILLE, IL 61837	ICSCconnect	

Product Name	NDC	Drug Type	Exp. Date	Lot Number	Pack Size	Full	Partial	Price	Value
RHOFADE 1% CREAM	71180000330	RX	10/31/2021	PMET	30	1	0	\$543.54	\$543.54
							Total Products:		1
							Total:		\$543.54



RGAs Details

RGAs Information

RGAs: 100482497
Credit Memo Issued
Turnaround Time: 16 days, 11 hours
EPI Health LLC - 1402
Customer Type: Indirect - Credit
RGAs Faxed To: 727-724-4156
Debit Memo #: MKRX88711A
Debit Memo Amount: \$543.54
Debit Memo Date: 08/20/2021
Debit Memo Receipt Date: 08/23/2021
Third Party Processor: RX Return Services
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554704
MCKESSON CORPORATION
 1 COMMERCE DRIVE
 DBA MCKESSON DRUG CO
 OFALLON, MO 63366
 United States Of America
Phone:
Fax:
DEA #:

Indirect Customer
Indirect Customer #: R47976
BOP - FCC Pollock
 1000 AIRBASE ROAD
 POLLOCK
 Pollock, LA 71467
 United States Of America
Phone:
Fax:
DEA #: FC8729711

RGAs Creation

Created Date: 09/06/2021 07:23:44
Created By: Michele SixHassler
Faxed Date & Time: 09/06/2021 07:40:10
Faxed By: Michele SixHassler
Last Saved Date & Time: 09/30/2021 04:35:33
Last Saved By: Susan DeTorre

Return Receipt Info
of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued
Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 09/13/2021
Received By: Irina De La Cruz
Receiving Facility: BROOKS 3PL
Total Days in Transit: 24

Return Confirmation Information
Confirmed Date: 09/17/2021
Confirmed By: Barbara Reiter
Inventory Transaction #: 12972042

Itemized Return Information
Itemized Date: 09/17/2021
Itemized By: Irina De La Cruz

Credit Memo Information

Credit Assessment Information

Client Approval Information

12/6/23, 1:37 PM

ReturnConnect - RGA Details

AR Transaction #: 13040398
Credit Memo Number: 71287274
Credit Memo Date: 09/30/2021
Turnaround Time: 16 days, 11 hours

Assessed Date: 09/30/2021
Assessed By: Jose Ramos

Approved Date: 09/30/2021
Approved By: Susan DeTorre

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0003-30	1402 0003-30 R	Rhofade 1% Cream 30g	PMET	10/31/2021	10/31/2021	1	\$543.54	\$543.54	\$520.13

The Debit Total is: \$520.13
 The Customer's Extended Total is: \$543.54

Received Items

Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	1402 0003-30	1402 0003-30 R	Rhofade 1% Cream 30g	PMET	10/31/2021	Full	1	\$543.54	\$543.54		

The Credit Memo Total is: \$543.54

RGAs Details

RGAs Information

RGAs: 100553615
Credit Memo Issued
Turnaround Time: 29 days, 11 hours
EPI Health LLC - 1402
Customer Type: Direct
RGAs Faxed To: 817-868-5341
Debit Memo #: XO1222203103
Debit Memo Amount: \$1,948.09
Debit Memo Date: 12/30/2022
Debit Memo Receipt Date: 12/28/2022
Third Party Processor: Inmar RX Solutions Inc
Third Party RAF: 1402_174
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554728
MCKESSON CORPORATION
 1995 MCKESSON ST SUITE 101
 DBA MCKESSON DRUG COMPANY
 AURORA, IL 60502
 United States Of America
Phone:
Fax:
DEA #:

RGAs Creation

Created Date: 12/30/2022 08:41:21
Created By: Import180 Automated
Faxed Date & Time: 12/30/2022 04:40:13
Faxed By: Jerrick Robinson
Last Saved Date & Time: 02/16/2023 09:12:23
Last Saved By: Bob Hill

Return Receipt Info
of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued

Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 01/17/2023
Received By: Annia Morales
Receiving Facility: BROOKS 3PL
Total Days in Transit: 18

Return Confirmation Information
Confirmed Date: 01/20/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 15465183

Itemized Return Information
Itemized Date: 01/20/2023
Itemized By: Annia Morales

Credit Memo Information
AR Transaction #: 15602905
Credit Memo Number: 72345216
Credit Memo Date: 02/16/2023
Turnaround Time: 29 days, 11 hours

Credit Assessment Information
Assessed Date: 02/01/2023
Assessed By: Barbara Reiter

Client Approval Information
Approved Date: 02/16/2023
Approved By: Bob Hill

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	PPBD	11/30/2022	11/30/2022	1	\$373.17	\$373.17	\$0.00
2	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	RECX	05/31/2023	05/31/2023	1	\$373.17	\$373.17	\$0.00
3	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SFED	05/31/2023	05/31/2023	1	\$1201.75	\$1,201.75	\$0.00

The Debit Total is: \$0.00
 The Customer's Extended Total is: \$1,948.09

Received Items												
Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	PPBD	11/30/2022	Full	1	\$341.72	\$341.72		
1	2	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	RECX	05/31/2023	Full	1	\$357.10	\$357.10		
1	3	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SFED	05/31/2023	Full	1	\$1201.75	\$1,201.75		

The Credit Memo Total is: \$1,900.57

PHARMACEUTICAL RETURNS DEBIT INVOICE

	INVOICE #	X01222203103	REMIT TO:	MCKESSON
	INVOICE DATE:	12/30/2022		PSASRETURNSCREDITS@MCKESSON.CO
	PAYMENT DUE BY:	12/30/2022		PO BOX 4017
	PRODUCT HELD UNTIL:	03/30/2023		DANVILLE IL 61834-4017
	VENDOR #	12592		
DEA#	A/P #	12592		

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Piece Processed Value	\$0.00	\$1948.09	\$1948.09
Pieces Processed	0	3	3
Piece Fee per Piece	\$0.86	\$0.86	
Piece Processing Fee	\$0.00	\$2.58	\$2.58
Case Processed Value	\$0.00	\$0.00	\$0.00
Case Pieces Processed	0	0	0
Case Fee per Piece	\$0.86	\$0.86	
Case Processing Fee	\$0.00	\$0.00	\$0.00
Total Due	\$0.00	\$1950.67	\$1950.67

THIS IS YOUR NOTIFICATION TO SEND RETURN AUTHORIZATION. MCKESSON WILL DEDUCT AMOUNTS WHEN CREDIT MEMO IS NOT PROVIDED TIMELY.

IF INMAR DOES NOT HAVE AN AUTOMATIC AUTHORIZATION TO RETURN OR DESTROY PRODUCT ON YOUR BEHALF, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN OR DESTRUCTION AUTHORIZATION. PLEASE CONTACT CUSTOMER SERVICE AT MCKESSON'S RETURN PROCESSING COMPANY (INMAR) WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX TO 817-868-5341 OR EMAIL RXRA@INMAR.COM. PLEASE DO NOT SEND RETURN OR DESTRUCTION AUTHORIZATION DIRECTLY TO MCKESSON AS THIS WILL DELAY PRODUCT BEING SENT BACK TO YOUR COMPANY. PLEASE DIRECT ALL CREDIT MEMO INFORMATION TO THE ADDRESS IN THE REMIT TO ABOVE. IF A CREDIT MEMO IS NOT RECEIVED WITHIN 30 DAYS FROM THE INVOICE DATE, MCKESSON WILL DEDUCT THE TOTAL INVOICE AMOUNT INCLUDING PROCESSING FEES AS STATED ABOVE FROM THEIR NEXT PAYMENT TO YOUR COMPANY. IF NO REPLY IS RECEIVED BY INMAR WITHIN 90 DAYS OF THE INVOICE DATE, WE WILL DESTROY ALL PRODUCT CONTAINED ON THIS INVOICE IN ACCORDANCE WITH FEDERAL REGULATIONS. ONCE THE PRODUCT IS DESTROYED, THE DEDUCTION WILL STAND AND THE INVOICE WILL BE CONSIDERED CLOSED. PLEASE DO NOT SHIP PRODUCT TO THIS LOCATION LISTED BELOW. PLEASE CONTACT INMAR CUSTOMER SERVICE DIRECTLY FOR PRODUCT RECEIVED IN ERROR.

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVED WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Returned By:
 McKesson Shared Services Center
 6555 North State Highway 161
 Irving, TX 75039

Processed by :
 INMAR RX SOLUTIONS, INC
 3845 Grand Lakes Way
 Grand Prairie, TX 75050
 DEA# RR0191902

DEA # RM0328408

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICELINK.INMAR.COM](https://www.clsinvoiceLink.inmar.com)
 using WEB ACCESS KEY: 47000128-254954193207457

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	X01222203103	REMIT TO:	MCKESSON
INVOICE DATE:	12/30/2022		PSASRETURNSCREDITS@MCKESSON.CO
PAYMENT DUE BY:	12/30/2022		PO BOX 4017
PRODUCT HELD UNTIL:	03/30/2023		DANVILLE IL 61834-4017
VENDOR #	12592		
DEA#	A/P #		12592

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

UNSALEABLE

RX PRODUCT

NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
71403080445	CLODERM 0.1% CREAM	PPBD	11/30/2022	F	1		373.17	373.17
71403080445	CLODERM 0.1% CREAM	RECX	05/31/2023	F	1		373.17	373.17
73499000101	WYNZORA 0.005%-0.064% CREAM	SFED	05/31/2023	F	1		1201.75	1201.75
Sub-Total Rx Piece Processed Value								\$1948.09
Total Rx Pieces Processed								3
Piece Processing Fee @ \$.86/piece								\$2.58
Sub-Total Processing Fees								\$2.58
Sub-Total Rx Case Processed Value								\$.00
Total Rx Case Pieces Processed								
Case Processing Fee @ \$.86/piece								\$.00
Sub-Total for Piece & Case pieces								\$1950.67
Total Due (Unsaleable)								\$1950.67
								=====
Total Invoice Due								\$1950.67
								=====

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: X01222203103

THIS IS YOUR NOTIFICATION TO SEND RETURN AUTHORIZATION. MCKESSON WILL DEDUCT AMOUNTS WHEN CREDIT MEMO IS NOT PROVIDED TIMELY.

IF INMAR DOES NOT HAVE AN AUTOMATIC AUTHORIZATION TO RETURN OR DESTROY PRODUCT ON YOUR BEHALF, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN OR DESTRUCTION AUTHORIZATION. PLEASE CONTACT CUSTOMER SERVICE AT MCKESSON'S RETURN PROCESSING COMPANY (INMAR) WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX TO 817-868-5341 OR EMAIL RXRA@INMAR.COM. PLEASE DO NOT SEND RETURN OR DESTRUCTION AUTHORIZATION DIRECTLY TO MCKESSON AS THIS WILL DELAY PRODUCT BEING SENT BACK TO YOUR COMPANY. PLEASE DIRECT ALL CREDIT MEMO INFORMATION TO THE ADDRESS IN THE REMIT TO ABOVE. IF A CREDIT MEMO IS NOT RECEIVED WITHIN 30 DAYS FROM THE INVOICE DATE, MCKESSON WILL DEDUCT THE TOTAL INVOICE AMOUNT INCLUDING PROCESSING FEES AS STATED ABOVE FROM THEIR NEXT PAYMENT TO YOUR COMPANY. IF NO REPLY IS RECEIVED BY INMAR WITHIN 90 DAYS OF THE INVOICE DATE, WE WILL DESTROY ALL PRODUCT CONTAINED ON THIS INVOICE IN ACCORDANCE WITH FEDERAL REGULATIONS. ONCE THE PRODUCT IS DESTROYED, THE DEDUCTION WILL STAND AND THE INVOICE WILL BE CONSIDERED CLOSED. PLEASE DO NOT SHIP PRODUCT TO THIS LOCATION LISTED BELOW. PLEASE CONTACT INMAR CUSTOMER SERVICE DIRECTLY FOR PRODUCT RECEIVED IN ERROR. IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVED WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Returned By:

McKesson Shared Services Center
6555 North State Highway 161
Irving, TX 75039
DEA # RM0328408

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: X01222203103

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	ALB221210114	REMIT TO:	ALBERTSONS BUY BACK
INVOICE DATE:	12/30/2022		PSASRETURNSCREDITS@MCKESSON.CO
PAYMENT DUE BY:	12/30/2022		3301 POLLOK DRIVE
PRODUCT HELD UNTIL:	02/28/2023		CONROE TX 77303
VENDOR #	12592		
DEA#	A/P #	12592	DEA #:
			RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Regular Piece Processed Value	\$.00	\$2782.56	\$2782.56
State Rtn Piece Processed Val	\$.00	\$.00	\$.00
Regular Pieces Processed	0	7	7
State Rtn Pieces Processed	0	0	0
Piece Fee per Piece	\$0.75	\$0.75	
Piece Processing Fee	\$0.00	\$5.25	\$5.25
Total Due	\$.00	\$2787.81	\$2787.81

IF WE DO NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY ON FILE FOR YOUR COMPANY, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN AUTHORIZATION/DESTRUCTION. PLEASE CONTACT CUSTOMER SERVICE AT OUR PROCESSING COMPANY INMAR, A CLS COMPANY, WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX 817-868-5341 OR WILL DEDUCT THE TOTAL DUE AMOUNTS PLUS PROCESSING COSTS. IF NO REPLY IS RECEIVED WITHIN 60 DAYS OF INVOICE DATE, WE WILL DESTROY THE PRODUCT ACCORDING TO FEDERAL REGULATION.

REMIT PAYMENT IN THE FORM OF A CHECK OR CREDIT MEMORANDUM AND REFERENCE THE ACCOUNT NUMBER LISTED BELOW, ALSO INCLUDE INVOICE NUMBER REFERENCED AT TOP OF PAGE. PRODUCT DISPOSITION CALLS SHOULD BE DIRECTED TO INMAR CUSTOMER SERVICE AT 817-868-5300, FAX 817-868-5341 OR EMAIL RXRA@INMAR.COM. ALL OTHER QUESTIONS SHOULD BE DIRECTED TO MCKESSON'S RETURN GROUP AT 972-446-4800.

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Returned By:	Credit Thru:	Processed by :
Albertsons LLC	McKesson Shared Services Center	
590 East 17th Street	6555 North State Highway 161	
Idaho Falls, ID 83404	Irving, TX 75039	INMAR RX SOLUTIONS, INC
DEA #: FA3751028	DEA #: RM0328408	3845 Grand Lakes Way
		Grand Prairie, TX 75050
		DEA# RR0191902

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICELINK.INMAR.COM](https://www.clsinvoiceLink.inmar.com)
 using WEB ACCESS KEY: 21158031-667982906254066

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	ALB221210114	REMIT TO:	ALBERTSONS BUY BACK
INVOICE DATE:	12/30/2022		PSASRETURNSCREDITS@MCKESSON.CO
PAYMENT DUE BY:	12/30/2022		3301 POLLOK DRIVE
PRODUCT HELD UNTIL:	02/28/2023		CONROE TX 77303
VENDOR #	12592	DEA #:	RM0328408
DEA#	A/P #		

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

RX PRODUCT

NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
71180000330	RHOFADE 1% CREAM	RCAD	04/30/2022	F	1		543.54	543.54
71403080445	CLODERM 0.1% CREAM	PPBC	11/30/2022	F	5		373.17	1865.85
71403080445	CLODERM 0.1% CREAM	PPBD	11/30/2022	F	1		373.17	373.17
Sub-Total Rx Regular Piece Processed Value								\$2782.56
Total Rx Regular Pieces Processed								7
Sub-Total Rx State Rtn Piece Processed Value								\$.00
Total Rx State Rtn Pieces Processed								
Piece Processing Fee @ \$.75/piece								\$5.25
Sub-Total Processing Fees								\$5.25
Sub-Total								\$2787.81
Total Due								\$2787.81

IF WE DO NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY ON FILE FOR YOUR COMPANY, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN AUTHORIZATION/DESTRUCTION. PLEASE CONTACT CUSTOMER SERVICE AT OUR PROCESSING COMPANY INMAR, A CLS COMPANY, WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX 817-868-5341 OR WILL DEDUCT THE TOTAL DUE AMOUNTS PLUS PROCESSING COSTS. IF NO REPLY IS RECEIVED WITHIN 60 DAYS OF INVOICE DATE, WE WILL DESTROY THE PRODUCT ACCORDING TO FEDERAL REGULATION.

REMIT PAYMENT IN THE FORM OF A CHECK OR CREDIT MEMORANDUM AND REFERENCE THE ACCOUNT NUMBER LISTED BELOW, ALSO INCLUDE INVOICE NUMBER REFERENCED AT TOP OF PAGE. PRODUCT DISPOSITION CALLS SHOULD BE DIRECTED TO INMAR CUSTOMER SERVICE AT 817-868-5300, FAX 817-868-5341 OR EMAIL RXRA@INMAR.COM. ALL OTHER QUESTIONS SHOULD BE DIRECTED TO MCKESSON'S RETURN GROUP AT 972-446-4800.

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Returned By:	Credit Thru:
Albertsons LLC	McKesson Shared Services Center
590 East 17th Street	6555 North State Highway 161
Idaho Falls, ID 83404	Irving, TX 75039
DEA #: FA3751028	DEA #: RM0328408

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: ALB221210114

RGA Details

RGAs Information

RGAs: 100553824
Credit Memo Issued
Turnaround Time: 44 days, 10 hours
EPI Health LLC - 1402
Customer Type: Indirect - Credit
RGAs Faxed To: 817-868-5341
Debit Memo #: ALB221210114
Debit Memo Amount: \$2,782.56
Debit Memo Date: 12/30/2022
Debit Memo Receipt Date: 12/30/2022
Third Party Processor: Inmar RX Solutions Inc
Third Party RAF: 1402_177
Return Facility: BROOKS 3PL

RGAs Creation

Created Date: 12/30/2022 04:41:20
Created By: Import180 Automated
Faxed Date & Time: 01/05/2023 10:10:05
Faxed By: Stella Olivarez
Last Saved Date & Time: 03/06/2023 02:22:03
Last Saved By: Bob Hill

Batch Information**Batch #1: Credit Memo Issued**

Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 01/20/2023
Received By: Joyce Powers
Receiving Facility: BROOKS 3PL
Total Days in Transit: 21

Direct Customer
Direct Customer #: 7554725
MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 United States Of America
Phone:
Fax:
DEA #:

Indirect Customer
Indirect Customer #: EDI7792
Albertsons LLC McKesson S
 590 East 17th Street 6555 North
 Idaho Falls, ID 83404
 United States Of America
Phone:
Fax:
DEA #: RR0191902

Return Receipt Info

of Boxes: 1

Return Confirmation Information

Confirmed Date: 01/25/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 15483067

Itemized Return Information

Itemized Date: 01/25/2023
Itemized By: Lakessa Perry

Credit Memo Information
AR Transaction #: 15696292
Credit Memo Number: 72382079
Credit Memo Date: 03/06/2023
Turnaround Time: 44 days, 10 hours

Credit Assessment Information
Assessed Date: 02/01/2023
Assessed By: Barbara Reiter

Client Approval Information
Approved Date: 03/06/2023
Approved By: Bob Hill

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0003-30	1402 0003-30 R	Rhofade 1% Cream 30g	RCAD	04/30/2022	04/30/2022	1	\$543.54	\$543.54	\$520.13
2	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	PPBC	11/30/2022	11/30/2022	5	\$373.17	\$1,865.85	\$341.72
3	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	PPBD	11/30/2022	11/30/2022	1	\$373.17	\$373.17	\$357.10

The Debit Total is: \$2,585.83
 The Customer's Extended Total is: \$2,782.56

Received Items												
Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	PPBC	11/30/2022	Full	5	\$341.72	\$1,708.60		
1	2	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	PPBD	11/30/2022	Full	1	\$357.10	\$357.10		
1	3	1402 0003-30	1402 0003-30 R	Rhofade 1% Cream 30g	RCAD	04/30/2022	Full	1	\$543.54	\$543.54		

The Credit Memo Total is: \$2,609.24



DEBIT MEMO - DC RETURN

Vendor: 112592
EPI HEALTH LLC
PO BOX 744233
ATLANTA, GA 30384-4233
Vendor DEA:
Terms: 3

Bill To:
McKesson Drug Company
PO Box 819067
Dallas, Texas 75381-9067
MCK DEA: RM0605848

Ship From:
McKesson DC: 8162
MICHIGAN DC#8162
1961 HOLLOWAY DRIVE
HOLT, MI 48842

RA #: 008162615275
PO Date: 01/09/2023
Debit Memo #: 7000273645
Reference: 8162615275
Buyer: 8162

Debit Memo DC Return Details

Line #	Economost #	Description	Price Unit	Order Unit	Quantity	NDC/UPC	Net Value
002	2327476	WYNZORA CRM 0.005%/0.0064% 60G	(\$1,201.75)	EA	2	73499000101	(\$2,403.50)

PHARMACEUTICAL RETURNS DEBIT INVOICE

	INVOICE #	X01122202244	REMIT TO:	MCKESSON
	INVOICE DATE:	11/30/2022		PSASRETURNSCREDITS@MCKESSON.CO
	PAYMENT DUE BY:	11/30/2022		PO BOX 4017
	PRODUCT HELD UNTIL:	02/28/2023		DANVILLE IL 61834-4017
	VENDOR #	12592		
DEA#	A/P #	12592		

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Piece Processed Value	\$0.00	\$8470.68	\$8470.88
Pieces Processed	0	8	8
Piece Fee per Piece	\$0.86	\$0.86	
Piece Processing Fee	\$0.00	\$6.88	\$6.88
Case Processed Value	\$0.00	\$0.00	\$0.00
Case Pieces Processed	0	0	0
Case Fee per Piece	\$0.86	\$0.86	
Case Processing Fee	\$0.00	\$0.00	\$0.00
Total Due	\$0.00	\$8477.56	\$8477.56

THIS IS YOUR NOTIFICATION TO SEND RETURN AUTHORIZATION. MCKESSON WILL DEDUCT AMOUNTS WHEN CREDIT MEMO IS NOT PROVIDED TIMELY.

IF INMAR DOES NOT HAVE AN AUTOMATIC AUTHORIZATION TO RETURN OR DESTROY PRODUCT ON YOUR BEHALF, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN OR DESTRUCTION AUTHORIZATION. PLEASE CONTACT CUSTOMER SERVICE AT MCKESSON'S RETURN PROCESSING COMPANY (INMAR) WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX TO 817-868-5341 OR EMAIL RXRA@INMAR.COM. PLEASE DO NOT SEND RETURN OR DESTRUCTION AUTHORIZATION DIRECTLY TO MCKESSON AS THIS WILL DELAY PRODUCT BEING SENT BACK TO YOUR COMPANY. PLEASE DIRECT ALL CREDIT MEMO INFORMATION TO THE ADDRESS IN THE REMIT TO ABOVE. IF A CREDIT MEMO IS NOT RECEIVED WITHIN 30 DAYS FROM THE INVOICE DATE, MCKESSON WILL DEDUCT THE TOTAL INVOICE AMOUNT INCLUDING PROCESSING FEES AS STATED ABOVE FROM THEIR NEXT PAYMENT TO YOUR COMPANY. IF NO REPLY IS RECEIVED BY INMAR WITHIN 90 DAYS OF THE INVOICE DATE, WE WILL DESTROY ALL PRODUCT CONTAINED ON THIS INVOICE IN ACCORDANCE WITH FEDERAL REGULATIONS. ONCE THE PRODUCT IS DESTROYED, THE DEDUCTION WILL STAND AND THE INVOICE WILL BE CONSIDERED CLOSED. PLEASE DO NOT SHIP PRODUCT TO THIS LOCATION LISTED BELOW. PLEASE CONTACT INMAR CUSTOMER SERVICE DIRECTLY FOR PRODUCT RECEIVED IN ERROR.

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVED WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Returned By:
 McKesson Shared Services Center
 6555 North State Highway 161
 Irving, TX 75039

Processed by :
 INMAR RX SOLUTIONS, INC
 3845 Grand Lakes Way
 Grand Prairie, TX 75050
 DEA# RR0191902

DEA # RM0328408

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICELINK.INMAR.COM](https://www.clsinvoiceLink.inmar.com)
 using WEB ACCESS KEY: 47000128-254954193207457

PHARMACEUTICAL RETURNS DEBIT INVOICE

	INVOICE #	X01122202244	REMIT TO:	MCKESSON
	INVOICE DATE:	11/30/2022		PSASRETURNSCREDITS@MCKESSON.CO
	PAYMENT DUE BY:	11/30/2022		PO BOX 4017
	PRODUCT HELD UNTIL:	02/28/2023		DANVILLE IL 61834-4017
	VENDOR #	12592		
DEA#	A/P #	12592		

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

UNSALEABLE

RX PRODUCT

NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
71403004902	SITAVIG 50 MG BUCCAL TABLET	1014	01/31/2023	F	4		915.92	3663.68
73499000101	WYNZORA 0.005%-0.064% CREAM	SCEC	02/28/2023	F	3		1201.75	3605.25
73499000101	WYNZORA 0.005%-0.064% CREAM	SEDK	04/30/2023	F	1		1201.75	1201.75
Sub-Total Rx Piece Processed Value								\$8470.68
Total Rx Pieces Processed								8
Piece Processing Fee @ \$.86/piece								\$6.88
Sub-Total Processing Fees								\$6.88
Sub-Total Rx Case Processed Value								\$.00
Total Rx Case Pieces Processed								
Case Processing Fee @ \$.86/piece								\$.00
Sub-Total for Piece & Case pieces								\$8477.56
Total Due (Unsaleable)								\$8477.56
								=====
Total Invoice Due								\$8477.56
								=====

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: X01122202244

THIS IS YOUR NOTIFICATION TO SEND RETURN AUTHORIZATION. MCKESSON WILL DEDUCT AMOUNTS WHEN CREDIT MEMO IS NOT PROVIDED TIMELY.

IF INMAR DOES NOT HAVE AN AUTOMATIC AUTHORIZATION TO RETURN OR DESTROY PRODUCT ON YOUR BEHALF, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN OR DESTRUCTION AUTHORIZATION. PLEASE CONTACT CUSTOMER SERVICE AT MCKESSON'S RETURN PROCESSING COMPANY (INMAR) WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX TO 817-868-5341 OR EMAIL RXRA@INMAR.COM. PLEASE DO NOT SEND RETURN OR DESTRUCTION AUTHORIZATION DIRECTLY TO MCKESSON AS THIS WILL DELAY PRODUCT BEING SENT BACK TO YOUR COMPANY. PLEASE DIRECT ALL CREDIT MEMO INFORMATION TO THE ADDRESS IN THE REMIT TO ABOVE. IF A CREDIT MEMO IS NOT RECEIVED WITHIN 30 DAYS FROM THE INVOICE DATE, MCKESSON WILL DEDUCT THE TOTAL INVOICE AMOUNT INCLUDING PROCESSING FEES AS STATED ABOVE FROM THEIR NEXT PAYMENT TO YOUR COMPANY. IF NO REPLY IS RECEIVED BY INMAR WITHIN 90 DAYS OF THE INVOICE DATE, WE WILL DESTROY ALL PRODUCT CONTAINED ON THIS INVOICE IN ACCORDANCE WITH FEDERAL REGULATIONS. ONCE THE PRODUCT IS DESTROYED, THE DEDUCTION WILL STAND AND THE INVOICE WILL BE CONSIDERED CLOSED. PLEASE DO NOT SHIP PRODUCT TO THIS LOCATION LISTED BELOW. PLEASE CONTACT INMAR CUSTOMER SERVICE DIRECTLY FOR PRODUCT RECEIVED IN ERROR. IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVED WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Returned By:

McKesson Shared Services Center
6555 North State Highway 161
Irving, TX 75039
DEA # RM0328408

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: X01122202244

RGA Details

RGA Information

RGAs: 100581186
Cancelled
EPI Health LLC - 1402
Customer Type: Direct
RGAs Faxed To: 888-899-0062
Debit Memo #: 7000273645
Debit Memo Amount: \$2,403.50
Debit Memo Date: 01/09/2023
Debit Memo Receipt Date: 07/17/2023
Third Party Processor: NONE
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7819100
MCKESSON CORPORATION
 1961 HOLLOWAY DR
 HOLT, MI 48842
 United States Of America
Phone:
Fax:
DEA #:

RGA Creation

Created Date: 07/20/2023 03:45:19
Created By: John Caldwell
Faxed Date & Time: 07/20/2023 04:00:05
Faxed By: John Caldwell
Last Saved Date & Time: 09/03/2023 12:02:33
Last Saved By:

Return Receipt Info
of Boxes: 0

Batch Information

Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Debit Memo Items Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	UNKNOWN	02/01/2023	01/01/0001	2	\$1201.75	\$2,403.50	\$0.00

The Debit Total is: \$0.00
 The Customer's Extended Total is: \$2,403.50

ReturnConnect - RGA Details

12/6/23, 1:53 PM

<https://returnconnect.icsconnect.com/ReturnConnect/RGADetailsFriendly.aspx?RGAID=100581186>

PHARMACEUTICAL RETURNS DEBIT INVOICE

	INVOICE #	VMC11221675	REMIT TO:	MCKESSON CORP. DBA MCKESSON DRUG CO.
	INVOICE DATE:	11/16/2022		PSASRETURNSCREDITS@MCKESSON.COM
	PAYMENT DUE BY:	11/16/2022		3301 POLLOCK DRIVE
	PRODUCT HELD UNTIL:	02/14/2023		CONROE TX 77303
	VENDOR #	12592		
DEA#	A/P #	12592	DEA #:	RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Piece Processed Value	\$0.00	\$866.00	\$866.00
Pieces Processed	0	1	1
Piece Fee per Piece	\$0.86	\$0.86	
Piece Processing Fee	\$0.00	\$0.86	\$0.86
Total Due	\$0.00	\$866.86	\$866.86

MCKESSON CORP CONTRACTUALLY FACILITATES ON BEHALF OF THEIR RETAIL CLIENTS TO PROCESS AND MAINTAIN ACCOUNTING TRANSACTIONS ASSOCIATED WITH ALL DAMAGED, OUTDATED, AND PARTIAL MERCHANDISE RETURNS OF PHARMACEUTICAL PRODUCTS RESULTING IN THE PROCESSING AND COLLECTION OF PHARMACEUTICAL RETURNS DEBIT MEMOS PRODUCED BY INMAR. MCKESSON CORPORATION RESERVES THE RIGHT TO DEDUCT THE FULL VALUE OF THIS INVOICE FROM CURRENT PURCHASES ON THEIR RETAIL CLIENT'S BEHALF. SUCH DEDUCTION WILL INCLUDE THE DEBIT MEMO NUMBER FOR RECONCILIATION REFERENCE. PAYMENT FOR THIS DEBIT MEMO INVOICE SHOULD BE MADE TO MCKESSON CORPORATION IN THE FORM OF A CREDIT MEMO PAYABLE TO THE 'REMIT TO OR CREDIT THRU' LISTED ON THIS DEBIT MEMO INVOICE PAGE. QUESTIONS RELATED TO THE FINANCIAL TRANSACTIONS ASSOCIATED WITH THIS DEBIT MEMO SHOULD BE ADDRESSED VIA MCKESSON SUPPLIER WEB PORTAL OR 972-446-4800. THIS DEBIT MEMO INVOICE IS A REQUEST FOR RETURN AUTHORIZATION AND/OR NOTIFICATION OF THE FINANCIAL VALUE OF THIS DEBIT MEMO CLAIM. IF INMAR DOES NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY THE PRODUCT INVENTORIED ON THIS DEBIT MEMO INVOICE FROM YOUR COMPANY, THIS NOTIFICATION ALSO ACTS AS A SOLICITATION FOR DESTRUCTION PERMISSION. PLEASE CONFIRM THE 'SHIP TO' IDENTIFIED ABOVE. CONTACT THE INMAR CUSTOMER SERVICE CENTER WITH THE RA NUMBER AND SHIPPING/DESTRUCTION INSTRUCTIONS AT CLSINVOICE LINK <https://www.clsinvoicelink.inmar.com>. USING THE WEB ACCESS KEY LISTED BELOW, RXRA@INMAR.COM, FAX# 817-868-5341, OR BY CALLING 817-868-5300. IF A RETURN AUTHORIZATION IS NOT RECEIVED AT INMAR WITHIN SIXTY (60) DAYS OF THE DEBIT MEMO INVOICE DATE, THIS PRODUCT WILL BE DESTROYED IN ACCORDANCE WITH U.S. FEDERAL REGULATIONS. ADDITIONAL DEBIT MEMO INVOICE COPIES ARE AVAILABLE VIA INMAR CLSINVOICELINK USING THE WEB ACCESS KEY BELOW. IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Return By:
 VMC
 C/O McKesson Financial Center
 P.O. Box 4017

Processed by :
 INMAR RX SOLUTIONS, INC
 3845 Grand Lakes Way
 Grand Prairie, TX 75050
 DEA# RR0191902

Danville, IL 61834

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICELINK.INMAR.COM](https://www.clsinvoicelink.inmar.com)
 using WEB ACCESS KEY: 21215041-871349466206058

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	VMC11221675	REMIT TO:	MCKESSON CORP. DBA MCKESSON DRUG CO.
INVOICE DATE:	11/16/2022		PSASRETURNSCREDITS@MCKESSON.COM
PAYMENT DUE BY:	11/16/2022		3301 POLLOCK DRIVE
PRODUCT HELD UNTIL:	02/14/2023		CONROE TX 77303
VENDOR #	12592	DEA #:	RM0328408
DEA#	A/P # 12592		

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

RX PRODUCT								
NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
63801010701	BENSAL HP 3% OINTMENT	0586037	unknown	F	1		866.00	866.00
Sub-Total Rx Piece Processed Value								\$866.00
Total Rx Pieces Processed								1
Piece Processing Fee @ \$.86/piece								\$.86
Sub-Total Processing Fees								\$.86
Sub-Total								\$866.86
Total Due								=====
								\$866.86
								=====

MCKESSON CORP CONTRACTUALLY FACILITATES ON BEHALF OF THEIR RETAIL CLIENTS TO PROCESS AND MAINTAIN ACCOUNTING TRANSACTIONS ASSOCIATED WITH ALL DAMAGED, OUTDATED, AND PARTIAL MERCHANDISE RETURNS OF PHARMACEUTICAL PRODUCTS RESULTING IN THE PROCESSING AND COLLECTION OF PHARMACEUTICAL RETURNS DEBIT MEMOS PRODUCED BY INMAR. MCKESSON CORPORATION RESERVES THE RIGHT TO DEDUCT THE FULL VALUE OF THIS INVOICE FROM CURRENT PURCHASES ON THEIR RETAIL CLIENT'S BEHALF. SUCH DEDUCTION WILL INCLUDE THE DEBIT MEMO NUMBER FOR RECONCILIATION REFERENCE. PAYMENT FOR THIS DEBIT MEMO INVOICE SHOULD BE MADE TO MCKESSON CORPORATION IN THE FORM OF A CREDIT MEMO PAYABLE TO THE 'REMIT TO OR CREDIT THRU' LISTED ON THIS DEBIT MEMO INVOICE PAGE. QUESTIONS RELATED TO THE FINANCIAL TRANSACTIONS ASSOCIATED WITH THIS DEBIT MEMO SHOULD BE ADDRESSED VIA MCKESSON SUPPLIER WEB PORTAL OR 972-446-4800. THIS DEBIT MEMO INVOICE IS A REQUEST FOR RETURN AUTHORIZATION AND/OR NOTIFICATION OF THE FINANCIAL VALUE OF THIS DEBIT MEMO CLAIM. IF INMAR DOES NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY THE PRODUCT INVENTORIED ON THIS DEBIT MEMO INVOICE FROM YOUR COMPANY, THIS NOTIFICATION ALSO ACTS AS A SOLICITATION FOR DESTRUCTION PERMISSION. PLEASE CONFIRM THE 'SHIP TO' IDENTIFIED ABOVE. CONTACT THE INMAR CUSTOMER SERVICE CENTER WITH THE RA NUMBER AND SHIPPING/DESTRUCTION INSTRUCTIONS AT CLSINVOICE LINK <https://www.clsinvoicelink.inmar.com>. USING THE WEB ACCESS KEY LISTED BELOW, RXRA@INMAR.COM, FAX# 817-868-5341, OR BY CALLING 817-868-5300. IF A RETURN AUTHORIZATION IS NOT RECEIVED AT INMAR WITHIN SIXTY (60) DAYS OF THE DEBIT MEMO INVOICE DATE, THIS PRODUCT WILL BE DESTROYED IN ACCORDANCE WITH U.S. FEDERAL REGULATIONS. ADDITIONAL DEBIT MEMO INVOICE COPIES ARE AVAILABLE VIA INMAR CLSINVOICELINK USING THE WEB ACCESS KEY BELOW. IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Return By:
 VMC
 C/O McKesson Financial Center
 P.O. Box 4017

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: VMC11221675

Danville, IL 61834

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: VMC11221675

RGAs Details

RGAs Information

RGAs: 100550249
Credit Memo Issued
 Turnaround Time: 86 days, 11 hours
EPI Health LLC - 1402
 Customer Type: Direct
RGAs Faxed To: 817-868-5341
Debit Memo #: XO1122202244
Debit Memo Amount: \$8,470.68
Debit Memo Date: 11/30/2022
Debit Memo Receipt Date: 12/02/2022
Third Party Processor: Inmar RX Solutions Inc
Third Party RAF: 1402_152
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554725
MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 United States Of America
Phone:
Fax:
DEA #:

RGAs Creation

Created Date: 12/02/2022 08:40:50
Created By: Import180 Automated
Faxed Date & Time: 12/05/2022 12:05:08
Faxed By: John Caldwell
Last Saved Date & Time: 03/13/2023 08:28:00
Last Saved By: Bob Hill

Return Receipt Info

of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued

Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 12/16/2022
Received By: Joyce Powers
Receiving Facility: BROOKS 3PL
Total Days in Transit: 16

Return Confirmation Information

Confirmed Date: 01/09/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 15400776

Itemized Return Information

Itemized Date: 01/09/2023
Itemized By: Francisca Santellan

Credit Memo Information
AR Transaction #: 15730328
Credit Memo Number: 72398169
Credit Memo Date: 03/13/2023
Turnaround Time: 86 days, 11 hours

Credit Assessment Information
Assessed Date: 01/25/2023
Assessed By: Angela Robinson

Client Approval Information
Approved Date: 03/13/2023
Approved By: Bob Hill

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	7140304902	1402 03-0049-02 R	Sitavig 50MG 2 Blstr Pack CTN	1014	01/31/2023	01/31/2023	4	\$915.92	\$3,663.68	\$0.00
2	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SCEC	02/28/2023	02/28/2023	3	\$1201.75	\$3,605.25	\$0.00
3	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SEDK	04/30/2023	04/30/2023	1	\$1201.75	\$1,201.75	\$0.00

The Debit Total is: \$0.00
 The Customer's Extended Total is: \$8,470.68

Received Items												
Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	7140304902	1402 03-0049-02 R	Sitavig 50MG 2 Blstr Pack CTN	1014	01/31/2023	Full	4	\$915.92	\$3,663.68		
1	2	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SCEC	02/28/2023	Full	3	\$1150.00	\$3,450.00		
1	3	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SEDK	04/30/2023	Full	1	\$1150.00	\$1,150.00		

The Credit Memo Total is: \$8,263.68

RGAs Details

RGAs Information

RGAs: 100549369
Credit Memo Issued
Turnaround Time: 33 days, 10 hours
EPI Health LLC - 1402
Customer Type: Indirect - Credit
RGAs Faxed To: 817-868-5341
Debit Memo #: VMC11221675
Debit Memo Amount: \$866.00
Debit Memo Date: 11/16/2022
Debit Memo Receipt Date: 11/23/2022
Third Party Processor: Inmar RX Solutions Inc
Third Party RAF: 1402_146
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554725
MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 United States Of America
Phone:
Fax:
DEA #:

Indirect Customer
Indirect Customer #: EDI7712
VMC
 C/O McKesson Financial Center
 ,
 United States Of America
Phone:
Fax:
DEA #: RR0191902

RGAs Creation

Created Date: 11/23/2022 02:40:36
Created By: Import180 Automated
Faxed Date & Time: 11/30/2022 12:00:22
Faxed By: Barbara Cofer
Last Saved Date & Time: 01/25/2023 09:15:01
Last Saved By: Barbara Reiter

Return Receipt Info
of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued
Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 12/22/2022
Received By: Irina De La Cruz
Receiving Facility: BROOKS 3PL
Total Days in Transit: 36

Return Confirmation Information
Confirmed Date: 01/07/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 15395273

Itemized Return Information
Itemized Date: 01/07/2023
Itemized By: Joyce Powers

Credit Memo Information
AR Transaction #: 15484473
Credit Memo Number: 72293853
Credit Memo Date: 01/25/2023
Turnaround Time: 33 days, 10 hours

Credit Assessment Information
Assessed Date: 01/25/2023
Assessed By: Barbara Reiter

Client Approval Information
Approved Date:
Approved By:

Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Debit Memo Items			Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
					Customer's Exp. Date	Exp. Date	Qty						
1	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	UNKNOWN	01/01/1900	01/01/1900	01/01/1900	01/01/1900	1	\$866.00	\$866.00	\$0.00	

The Debit Total is: \$0.00
 The Customer's Extended Total is: \$866.00

Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Received Items			F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
						Exp. Date	Exp. Date	Qty						
1	1	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0586037	08/31/2022	08/31/2022	Full	1	\$20.50	\$20.50			

The Credit Memo Total is: \$20.50

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	ALB22086624	REMIT TO:	ALBERTSONS BUY BACK
INVOICE DATE:	08/10/2022		PSASRETURNSCREDITS@MCKESSON.CO
PAYMENT DUE BY:	08/10/2022		3301 POLLOK DRIVE
PRODUCT HELD UNTIL:	10/09/2022		CONROE TX 77303
VENDOR #	12592		
DEA#	A/P #	12592	DEA #: RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Regular Piece Processed Value	\$.00	\$4182.34	\$4182.34
State Rtn Piece Processed Val	\$.00	\$.00	\$.00
Regular Pieces Processed	0	7	7
State Rtn Pieces Processed	0	0	0
Piece Fee per Piece	\$0.75	\$0.75	
Piece Processing Fee	\$0.00	\$5.25	\$5.25
Total Due	\$.00	\$4187.59	\$4187.59

IF WE DO NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY ON FILE FOR YOUR COMPANY, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN AUTHORIZATION/DESTRUCTION. PLEASE CONTACT CUSTOMER SERVICE AT OUR PROCESSING COMPANY INMAR, A CLS COMPANY, WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX 817-868-5341 OR WILL DEDUCT THE TOTAL DUE AMOUNTS PLUS PROCESSING COSTS. IF NO REPLY IS RECEIVED WITHIN 60 DAYS OF INVOICE DATE, WE WILL DESTROY THE PRODUCT ACCORDING TO FEDERAL REGULATION.

REMIT PAYMENT IN THE FORM OF A CHECK OR CREDIT MEMORANDUM AND REFERENCE THE ACCOUNT NUMBER LISTED BELOW, ALSO INCLUDE INVOICE NUMBER REFERENCED AT TOP OF PAGE. PRODUCT DISPOSITION CALLS SHOULD BE DIRECTED TO INMAR CUSTOMER SERVICE AT 817-868-5300, FAX 817-868-5341 OR EMAIL RXRA@INMAR.COM. ALL OTHER QUESTIONS SHOULD BE DIRECTED TO MCKESSON'S RETURN GROUP AT 972-446-4800.

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Remit To:	Returned By:	Processed by :
McKesson Shared Services Center	Albertsons LLC	
6555 North State Highway 161	590 East 17th Street	INMAR RX SOLUTIONS, INC
Irving, TX 75039	Idaho Falls, ID 83404	3845 Grand Lakes Way
DEA #: RM0328408	DEA #: FA3751028	Grand Prairie, TX 75050
		DEA# RR0191902

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICELINK.INMAR.COM](https://www.clsinvoiceLink.inmar.com)
 using WEB ACCESS KEY: 21158031-667982906254066

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	ALB22086624	REMIT TO:	ALBERTSONS BUY BACK
INVOICE DATE:	08/10/2022		PSASRETURNSCREDITS@MCKESSION.CO
PAYMENT DUE BY:	08/10/2022		3301 POLLOK DRIVE
PRODUCT HELD UNTIL:	10/09/2022		CONROE TX 77303
VENDOR #	12592		
DEA#	A/P #	12592	DEA #:
			RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

RX PRODUCT								
NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
63801010701	BENSAL HP OINTMENT	0386028	06/30/2022	F	1		866.00	866.00
63801010701	BENSAL HP OINTMENT	0386028	unknown	F	1		866.00	866.00
71403000330	RHOFADE 1% CREAM	REBG	05/31/2022	F	1		568.00	568.00
71403000330	RHOFADE 1% CREAM	RHAZ	08/31/2022	F	2		568.00	1136.00
71403080445	CLODERM 0.1% CREAM	PFEA	06/30/2022	F	2		373.17	746.34
Sub-Total Rx Regular Piece Processed Value								\$4182.34
Total Rx Regular Pieces Processed								7
Sub-Total Rx State Rtn Piece Processed Value								\$.00
Total Rx State Rtn Pieces Processed								
Piece Processing Fee @ \$.75/piece								\$5.25
Sub-Total Processing Fees								\$5.25
Sub-Total								\$4187.59
Total Due								===== \$4187.59 =====

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: ALB22086624

IF WE DO NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY ON FILE FOR YOUR COMPANY, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN AUTHORIZATION/DESTRUCTION. PLEASE CONTACT CUSTOMER SERVICE AT OUR PROCESSING COMPANY INMAR, A CLS COMPANY, WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX 817-868-5341 OR WILL DEDUCT THE TOTAL DUE AMOUNTS PLUS PROCESSING COSTS. IF NO REPLY IS RECEIVED WITHIN 60 DAYS OF INVOICE DATE, WE WILL DESTROY THE PRODUCT ACCORDING TO FEDERAL REGULATION.

REMIT PAYMENT IN THE FORM OF A CHECK OR CREDIT MEMORANDUM AND REFERENCE THE ACCOUNT NUMBER LISTED BELOW, ALSO INCLUDE INVOICE NUMBER REFERENCED AT TOP OF PAGE. PRODUCT DISPOSITION CALLS SHOULD BE DIRECTED TO INMAR CUSTOMER SERVICE AT 817-868-5300, FAX 817-868-5341 OR EMAIL RXRA@INMAR.COM. ALL OTHER QUESTIONS SHOULD BE DIRECTED TO MCKESSON'S RETURN GROUP AT 972-446-4800.

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Remit To:

McKesson Shared Services Center
6555 North State Highway 161
Irving, TX 75039
DEA #: RM0328408

Albertsons LLC
590 East 17th Street

Returned By:

Idaho Falls, ID 83404
DEA #: FA3751028

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: ALB22086624



DEBIT MEMO - DC RETURN

Vendor: 112592
 EPI HEALTH LLC
 PO BOX 744233
 ATLANTA, GA 30384-4233
Vendor DEA:
Terms: 3

Bill To:
 McKesson Drug Company
 PO Box 819067
 Dallas, Texas 75381-9067
MCK DEA: PM0023046

Ship From:
McKesson DC: 8180
 SALT LAKE CITY #8180
 1900 SOUTH 4490 WEST..
 SALT LAKE CITY, UT 84104

RA #: DAMAGED
PO Date: 06/23/2022
Debit Memo #: 7000264708
Reference: 8180724215
Buyer: 8180

Debit Memo DC Return Details

Line #	Economost #	Description	Price Unit	Order Unit	Quantity	NDC/UPC	Net Value
002	3975505	CLODERM CREAM 0.1% TUBE 45GM	(\$373.17)	EA	2	71403080445	(\$746.34)
003	2946564	HANDLING/DISPOSAL COSTS RX	(\$1.73)	EA	2	00000000004	(\$3.46)

RGAs Details

RGAs Information

RGAs: 100534684
Credit Memo Issued
Turnaround Time: 178 days, 12 hours
EPI Health LLC - 1402
Customer Type: Indirect - Credit
RGAs Faxed To: 817-868-5341
Debit Memo #: ALB22086624
Debit Memo Amount: \$4,182.34
Debit Memo Date: 08/10/2022
Debit Memo Receipt Date: 08/10/2022
Third Party Processor: Inmar RX Solutions Inc
Third Party RAF: 1402_74
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554725
MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 United States Of America
Phone:
Fax:
DEA #:

Indirect Customer
Indirect Customer #: R50161
Albertsons LLC
 590 East 17th Street
 Idaho Falls, ID 83404
 United States Of America
Phone:
Fax:
DEA #: FA3751028

RGAs Creation

Created Date: 08/10/2022 04:40:32
Created By: Import180 Automated
Faxed Date & Time: 08/11/2022 08:30:22
Faxed By: John Caldwell
Last Saved Date & Time: 02/20/2023 07:33:54
Last Saved By: Bob Hill

Return Receipt Info
of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued
Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 08/25/2022
Received By: Yenny Distouart Breffe
Receiving Facility: BROOKS 3PL
Total Days in Transit: 15

Return Confirmation Information
Confirmed Date: 08/30/2022
Confirmed By: Auto Confirm
Inventory Transaction #: 14743788

Itemized Return Information
Itemized Date: 08/30/2022
Itemized By: Yenny Distouart Breffe

Credit Memo Information

AR Transaction #: 15616697
Credit Memo Number: 72351182
Credit Memo Date: 02/20/2023
Turnaround Time: 178 days, 12 hours

Credit Assessment Information

Assessed Date: 09/01/2022
Assessed By: Jerrick Robinson

Client Approval Information

Approved Date: 02/20/2023
Approved By: Bob Hill

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0386028	06/30/2022	06/30/2022	1	\$866.00	\$866.00	\$866.00
2	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	UNKNOWN	01/01/1900	01/01/1900	1	\$866.00	\$866.00	\$0.00
3	1402 03-0003-30	1402 03-0003-30 R	Rhofade 1% Cream 30g	REBG	05/31/2022	05/30/2022	1	\$568.00	\$568.00	\$543.54
4	1402 03-0003-30	1402 03-0003-30 R	Rhofade 1% Cream 30g	RHAZ	08/31/2022	08/31/2022	2	\$568.00	\$1,136.00	\$543.54
5	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	PFEA	06/30/2022	06/30/2022	2	\$373.17	\$746.34	\$341.72

The Debit Total is: \$3,180.06
 The Customer's Extended Total is: \$4,182.34

Received Items												
Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	1402 03-0003-30	1402 03-0003-30 R	Rhofade 1% Cream 30g	REBG	05/30/2022	Full	1	\$543.54	\$543.54		
1	2	1402 03-0003-30	1402 03-0003-30 R	Rhofade 1% Cream 30g	RHAZ	08/31/2022	Full	2	\$543.54	\$1,087.08		
1	3	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0386028	06/30/2022	Full	2	\$866.00	\$1,732.00		
1	4	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	PFEA	06/30/2022	Full	2	\$341.72	\$683.44		

The Credit Memo Total is: \$4,046.06

12/6/23, 2:01 PM

ReturnConnect - RGA Details

<https://returnconnect.icsconnect.com/ReturnConnect/RGADetailsFriendly.aspx?RGAID=100534684>

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	ALB230614332	REMIT TO:	ALBERTSONS BUY BACK
INVOICE DATE:	06/14/2023		PSASRETURNSCREDITS@MCKESSON.CO
PAYMENT DUE BY:	06/14/2023		3301 POLLOK DRIVE
PRODUCT HELD UNTIL:	08/13/2023		CONROE TX 77303
VENDOR #	12592		
DEA#	A/P #	12592	DEA #: RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Regular Piece Processed Value	\$.00	\$746.34	\$746.34
State Rtn Piece Processed Val	\$.00	\$.00	\$.00
Regular Pieces Processed	0	2	2
State Rtn Pieces Processed	0	0	0
Piece Fee per Piece	\$0.75	\$0.75	
Piece Processing Fee	\$0.00	\$1.50	\$1.50
Total Due	\$.00	\$747.84	\$747.84

IF WE DO NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY ON FILE FOR YOUR COMPANY, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN AUTHORIZATION/DESTRUCTION. PLEASE CONTACT CUSTOMER SERVICE AT OUR PROCESSING COMPANY INMAR, A CLS COMPANY, WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX 817-868-5341 OR WILL DEDUCT THE TOTAL DUE AMOUNTS PLUS PROCESSING COSTS. IF NO REPLY IS RECEIVED WITHIN 60 DAYS OF INVOICE DATE, WE WILL DESTROY THE PRODUCT ACCORDING TO FEDERAL REGULATION.

REMIT PAYMENT IN THE FORM OF A CHECK OR CREDIT MEMORANDUM AND REFERENCE THE ACCOUNT NUMBER LISTED BELOW, ALSO INCLUDE INVOICE NUMBER REFERENCED AT TOP OF PAGE. PRODUCT DISPOSITION CALLS SHOULD BE DIRECTED TO INMAR CUSTOMER SERVICE AT 817-868-5300, FAX 817-868-5341 OR EMAIL RXRA@INMAR.COM. ALL OTHER QUESTIONS SHOULD BE DIRECTED TO MCKESSON'S RETURN GROUP AT 972-446-4800.

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Returned By:	Credit Thru:
Albertsons LLC	McKesson Shared Services Center
590 East 17th Street	6555 North State Highway 161
Idaho Falls, ID 83404	Irving, TX 75039
DEA #: FA3751028	DEA #: RM0328408

Processed by :

 INMAR RX SOLUTIONS, INC
 3845 Grand Lakes Way
 Grand Prairie, TX 75050
 DEA# RR0191902

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICELINK.INMAR.COM](https://www.clsinvoiceLink.inmar.com)
 using WEB ACCESS KEY: 21158031-667982906254066

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	ALB230614332	REMIT TO:	ALBERTSONS BUY BACK
INVOICE DATE:	06/14/2023		PSASRETURNSCREDITS@MCKESSON.CO
PAYMENT DUE BY:	06/14/2023		3301 POLLOK DRIVE
PRODUCT HELD UNTIL:	08/13/2023		CONROE TX 77303
VENDOR #	12592		
DEA#	A/P #	12592	DEA #:
			RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

RX PRODUCT								
NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
71403080445	CLODERM 0.1% CREAM	RECX	05/31/2023	F	2		373.17	746.34
Sub-Total Rx Regular Piece Processed Value								\$746.34
Total Rx Regular Pieces Processed								2
Sub-Total Rx State Rtn Piece Processed Value								\$.00
Total Rx State Rtn Pieces Processed								
Piece Processing Fee @ \$.75/piece								\$1.50
Sub-Total Processing Fees								\$1.50
Sub-Total								\$747.84
Total Due								=====
								\$747.84
								=====

IF WE DO NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY ON FILE FOR YOUR COMPANY, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN AUTHORIZATION/DESTRUCTION. PLEASE CONTACT CUSTOMER SERVICE AT OUR PROCESSING COMPANY INMAR, A CLS COMPANY, WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX 817-868-5341 OR WILL DEDUCT THE TOTAL DUE AMOUNTS PLUS PROCESSING COSTS. IF NO REPLY IS RECEIVED WITHIN 60 DAYS OF INVOICE DATE, WE WILL DESTROY THE PRODUCT ACCORDING TO FEDERAL REGULATION.

REMIT PAYMENT IN THE FORM OF A CHECK OR CREDIT MEMORANDUM AND REFERENCE THE ACCOUNT NUMBER LISTED BELOW, ALSO INCLUDE INVOICE NUMBER REFERENCED AT TOP OF PAGE. PRODUCT DISPOSITION CALLS SHOULD BE DIRECTED TO INMAR CUSTOMER SERVICE AT 817-868-5300, FAX 817-868-5341 OR EMAIL RXRA@INMAR.COM. ALL OTHER QUESTIONS SHOULD BE DIRECTED TO MCKESSON'S RETURN GROUP AT 972-446-4800.

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

Returned By:	Credit Thru:
Albertsons LLC	McKesson Shared Services Center
590 East 17th Street	6555 North State Highway 161
Idaho Falls, ID 83404	Irving, TX 75039
DEA #: FA3751028	DEA #: RM0328408

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: ALB230614332

RGAs Details

RGAs Information

RGAs: 100536757
Cancelled
EPI Health LLC - 1402
Customer Type: Direct
RGAs Faxed To: 888-899-0062
Debit Memo #: 7000264708
Debit Memo Amount: \$746.34
Debit Memo Date: 06/23/2022
Debit Memo Receipt Date: 08/24/2022
Third Party Processor: NONE
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554701
MCKESSON CORPORATION
 1900 SOUTH 4490 WEST
 DBA MCKESSON DRUG CO
 SALT LAKE CITY, UT 84104
 United States Of America
Phone:
Fax:
DEA #:

RGAs Creation
Created Date: 08/24/2022 03:22:10
Created By: Jerrick Robinson
Faxed Date & Time: 08/24/2022 03:40:09
Faxed By: Jerrick Robinson
Last Saved Date & Time: 10/08/2022 12:03:22
Last Saved By:

Return Receipt Info
of Boxes: 0

Batch Information

Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Debit Memo Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	UNKNOWN	01/01/2000	01/01/0001	2	\$373.17	\$746.34	\$0.00

The Debit Total is: \$0.00
 The Customer's Extended Total is: \$746.34

12/6/23, 1:56 PM

ReturnConnect - RGA Details

<https://returnconnect.icsconnect.com/ReturnConnect/RGADetailsFriendly.aspx?RGAIID=100536757>

Return Goods Invoice

Invoice Date: 05/31/2023
Payment Due By: 08/29/2023
Product held Until: 07/30/2023

Manufacturer: EPI Health, LLC
Debit Memo: XP4083382182
Class Of Trade: Wholesaler

Remit Payment To:	Ship To:	Processed For:
McKesson DC PO Box 4017 Danville, IL 61837 Phone: (972)446-6497 Contact: PSASReturnsCredits@McKesson.com	EPI Health, LLC c/o EPI 420 International Blvd. Ste 500 Brooks, KY 40109 DEA#: RI0248686 State License: W02424	McKesson 1515 Kendrick Lane Lakeland, FL 33805 DEA ID: PM0000771

NDC	Description	Ctrl	Strength	Lot #	Exp Date	Pkg Size	Units in Full PKG	Partial Qty	Price	Est Value
Non-Controls										
Total NDC Count: 1										\$709.82
71403010130	MINOLIRA	0	105 MG - TER	T2000364	07/31/2023	30	30	1	\$835.09	\$709.82
Total NDC Count: 1										\$709.82
Processing Fee Total: \$0.00										

THIS IS YOUR NOTIFICATION TO SEND RETURN AUTHORIZATION. MCKESSON WILL DEDUCT AMOUNTS WHEN CREDIT MEMO IS NOT PROVIDED TIMELY.

IF PHARMALINK DOES NOT HAVE AN AUTOMATIC AUTHORIZATION TO RETURN OR DESTROY PRODUCT ON YOUR BEHALF, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN OR DESTRUCTION AUTHORIZATION. PLEASE CONTACT CUSTOMER SERVICE AT MCKESSON'S RETURN PROCESSING COMPANY (PHARMALINK) WITH THE RETURN AUTHORIZATION NUMBER AT 800-257-3527, FAX TO 727-342-6133 Or Email Authorizations@pharmalinkinc.com. PLEASE DO NOT SEND RETURN OR DESTRUCTION AUTHORIZATION DIRECTLY TO MCKESSON AS THIS WILL DELAY PRODUCT BEING SENT BACK TO YOUR COMPANY. PLEASE DIRECT ALL CREDIT MEMO INFORMATION TO THE ADDRESS IN THE REMIT TO ABOVE. IF A CREDIT MEMO IS NOT RECEIVED WITHIN 30 DAYS FROM THE INVOICE DATE, MCKESSON WILL DEDUCT THE TOTAL INVOICE AMOUNT INCLUDING PROCESSING FEES AS STATED ABOVE FROM THEIR NEXT PAYMENT TO YOUR COMPANY. IF NO REPLY IS RECEIVED BY PHARMALINK WITHIN 60 DAYS OF THE INVOICE DATE, WE WILL DESTROY ALL PRODUCT CONTAINED ON THIS INVOICE IN ACCORDANCE WITH FEDERAL REGULATIONS. ONCE THE PRODUCT IS DESTROYED, THE DEDUCTION WILL STAND AND THE INVOICE WILL BE CONSIDERED CLOSED. PLEASE DO NOT SHIP PRODUCT TO THIS LOCATION LISTED BELOW. PLEASE CONTACT PHARMALINK CUSTOMER SERVICE DIRECTLY FOR PRODUCT RECEIVED IN ERROR.

Returned By:
 McKesson Shared Services Center
 6555 North State Highway 161
 Irving, TX 75039 DEA # RM0328408
 These products are not intended for consumers – Do Not Redistribute "FOR DESTRUCTION ONLY"

RGAs Details

RGAs Information

RGAs: 100577036
Credit Memo Issued
Turnaround Time: 4 days, 11 hours
EPI Health LLC - 1402
Customer Type: Indirect - Credit
RGAs Faxed To: 817-868-5341
Debit Memo #: ALB230614332
Debit Memo Amount: \$747.84
Debit Memo Date: 06/14/2023
Debit Memo Receipt Date: 06/19/2023
Third Party Processor: Inmar RX Solutions Inc
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554725
MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 United States Of America
Phone:
Fax:
DEA #:

Indirect Customer
Indirect Customer #: R50161
ALBERTSONS LLC
 590 East 17th Street
 Idaho Falls, ID 83404
 United States Of America
Phone:
Fax:
DEA #: FA3751028

RGAs Creation

Created Date: 06/20/2023 08:42:31
Created By: Eric Stewart
Faxed Date & Time: 06/20/2023 08:50:12
Faxed By: Eric Stewart
Last Saved Date & Time: 07/05/2023 11:52:52
Last Saved By: Bob Hill

Return Receipt Info
of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued
Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 06/30/2023
Received By: Joyce Powers
Receiving Facility: BROOKS 3PL
Total Days in Transit: 1.6

Return Confirmation Information
Confirmed Date: 06/30/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 16326516

Itemized Return Information
Itemized Date: 06/30/2023
Itemized By: Sherry Back

Credit Memo Information

Credit Assessment Information

Client Approval Information

12/6/23, 1:50 PM

ReturnConnect - RGA Details

AR Transaction #: 16340409
Credit Memo Number: 72646084
Credit Memo Date: 07/05/2023
Turnaround Time: 4 days, 11 hours

Assessed Date: 07/05/2023
Assessed By: John Caldwell

Approved Date: 07/05/2023
Approved By: Bob Hill

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0804-45	1402 0804-45 R	Cloderm Cream 45gm Tube	RECX	05/31/2023	05/30/2023	2	\$373.17	\$746.34	\$317.80

The Debit Total is: \$635.60
 The Customer's Extended Total is: \$746.34

Received Items											
Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Extended Amount	Denial Reason	Note
1	1	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	RECX	05/31/2023	Full	2	\$714.20		

The Credit Memo Total is: \$714.20

RGAs Details

RGAs Information

RGAs: 100575006
Cancelled
EPI Health LLC - 1402
Customer Type: Direct
RGAs Faxed To: 727-669-8327
Debit Memo #: XP4083382182
Debit Memo Amount: \$709.82
Debit Memo Date: 05/31/2023
Debit Memo Receipt Date: 06/01/2023
Third Party Processor: PharmaLink Inc
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554692
MCKESSON DRUG COMPANY
 1515 KENDRICK LANE
 MCKESSON CORPORATION
 LAKELAND, FL 33805
 United States Of America
Phone:
Fax:
DEA #:

RGAs Creation

Created Date: 06/01/2023 10:01:17
Created By: John Caldwell
Faxed Date & Time: 06/01/2023 10:10:05
Faxed By: John Caldwell
Last Saved Date & Time: 07/16/2023 12:02:27
Last Saved By:

Return Receipt Info
of Boxes: 0

Batch Information

Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	7140310130	1402 0101-30 R	Minolira 105MG Tabs 30Ct Each	T2000364	07/31/2023	07/31/2023	1	\$709.82	\$709.82	\$709.82

The Debit Total is: \$709.82
 The Customer's Extended Total is: \$709.82

12/6/23, 1:58 PM

ReturnConnect - RGA Details

<https://returnconnect.icsconnect.com/ReturnConnect/RGADetailsFriendly.aspx?RGAIID=100575006>

PHARMACEUTICAL RETURNS DEBIT INVOICE

	INVOICE #	WMT23080103743	REMIT TO:	WALMART C/O MCKESSON CORPORATION
	INVOICE DATE:	05/01/2023		PSASRETURNSCREDITS@MCKESSON.COM
	PAYMENT DUE BY:	05/01/2023		PO BOX 4017
	PRODUCT HELD UNTIL:	06/30/2023		DANVILLE IL 61834
	VENDOR #	12592		
DEA#	A/P #	12592	DEA #:	RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Regular Piece Processed Value	\$.00	\$3086.54	\$3086.54
State Rtn Piece Processed Val	\$.00	\$.00	\$.00
Regular Pieces Processed	0	4	4
State Rtn Pieces Processed	0	0	0
Piece Fee per Piece	\$0.00	\$0.00	
Piece Processing Fee	\$0.00	\$0.00	\$0.00
Total Due	\$.00	\$3086.54	\$3086.54

THIS DOCUMENT IS A RETURN AUTHORIZATION REQUEST. IF PRODUCT DISPOSITION INSTRUCTION ARE NOT RECEIVED WITHIN 30 DAYS OF THE INVOICE DATE THE PRODUCT (S) WILL BE DISPOSED OF IN ACCORDANCE WITH STATE AND FEDERAL REGULATIONS, BUT CREDIT WILL STILL BE DUE AND A DEDUCTION MAY BE TAKEN. IF YOU HAVE ANY QUESTIONS CONTACT OUR CUSTOMER SERVICE CENTER
 1-800-967-5952

PLEASE EMAIL RETURN AUTHORIZATION TO: RXRA@INMAR.COM
 OR MAIL TO: INMAR RX SOLUTIONS 4332 EMPIRE RD. FORT WORTH, TX 76155
 PLEASE REFERENCE THE INDICATED DEBIT MEMO NUMBER WHEN REMITTING PAYMENT OR CREDIT
 IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

RETURN BY:
 WAL-MART
 702 SW 8TH STREET
 BENTONVILLE, AR 72716

Processed by :
 INMAR RX SOLUTIONS, INC
 3845 Grand Lakes Way
 Grand Prairie, TX 75050
 DEA# RR0191902

ID# WMT072716

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICELINK.INMAR.COM](https://www.clsinvoiceLink.inmar.com)
 using WEB ACCESS KEY: 10103135-530894455950059

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	WMT23080103743	REMIT TO:	WALMART C/O MCKESSON CORPORATION
INVOICE DATE:	05/01/2023		PSASRETURNSCREDITS@MCKESSON.COM
PAYMENT DUE BY:	05/01/2023		PO BOX 4017
PRODUCT HELD UNTIL:	06/30/2023		DANVILLE IL 61834
VENDOR #	12592		
DEA#	A/P #	12592	DEA #:
			RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

RX PRODUCT

NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
71403080445	CLODERM 0.1% CREAM	RECX	05/31/2023	F	2		341.72	683.44
73499000101	WYNZORA 0.005%-0.064% CREAM	SCEC	02/28/2023	F	1		1201.55	1201.55
73499000101	WYNZORA 0.005%-0.064% CREAM	SFEK	06/30/2023	F	1		1201.55	1201.55
Sub-Total Rx Regular Piece Processed Value								\$3086.54
Total Rx Regular Pieces Processed								4
Sub-Total Rx State Rtn Piece Processed Value								\$.00
Total Rx State Rtn Pieces Processed								
Piece Processing Fee @ \$.00/piece								\$.00
Sub-Total Processing Fees								\$.00
Sub-Total								\$3086.54
Total Due								=====
								\$3086.54
								=====

THIS DOCUMENT IS A RETURN AUTHORIZATION REQUEST. IF PRODUCT DISPOSITION INSTRUCTION ARE NOT RECEIVED WITHIN 30 DAYS OF THE INVOICE DATE THE PRODUCT (S) WILL BE DISPOSED OF IN ACCORDANCE WITH STATE AND FEDERAL REGULATIONS, BUT CREDIT WILL STILL BE DUE AND A DEDUCTION MAY BE TAKEN. IF YOU HAVE ANY QUESTIONS CONTACT OUR CUSTOMER SERVICE CENTER
 1-800-967-5952

PLEASE EMAIL RETURN AUTHORIZATION TO: RXRA@INMAR.COM
 OR MAIL TO: INMAR RX SOLUTIONS 4332 EMPIRE RD. FORT WORTH, TX 76155
 PLEASE REFERENCE THE INDICATED DEBIT MEMO NUMBER WHEN REMITTING PAYMENT OR CREDIT
 IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

RETURN BY:
 WAL-MART
 702 SW 8TH STREET
 BENTONVILLE, AR 72716
 ID# WMT072716

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: WMT23080103743

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	DDI052316848	REMIT TO:	DISCOUNT DRUG MART, INC. C/O MCKESSON
INVOICE DATE:	05/16/2023		PSASRETURNSCREDITS@MCKESSON.COM
PAYMENT DUE BY:	05/16/2023		P.O. BOX 4017
PRODUCT HELD UNTIL:	08/14/2023		DANVILLE IL 61834
VENDOR #	12592		
DEA#	A/P #	12592	DEA #:
			RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Regular Piece Processed Value	\$.00	\$568.00	\$568.00
State Rtn Piece Processed Val	\$.00	\$.00	\$.00
Regular Pieces Processed	0	1	1
State Rtn Pieces Processed	0	0	0
Piece Fee per Piece	\$0.75	\$0.75	
Piece Processing Fee	\$0.00	\$0.75	\$0.75
Total Due	\$.00	\$568.75	\$568.75

MCKESSON CORPORATION CONTRACTUALLY FACILITATES ON BEHALF OF TOPCO TO PROCESS AND MAINTAIN ACCOUNTING TRANSACTIONS ASSOCIATED WITH ALL DAMAGED, OUTDATED, AND PARTIAL MERCHANDISE RETURNS OF PHARMACEUTICAL PRODUCTS RESULTING IN THE PROCESSING AND COLLECTION OF PHARMACEUTICAL RETURNS DEBIT MEMOS PRODUCED BY INMAR CLS MEDTURN. MCKESSON CORPORATION RESERVES THE RIGHT TO DEDUCT THE FULL VALUE OF THIS INVOICE FROM CURRENT PURCHASES ON DISCOUNT DRUG'S BEHALF. SUCH DEDUCTION WILL INCLUDE THE DEBIT MEMO NUMBER FOR RECONCILIATION RECERENCE. PAYMENT FOR THIS DEBIT MEMO INVOICE SHOULD BE MADE TO MCKESSON CORPORATION IN THE FORM OF A CREDIT MEMO PAYABLE TO THE "REMIT TO & CREDIT THRU" LISTED ON THIS DEBIT MEMO INVOICE. QUESSTION RELATED TO THE FINANCIAL TRANSACTIONS ASSOCIATED WITH THIS DEBIT MEMO SHOULD BE ADDRESSED VIA MCKESSON SUPPLIER WEB PROTAL OR 972-446-4800. THIS DEBIT MEMO INVOICE IS A REQUEST FOR RETURN AUTHORIZATION AND/OR NOTIFICATION OF THE FINANCIAL VALUE OF THIS DEBIT MEMO CLAIM. IF INMAR CLS MEDTURN DOES NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY THE PRODUCT INVENTORIED ON THIS DEBIT MEMO INVOICE FROM YOUR COMPANY THIS NOTIFICATION ALSO ACTS AS A SOLICITATION FOR DESTRUCTION PERMISSION. PLEASE CONFIRM THE "SHIP TO" IDENTIFIED ABOVE CONTACT THE INMAR CLS MEDTURN CUSTOMER SERVICE CENTER WITH THE RA NUMBER AND SHIPPING/DESTRUCTION INSTRUCTIONS AT CLS INVOICE LINK <https://www.clsinvoicelink.inmar.com> USING THE WEB QACCESS KEY LISTED BELOW, RXRA@INMAR.COM, FAX#817-868-5341 OR BY CALLING 817-868-5300. IF A RETURN AUTHORIZATION IS NOT RECEIVED AT INMAR CLS MEDTURN WITHIN SIXTY (60) DAYS OF THE DEBIT MEMO INVOICE DATE, THIS PRODUCT WILL BE DESTROYED IN ACCORDANCE WITH US FEDERAL REGULATIONS. ADDITIONAL DEBIT MEMO INVOICE COPIES ARE AVAILABLE VIA INMAR CLS MEDTURN'S CLSINVOICELINK USING THE WEB ACCESS KEY BELOW

RETURN BY:	CREDIT THRU:	PROCESSED BY:
DISCOUNT DRUG MART	MCKESSON SHARED SERVICES CENTER	MEDTURN INC, AN INMAR CO.
211 COMMERCE DR.	6555 NORTH STATE HIGHWAY 161	4332 EMPIRE RD.
MEDINA, OH 44256	IRVING, TX 75039	FORT WORTH, TX 76155
		DEA# RR0191902

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.
 These products are not intended for consumers - Do Not Redistribute "FOR DESTRUCTION ONLY"

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICELINK.INMAR.COM](https://www.clsinvoicelink.inmar.com)
 using WEB ACCESS KEY: 44206172-987957082968080

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	DDI052316848	REMIT TO:	DISCOUNT DRUG MART, INC. C/O MCKESSON
INVOICE DATE:	05/16/2023		PSASRETURNSCREDITS@MCKESSON.COM
PAYMENT DUE BY:	05/16/2023		P.O. BOX 4017
PRODUCT HELD UNTIL:	08/14/2023		DANVILLE IL 61834
VENDOR #	12592		
DEA#	A/P # 12592	DEA #:	RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

RX PRODUCT								
NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
71403000330	RHOFADE 1% CREAM	RHAZ	08/31/2022	F	1		568.00	568.00
Sub-Total Rx Regular Piece Processed Value								\$568.00
Total Rx Regular Pieces Processed								1
Sub-Total Rx State Rtn Piece Processed Value								\$.00
Total Rx State Rtn Pieces Processed								
Piece Processing Fee @ \$.75/piece								\$.75
Sub-Total Processing Fees								\$.75
Sub-Total								\$568.75
Total Due								=====
								\$568.75
								=====

MCKESSON CORPORATION CONTRACTUALLY FACILITATES ON BEHALF OF TOPCO TO PROCESS AND MAINTAIN ACCOUNTING TRANSACTIONS ASSOCIATED WITH ALL DAMAGED, OUTDATED, AND PARTIAL MERCHANDISE RETURNS OF PHARMACEUTICAL PRODUCTS RESULTING IN THE PROCESSING AND COLLECTION OF PHARMACEUTICAL RETURNS DEBIT MEMOS PRODUCED BY INMAR CLS MEDTURN. MCKESSON CORPORATION RESERVES THE RIGHT TO DEDUCT THE FULL VALUE OF THIS INVOICE FROM CURRECT PURCHASES ON DISCOUNT DRUG'S BEHALF. SUCH DEDUCTION WILL INCLUDE THE DEBIT MEMO NUMBER FOR RECONCILIATION RECERENCE. PAYMENT FOR THIS DEBIT MEMO INVOICE SHOULD BE MADE TO MCKESSON CORPORATION IN THE FORM OF A CREDIT MEMO PAYABLE TO THE "REMIT TO & CREDIT THRU" LISTED ON THIS DEBIT MEMO INVOICE. QUESSTION RELATED TO THE FINANCIAL TRANSACTIONS ASSOCIATED WITH THIS DEBIT MEMO SHOULD BE ADDRESSED VIA MCKESSON SUPPLIER WEB PROTAL OR 972-446-4800. THIS DEBIT MEMO INVOICE IS A REQUEST FOR RETURN AUTHORIZATION AND/OR NOTIFICATION OF THE FINANCIAL VALUE OF THIS DEBIT MEMO CLAIM. IF INMAR CLS MEDTURN DOES NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY THE PRODUCT INVENTORIED ON THIS DEBIT MEMO INVOICE FROM YOUR COMPANY THIS NOTIFICATION ALSO ACTS AS A SOLICITATION FOR DESTRUCTION PERMISSION. PLEASE CONFIRM THE "SHIP TO" IDENTIFIED ABOVE CONTACT THE INMAR CLS MEDTURN CUSTOMER SERVICE CENTER WITH THE RA NUMBER AND SHIPPING/DESTRUCTION INSTRUCTIONS AT CLS INVOICE LINK <https://www.clsinvoicelink.inmar.com> USING THE WEB QACCESS KEY LISTED BELOW, RXRA@INMAR.COM, FAX#817-868-5341 OR BY CALLING 817-868-5300. IF A RETURN AUTHORIZATION IS NOT RECEIVED AT INMAR CLS MEDTURN WITHIN SIXTY (60) DAYS OF THE DEBIT MEMO INVOICE DATE, THIS PRODUCT WILL BE DESTROYED IN ACCORDANCE WITH US FEDERAL REGULATIONS. ADDITIONAL DEBIT MEMO INVOICE COPIES ARE AVAILABLE VIA INMAR CLS MEDTURN'S CLSINVOICELINK USING THE WEB ACCESS KEY BELOW

RETURN BY:	CREDIT THRU:	PROCESSED BY:
DISCOUNT DRUG MART	MCKESSON SHARED SERVICES CENTER	MEDTURN INC, AN INMAR CO.
211 COMMERCE DR.	6555 NORTH STATE HIGHWAY 161	4332 EMPIRE RD.
MEDINA, OH 44256	IRVING, TX 75039	FORT WORTH, TX 76155
		DEA# RR0191902

IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: DDI052316848

THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

These products are not intended for consumers - Do Not Redistribute "FOR DESTRUCTION ONLY"

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: DDI052316848

RGAs Details

RGAs Information

RGAs: 100570739
Credit Memo Issued
Turnaround Time: 7 days, 10 hours
EPI Health LLC - 1402
Customer Type: Indirect - Credit
RGAs Faxed To: 817-868-5341
Debit Memo #: WMT23080103743
Debit Memo Amount: \$3,086.54
Debit Memo Date: 05/01/2023
Debit Memo Receipt Date: 05/02/2023
Third Party Processor: Inmar RX Solutions Inc
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554728
MCKESSON CORPORATION
 1995 MCKESSON ST SUITE 101
 DBA MCKESSON DRUG COMPANY
 AURORA, IL 60502
 United States Of America
Phone:
Fax:
DEA #:

Indirect Customer
Indirect Customer #: R29743
Wal-Mart
 702 SW 8th St
 Bentonville, AR 72716
 United States Of America
Phone:
Fax:
DEA #: WMT072716

RGAs Creation

Created Date: 05/02/2023 04:19:46
Created By: Kipras Stulgys
Faxed Date & Time: 05/02/2023 07:11:08
Faxed By: Kipras Stulgys
Last Saved Date & Time: 05/30/2023 08:53:24
Last Saved By: Bob Hill

Return Receipt Info
of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued
Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 05/22/2023
Received By: Ashley Cruz Ferret
Receiving Facility: BROOKS 3PL
Total Days in Transit: 21

Return Confirmation Information
Confirmed Date: 05/25/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 16139019

Itemized Return Information
Itemized Date: 05/25/2023
Itemized By: Sherry Back

Credit Memo Information

Credit Assessment Information

Client Approval Information

AR Transaction #: 16151750	Assessed Date: 05/26/2023	Approved Date: 05/30/2023
Credit Memo Number: 72570633	Assessed By: Jerrick Robinson	Approved By: Bob Hill
Credit Memo Date: 05/30/2023		
Turnaround Time: 7 days, 10 hours		

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	RECX	05/31/2023	05/31/2023	2	\$341.72	\$683.44	\$357.10
2	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SCEC	02/28/2023	02/28/2023	1	\$1201.55	\$1,201.55	\$1150.00
3	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SFEK	06/30/2023	06/30/2023	1	\$1201.55	\$1,201.55	\$1201.75

The Debit Total is: \$3,065.95
 The Customer's Extended Total is: \$3,086.54

Received Items												
Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SCEC	02/28/2023	Full	1	\$1150.00	\$1,150.00		
1	2	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SFEK	06/30/2023	Full	1	\$1201.75	\$1,201.75		
1	3	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	RECX	05/31/2023	Full	2	\$357.10	\$714.20		

The Credit Memo Total is: \$3,065.95

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	XI0123189725	REMIT TO:	MCKESSON CORP. DBA MCKESSON DRUG CO.
INVOICE DATE:	02/03/2023		PSASRETURNSCREDITS@MCKESSON.COM
PAYMENT DUE BY:	02/03/2023		3301 POLLOCK DRIVE
PRODUCT HELD UNTIL:	04/04/2023		CONROE TX 77303
VENDOR #	12592	DEA #:	RM0328408
DEA#	A/P #		
	12592		

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Regular Piece Processed Value	\$.00	\$11307.92	\$11307.92
State Rtn Piece Processed Val	\$.00	\$.00	\$.00
Regular Pieces Processed	0	13	13
State Rtn Pieces Processed	0	0	0
Piece Fee per Piece	\$0.86	\$0.86	
Piece Processing Fee	\$0.00	\$11.18	\$11.18
Total Due	\$.00	\$11319.10	\$11319.10

MCKESSON CORP CONTRACTUALLY FACILITATES ON BEHALF OF THEIR RETAIL CLIENTS TO PROCESS AND MAINTAIN ACCOUNTING TRANSACTIONS ASSOCIATED WITH ALL DAMAGED, OUTDATED, AND PARTIAL MERCHANDISE RETURNS OF PHARMACEUTICAL PRODUCTS RESULTING IN THE PROCESSING AND COLLECTION OF PHARMACEUTICAL RETURNS DEBIT MEMOS PRODUCED BY INMAR. MCKESSON CORPORATION RESERVES THE RIGHT TO DEDUCT THE FULL VALUE OF THIS INVOICE FROM CURRENT PURCHASES ON THEIR RETAIL CLIENT'S BEHALF. SUCH DEDUCTION WILL INCLUDE THE DEBIT MEMO NUMBER FOR RECONCILIATION REFERENCE. PAYMENT FOR THIS DEBIT MEMO INVOICE SHOULD BE MADE TO MCKESSON CORPORATION IN THE FORM OF A CREDIT MEMO PAYABLE TO THE 'REMIT TO & CREDIT THRU' LISTED ON THIS DEBIT MEMO INVOICE PAGE. QUESTIONS RELATED TO THE FINANCIAL TRANSACTIONS ASSOCIATED WITH THIS DEBIT MEMO SHOULD BE ADDRESSED VIA MCKESSON SUPPLIER WEB PORTAL OR 972-446-4800.

THIS DEBIT MEMO INVOICE IS A REQUEST FOR RETURN AUTHORIZATION AND/OR NOTIFICATION OF THE FINANCIAL VALUE OF THIS DEBIT MEMO CLAIM. IF INMAR DOES NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY THE PRODUCT INVENTORIED ON THIS DEBIT MEMO INVOICE FROM YOUR COMPANY THIS NOTIFICATION ALSO ACTS AS A SOLICITATION FOR DESTRUCTION PERMISSION. PLEASE CONFIRM THE 'SHIP TO' IDENTIFIED ABOVE. CONTACT THE INMAR CUSTOMER SERVICE CENTER WITH THE RA NUMBER AND SHIPPING/DESTRUCTION INSTRUCTIONS AT CLSINVOICE LINK <https://www.clsinvoice.link.inmar.com>. USING THE WEB ACCESS KEY LISTED BELOW, RXRA@IMAR.COM, FAX# 817-868-5341, OR BY CALLING 817-868-5300. IF A RETURN AUTHORIZATION IS NOT RECEIVED AT INMAR WITHIN SIXTY (60) DAYS OF THE DEBIT MEMO INVOICE DATE, THIS PRODUCT WILL BE DESTROYED IN ACCORDANCE WITH U.S. FEDERAL REGULATIONS.

ADDITIONAL DEBIT MEMO INVOICE COPIES ARE AVAILABLE VIA INMAR'S CLSINVOICE LINK USING THE WEB ACCESS KEY BELOW

Returned By:
 McKesson Independent Pharmacy Accounts

Processed by :
 INMAR RX SOLUTIONS, INC
 3845 Grand Lakes Way
 Grand Prairie, TX 75050
 DEA# RR0191902

These products are not intended for consumers - Do Not Redistribute "FOR DESTRUCTION ONLY"

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICE LINK.INMAR.COM](https://www.clsinvoice.link.inmar.com)
 using WEB ACCESS KEY: 47000174-598085194535468

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	XI0123189725	REMIT TO:	MCKESSON CORP. DBA MCKESSON DRUG CO.
INVOICE DATE:	02/03/2023		PSASRETURNSCREDITS@MCKESSON.COM
PAYMENT DUE BY:	02/03/2023		3301 POLLOCK DRIVE
PRODUCT HELD UNTIL:	04/04/2023		CONROE TX 77303
VENDOR #	12592	DEA #:	RM0328408
DEA#	A/P #		

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

RX PRODUCT

NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
63801010701	BENSAL HP 3% OINTMENT	0586037	08/31/2022	F	8		866.00	6928.00
63801010701	BENSAL HP 3% OINTMENT	0586037	unknown	F	4		866.00	3464.00
71403004902	SITAVIG 50 MG BUCCAL TABLET	1014	01/31/2023	F	1		915.92	915.92
Sub-Total Rx Regular Piece Processed Value								\$11307.92
Total Rx Regular Pieces Processed								13
Sub-Total Rx State Rtn Piece Processed Value								\$.00
Total Rx State Rtn Pieces Processed								
Piece Processing Fee @ \$.86/piece								\$11.18
Sub-Total Processing Fees								\$11.18
Sub-Total								\$11319.10
Total Due								=====
								\$11319.10
								=====

MCKESSON CORP CONTRACTUALLY FACILITATES ON BEHALF OF THEIR RETAIL CLIENTS TO PROCESS AND MAINTAIN ACCOUNTING TRANSACTIONS ASSOCIATED WITH ALL DAMAGED, OUTDATED, AND PARTIAL MERCHANDISE RETURNS OF PHARMACEUTICAL PRODUCTS RESULTING IN THE PROCESSING AND COLLECTION OF PHARMACEUTICAL RETURNS DEBIT MEMOS PRODUCED BY INMAR. MCKESSON CORPORATION RESERVES THE RIGHT TO DEDUCT THE FULL VALUE OF THIS INVOICE FROM CURRENT PURCHASES ON THEIR RETAIL CLIENT'S BEHALF. SUCH DEDUCTION WILL INCLUDE THE DEBIT MEMO NUMBER FOR RECONCILIATION REFERENCE. PAYMENT FOR THIS DEBIT MEMO INVOICE SHOULD BE MADE TO MCKESSON CORPORATION IN THE FORM OF A CREDIT MEMO PAYABLE TO THE 'REMIT TO & CREDIT THRU' LISTED ON THIS DEBIT MEMO INVOICE PAGE. QUESTIONS RELATED TO THE FINANCIAL TRANSACTIONS ASSOCIATED WITH THIS DEBIT MEMO SHOULD BE ADDRESSED VIA MCKESSON SUPPLIER WEB PORTAL OR 972-446-4800.

THIS DEBIT MEMO INVOICE IS A REQUEST FOR RETURN AUTHORIZATION AND/OR NOTIFICATION OF THE FINANCIAL VALUE OF THIS DEBIT MEMO CLAIM. IF INMAR DOES NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY THE PRODUCT INVENTORIED ON THIS DEBIT MEMO INVOICE FROM YOUR COMPANY THIS NOTIFICATION ALSO ACTS AS A SOLICITATION FOR DESTRUCTION PERMISSION. PLEASE CONFIRM THE 'SHIP TO' IDENTIFIED ABOVE. CONTACT THE INMAR CUSTOMER SERVICE CENTER WITH THE RA NUMBER AND SHIPPING/DESTRUCTION INSTRUCTIONS AT CLSINVOICE LINK <https://www.clsinvoicelink.inmar.com>. USING THE WEB ACCESS KEY LISTED BELOW, RXRA@IMAR.COM, FAX# 817-868-5341, OR BY CALLING 817-868-5300. IF A RETURN AUTHORIZATION IS NOT RECEIVED AT INMAR WITHIN SIXTY (60) DAYS OF THE DEBIT MEMO INVOICE DATE, THIS PRODUCT WILL BE DESTROYED IN ACCORDANCE WITH U.S. FEDERAL REGULATIONS.

ADDITIONAL DEBIT MEMO INVOICE COPIES ARE AVAILABLE VIA INMAR'S CLSINVOICELINK USING THE WEB ACCESS KEY BELOW

Returned By:
 McKesson Independent Pharmacy Accounts
 F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: XI0123189725

These products are not intended for consumers - Do Not Redistribute "FOR DESTRUCTION ONLY"

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: XI0123189725

RGAs Details

RGAs Information

RGAs: 100509298
Credit Memo Issued
 Turnaround Time: 364 days, 11 hours
EPI Health LLC - 1402
 Customer Type: Direct
RGAs Faxed To: 817-868-5341
Debit Memo #: X00222194064
Debit Memo Amount: \$6,699.08
Debit Memo Date: 02/28/2022
Debit Memo Receipt Date: 02/25/2022
Third Party Processor: Inmar RX Solutions Inc
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554728
MCKESSON CORPORATION
 1995 MCKESSON ST SUITE 101
 DBA MCKESSON DRUG COMPANY
 AURORA, IL 60502
 United States Of America
Phone:
Fax:
DEA #:

RGAs Creation

Created Date: 02/28/2022 07:32:14
Created By: Deimante Maliskaite
Faxed Date & Time: 02/28/2022 07:55:05
Faxed By: Deimante Maliskaite
Last Saved Date & Time: 03/28/2023 09:37:31
Last Saved By: Barbara Reiter

Return Receipt Info
of Boxes: 2

Batch Information

Batch #1: Credit Memo Issued
Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 03/28/2022
Received By: Joyce Powers
Receiving Facility: BROOKS 3PL
Total Days in Transit: 28

Return Confirmation Information
Confirmed Date: 04/18/2022
Confirmed By: Auto Confirm
Inventory Transaction #: 14047933

Itemized Return Information
Itemized Date: 04/18/2022
Itemized By: Yenny Distouart Breffe

Credit Memo Information

Credit Assessment Information

Client Approval Information

AR Transaction #: 15819242
Credit Memo Number: 72434248
Credit Memo Date: 03/28/2023
AR Transaction #: 14104408
Credit Memo Number: 71708977
Credit Memo Date: 04/28/2022
Turnaround Time: 30 days, 11 hours

Assessed Date: 04/21/2022
Assessed By: Angela Robinson

Approved Date: 04/28/2022
Approved By: Susan DeTorre

Batch #2: Credit Memo Issued

Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 03/23/2023
Received By: Annia Morales
Receiving Facility: BROOKS 3PL
Total Days in Transit: 388

Return Confirmation Information
Confirmed Date: 03/23/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 15798994

Itemized Return Information
Itemized Date: 03/23/2023
Itemized By: Annia Morales

Credit Memo Information
AR Transaction #: 15819242
Credit Memo Number: 72434248
Credit Memo Date: 03/28/2023
AR Transaction #: 14104408
Credit Memo Number: 71708977
Credit Memo Date: 04/28/2022
Turnaround Time: 4 days, 11 hours

Credit Assessment Information
Assessed Date: 03/28/2023
Assessed By: Barbara Reiter

Client Approval Information
Approved Date:
Approved By:

Debit Memo Items

Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0003-30	1402 0003-30 R	Rhofade 1% Cream 30g	REBG	05/31/2022	05/31/2022	8	\$543.54	\$4,348.32	\$478.52
2	1402 03-0003-30	1402 03-0003-30 R	Rhofade 1% Cream 30g	RECW	05/31/2022	05/31/2022	3	\$543.54	\$1,630.62	\$543.54

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ReturnConnect - RGA Details

3	7140310130	1402 0101-30 R	Minolira 105MG Tabs 30Ct Each	T900741	05/15/2022	05/15/2022	1	\$709.82	\$709.82	\$650.00
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The Debit Total is: \$6,108.78
 The Customer's Extended Total is: \$6,688.76

Received Items

Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	7140310130	1402 0101-30 R	Minolira 105MG Tabs 30Ct Each	T900741	05/15/2022	Full	1	\$709.82	\$709.82		
1	2	1402 0003-30	1402 0003-30 R	Rhofade 1% Cream 30g	REBG	05/31/2022	Full	7	\$543.54	\$3,804.78		
1	3	1402 03-0003-30	1402 03-0003-30 R	Rhofade 1% Cream 30g	RECW	05/31/2022	Full	3	\$543.54	\$1,630.62		
2	1	1402 0003-30	1402 0003-30 R	Rhofade 1% Cream 30g	REBG	05/31/2022	Full	1	\$478.52	\$478.52		

The Credit Memo Total is: \$6,623.74

RGAs Details

RGAs Information

RGAs: 100563328
Credit Memo Issued
 Turnaround Time: 6 days, 11 hours
EPI Health LLC - 1402
Customer Type: Direct
RGAs Faxed To: 817-868-5341
Debit Memo #: XI0223191088
Debit Memo Amount: \$4,732.62
Debit Memo Date: 03/06/2023
Debit Memo Receipt Date: 03/08/2023
Third Party Processor: Inmar RX Solutions Inc
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554725
MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 United States Of America
Phone:
Fax:
DEA #:

RGAs Creation

Created Date: 03/09/2023 04:07:49
Created By: Lasha Kalandarishvili
Faxed Date & Time: 03/09/2023 07:15:37
Faxed By: Lasha Kalandarishvili
Last Saved Date & Time: 03/30/2023 09:08:09
Last Saved By: Bob Hill

Return Receipt Info

of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued

Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 03/23/2023
Received By: Francisca Santellan
Receiving Facility: BROOKS 3PL
Total Days in Transit: 17

Return Confirmation Information
Confirmed Date: 03/23/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 15799302

Itemized Return Information
Itemized Date: 03/23/2023
Itemized By: Francisca Santellan

Credit Memo Information

Credit Assessment Information

Client Approval Information

AR Transaction #: 15832647	Assessed Date: 03/28/2023	Approved Date: 03/30/2023
Credit Memo Number: 72440639	Assessed By: Deunie Faulkner	Approved By: Bob Hill
Credit Memo Date: 03/30/2023		
Turnaround Time: 6 days, 11 hours		

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0586037	08/31/2022	08/31/2022	2	\$866.00	\$1,732.00	\$20.50
2	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0586037	01/01/1900	08/31/2022	1	\$866.00	\$866.00	\$20.50
3	714010230	1402 0102-30 R	Minolira 135MG Tabs 30Ct Each	T001329	04/30/2023	04/30/2023	3	\$709.82	\$2,129.46	\$679.25

The Debit Total is: \$2,099.25
 The Customer's Extended Total is: \$4,727.46

Received Items												
Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	714010230	1402 0102-30 R	Minolira 135MG Tabs 30Ct Each	T001329	04/30/2023	Full	3	\$679.25	\$2,037.75		
1	2	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0586037	08/31/2022	Full	3	\$0.00	\$0.00	NRP	

The Credit Memo Total is: \$2,037.75

PHARMACEUTICAL RETURNS DEBIT INVOICE

	INVOICE #	WMT23070102518	REMIT TO:	WALMART C/O MCKESSON CORPORATION
	INVOICE DATE:	04/17/2023		PSASRETURNSCREDITS@MCKESSON.COM
	PAYMENT DUE BY:	04/17/2023		PO BOX 4017
	PRODUCT HELD UNTIL:	06/16/2023		DANVILLE IL 61834
	VENDOR #	12592		
DEA#	A/P #	12592	DEA #:	RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Regular Piece Processed Value	\$.00	\$1543.22	\$1543.22
State Rtn Piece Processed Val	\$.00	\$.00	\$.00
Regular Pieces Processed	0	2	2
State Rtn Pieces Processed	0	0	0
Piece Fee per Piece	\$0.00	\$0.00	
Piece Processing Fee	\$0.00	\$0.00	\$0.00
Total Due	\$.00	\$1543.22	\$1543.22

THIS DOCUMENT IS A RETURN AUTHORIZATION REQUEST. IF PRODUCT DISPOSITION INSTRUCTION ARE NOT RECEIVED WITHIN 30 DAYS OF THE INVOICE DATE THE PRODUCT (S) WILL BE DISPOSED OF IN ACCORDANCE WITH STATE AND FEDERAL REGULATIONS, BUT CREDIT WILL STILL BE DUE AND A DEDUCTION MAY BE TAKEN. IF YOU HAVE ANY QUESTIONS CONTACT OUR CUSTOMER SERVICE CENTER
 1-800-967-5952

PLEASE EMAIL RETURN AUTHORIZATION TO: RXRA@INMAR.COM
 OR MAIL TO: INMAR RX SOLUTIONS 4332 EMPIRE RD. FORT WORTH, TX 76155
 PLEASE REFERENCE THE INDICATED DEBIT MEMO NUMBER WHEN REMITTING PAYMENT OR CREDIT
 IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

RETURN BY:
 WAL-MART
 702 SW 8TH STREET
 BENTONVILLE, AR 72716

ID# WMT072716

Processed by :
 INMAR RX SOLUTIONS, INC
 3845 Grand Lakes Way
 Grand Prairie, TX 75050
 DEA# RR0191902

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICELINK.INMAR.COM](https://www.clsinvoiceLink.inmar.com)
 using WEB ACCESS KEY: 10103135-530894455950059

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	WMT23070102518	REMIT TO:	WALMART C/O MCKESSON CORPORATION
INVOICE DATE:	04/17/2023		PSASRETURNSCREDITS@MCKESSON.COM
PAYMENT DUE BY:	04/17/2023		PO BOX 4017
PRODUCT HELD UNTIL:	06/16/2023		DANVILLE IL 61834
VENDOR #	12592		
DEA#	A/P #	12592	DEA #:
			RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

RX PRODUCT									
NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST	
71403080445	CLODERM 0.1% CREAM	RECX	05/31/2023	F	1		341.72	341.72	
73499000101	WYNZORA 0.005%-0.064% CREAM	SEDK	04/30/2023	F	1		1201.50	1201.50	
Sub-Total Rx Regular Piece Processed Value								\$1543.22	
Total Rx Regular Pieces Processed								2	
Sub-Total Rx State Rtn Piece Processed Value								\$.00	
Total Rx State Rtn Pieces Processed									
Piece Processing Fee @ \$.00/piece								\$.00	
Sub-Total Processing Fees								\$.00	
Sub-Total								\$1543.22	
Total Due								\$1543.22	=====

THIS DOCUMENT IS A RETURN AUTHORIZATION REQUEST. IF PRODUCT DISPOSITION INSTRUCTION ARE NOT RECEIVED WITHIN 30 DAYS OF THE INVOICE DATE THE PRODUCT (S) WILL BE DISPOSED OF IN ACCORDANCE WITH STATE AND FEDERAL REGULATIONS, BUT CREDIT WILL STILL BE DUE AND A DEDUCTION MAY BE TAKEN. IF YOU HAVE ANY QUESTIONS CONTACT OUR CUSTOMER SERVICE CENTER 1-800-967-5952

PLEASE EMAIL RETURN AUTHORIZATION TO: RXRA@INMAR.COM
 OR MAIL TO: INMAR RX SOLUTIONS 4332 EMPIRE RD. FORT WORTH, TX 76155
 PLEASE REFERENCE THE INDICATED DEBIT MEMO NUMBER WHEN REMITTING PAYMENT OR CREDIT
 IF RETURN AUTHORIZATION HAS NOT BEEN RECEIVE WITHIN 5 MONTHS OF INVOICE, ALL ITEMS ASSOCIATED WITH THIS INVOICE ARE SUBJECT TO DESTRUCTION IN ACCORDANCE WITH EPA SUBPART P.

RETURN BY:
 WAL-MART
 702 SW 8TH STREET
 BENTONVILLE, AR 72716
 ID# WMT072716

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: WMT23070102518

RGAs Details

RGAs Information

RGAs: 100572983
Credit Memo Issued
Turnaround Time: 3 days, 10 hours
EPI Health LLC - 1402
Customer Type: Indirect - Credit
RGAs Faxed To: 817-868-5341
Debit Memo #: DDI052316848
Debit Memo Amount: \$568.75
Debit Memo Date: 05/16/2023
Debit Memo Receipt Date: 05/16/2023
Third Party Processor: Inmar RX Solutions Inc
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554728
MCKESSON CORPORATION
 1995 MCKESSON ST SUITE 101
 DBA MCKESSON DRUG COMPANY
 AURORA, IL 60502
 United States Of America
Phone:
Fax:
DEA #:

Indirect Customer
Indirect Customer #: R29729
DISCOUNT DRUG MART
 211 COMMERCE DR.
 MEDINA, OH 44256
 United States Of America
Phone:
Fax:
DEA #: RR0191902

RGAs Creation

Created Date: 05/17/2023 05:22:41
Created By: Lasha Kalandarishvili
Faxed Date & Time: 05/17/2023 07:18:41
Faxed By: Lasha Kalandarishvili
Last Saved Date & Time: 06/16/2023 07:55:43
Last Saved By: Bob Hill

Return Receipt Info
of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued
Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 06/12/2023
Received By: Ellen Files
Receiving Facility: BROOKS 3PL
Total Days in Transit: 27

Return Confirmation Information
Confirmed Date: 06/13/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 16230251

Itemized Return Information
Itemized Date: 06/13/2023
Itemized By: Annia Morales

Credit Memo Information

Credit Assessment Information

Client Approval Information

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ReturnConnect - RGA Details

AR Transaction #: 16247878
Credit Memo Number: 72609239
Credit Memo Date: 06/16/2023
Turnaround Time: 3 days, 10 hours

Assessed Date: 06/14/2023
Assessed By: John Caldwell

Approved Date: 06/16/2023
Approved By: Bob Hill

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 03-0003-30	1402 03-0003-30 R	Rhofade 1% Cream 30g	RHAZ	08/31/2022	08/31/2022	1	\$568.00	\$568.00	\$543.54

The Debit Total is: \$543.54
 The Customer's Extended Total is: \$568.00

Received Items

Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	1402 03-0003-30	1402 03-0003-30 R	Rhofade 1% Cream 30g	RHAZ	08/31/2022	Full	1	\$543.54	\$543.54		

The Credit Memo Total is: \$543.54

RGAs Details

RGAs Information

RGAs: 100569349
Credit Memo Issued
Turnaround Time: 2 days, 16 hours
EPI Health LLC - 1402
Customer Type: Indirect - Credit
RGAs Faxed To: 817-868-5341
Debit Memo #: WMT23070102518
Debit Memo Amount: \$1,543.22
Debit Memo Date: 04/17/2023
Debit Memo Receipt Date: 04/17/2023
Third Party Processor: Inmar RX Solutions Inc
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554728
MCKESSON CORPORATION
 1995 MCKESSON ST SUITE 101
 DBA MCKESSON DRUG COMPANY
 AURORA, IL 60502
 United States Of America
Phone:
Fax:
DEA #:

Indirect Customer
Indirect Customer #: R29743
Wal-Mart
 702 SW 8th St
 Bentonville, AR 72716
 United States Of America
Phone:
Fax:
DEA #: WMT072716

RGAs Creation

Created Date: 04/21/2023 04:43:12
Created By: Deimante Maliskaite
Faxed Date & Time: 04/21/2023 07:16:30
Faxed By: Deimante Maliskaite
Last Saved Date & Time: 05/12/2023 08:52:20
Last Saved By: Bob Hill

Return Receipt Info
of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued
Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 05/09/2023
Received By: Irina De La Cruz
Receiving Facility: BROOKS 3PL
Total Days in Transit: 22

Return Confirmation Information
Confirmed Date: 05/09/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 16043239

Itemized Return Information
Itemized Date: 05/09/2023
Itemized By: Irina De La Cruz

Credit Memo Information

Credit Assessment Information

Client Approval Information

AR Transaction #: 16063702
Credit Memo Number: 72532679
Credit Memo Date: 05/12/2023
Turnaround Time: 2 days, 16 hours

Assessed Date: 05/09/2023
Assessed By: Jerrick Robinson

Approved Date: 05/12/2023
Approved By: Bob Hill

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0804-45	1402 0804-45 R	Cloderm Cream 45gm Tube	RECX	05/31/2023	05/30/2023	1	\$341.72	\$341.72	\$317.80
2	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SEDK	04/30/2023	04/30/2023	1	\$1201.50	\$1,201.50	\$1150.00

The Debit Total is: \$1,467.80
 The Customer's Extended Total is: \$1,543.22

Received Items												
Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	73499000101	1402 0001-01 R	Wynzora Cream 0.005%/0.064% EA	SEDK	04/30/2023	Full	1	\$1150.00	\$1,150.00		
1	2	1402 03-0804-45	1402 03-0804-45 R	Cloderm Cream 45gm Tube CTN	RECX	05/31/2023	Full	1	\$357.10	\$357.10		

The Credit Memo Total is: \$1,507.10

**Return Goods Invoice**

Invoice Date: 02/28/2023
 Payment Due By: 05/29/2023
 Product held Until: 04/29/2023

Manufacturer: EPI Health, LLC
 Debit Memo: XP3976102182
 Class Of Trade: Wholesaler

Remit Payment To:

McKesson DC
 PO Box 4017
 Danville, IL 61837
 Phone: (972)446-6497
 Contact: PSASReturnsCredits@McKesson.com

Ship To:

EPI Health, LLC
 c/o EPI 420 International Blvd. Ste 500
 Brooks, KY 40109
 DEA#: RI0248686
 State License: W02424

Processed For:

McKesson
 1515 Kendrick Lane
 Lakeland, FL 33805
 DEA ID: PM0000771

NDC	Description	Ctrl	Strength	Lot #	Exp Date	Pkg Size	Units in Full PKG	Partial Qty	Price	Est Value
Non-Controls										
Total NDC Count: 2										\$746.34
71403080445	CLODERM	0	0.1% - CRE	RECX	05/31/2023	45	1	2	\$439.02	\$746.34
Total NDC Count: 2										\$746.34
Processing Fee Total: \$0.00										

THIS IS YOUR NOTIFICATION TO SEND RETURN AUTHORIZATION. MCKESSON WILL DEDUCT AMOUNTS WHEN CREDIT MEMO IS NOT PROVIDED TIMELY.

IF PHARMALINK DOES NOT HAVE AN AUTOMATIC AUTHORIZATION TO RETURN OR DESTROY PRODUCT ON YOUR BEHALF, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN OR DESTRUCTION AUTHORIZATION. PLEASE CONTACT CUSTOMER SERVICE AT MCKESSON'S RETURN PROCESSING COMPANY (PHARMALINK) WITH THE RETURN AUTHORIZATION NUMBER AT 800-257-3527, FAX TO 727-342-6133 Or Email Authorizations@pharmalinkinc.com. PLEASE DO NOT SEND RETURN OR DESTRUCTION AUTHORIZATION DIRECTLY TO MCKESSON AS THIS WILL DELAY PRODUCT BEING SENT BACK TO YOUR COMPANY. PLEASE DIRECT ALL CREDIT MEMO INFORMATION TO THE ADDRESS IN THE REMIT TO ABOVE. IF A CREDIT MEMO IS NOT RECEIVED WITHIN 30 DAYS FROM THE INVOICE DATE, MCKESSON WILL DEDUCT THE TOTAL INVOICE AMOUNT INCLUDING PROCESSING FEES AS STATED ABOVE FROM THEIR NEXT PAYMENT TO YOUR COMPANY. IF NO REPLY IS RECEIVED BY PHARMALINK WITHIN 60 DAYS OF THE INVOICE DATE, WE WILL DESTROY ALL PRODUCT CONTAINED ON THIS INVOICE IN ACCORDANCE WITH FEDERAL REGULATIONS. ONCE THE PRODUCT IS DESTROYED, THE DEDUCTION WILL STAND AND THE INVOICE WILL BE CONSIDERED CLOSED. PLEASE DO NOT SHIP PRODUCT TO THIS LOCATION LISTED BELOW. PLEASE CONTACT PHARMALINK CUSTOMER SERVICE DIRECTLY FOR PRODUCT RECEIVED IN ERROR.

Returned By:
 McKesson Shared Services Center
 6555 North State Highway 161
 Irving, TX 75039 DEA # RM0328408
 These products are not intended for consumers – Do Not Redistribute "FOR DESTRUCTION ONLY"

RGAs Details

RGAs Information

RGAs: 100563466
Cancelled
EPI Health LLC - 1402
Customer Type: Direct
RGAs Faxed To: 888-899-0062
Debit Memo #: XP3976102182
Debit Memo Amount: \$746.34
Debit Memo Date: 02/28/2023
Debit Memo Receipt Date: 03/06/2023
Third Party Processor: PharmaLink Inc
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554692
MCKESSON DRUG COMPANY
 1515 KENDRICK LANE
 MCKESSON CORPORATION
 LAKELAND, FL 33805
 United States Of America
Phone:
Fax:
DEA #:

RGAs Creation

Created Date: 03/09/2023 05:23:15
Created By: Barbara Reiter
Faxed Date & Time: 03/09/2023 05:35:08
Faxed By: Barbara Reiter
Last Saved Date & Time: 04/23/2023 12:19:48
Last Saved By:

Return Receipt Info

of Boxes: 0

Batch Information

Debit Memo Items

Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0804-45	1402 0804-45 R	Cloderm Cream 45gm Tube	RECX	05/31/2023	05/30/2023	2	\$439.02	\$878.04	\$317.80

The Debit Total is: \$635.60
 The Customer's Extended Total is: \$878.04

12/6/23, 1:40 PM

ReturnConnect - RGA Details

<https://returnconnect.icsconnect.com/ReturnConnect/RGADetailsFriendly.aspx?RGAID=100563466>

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	XI1222188388	REMIT TO:	MCKESSON CORP. DBA MCKESSON DRUG CO.
INVOICE DATE:	01/10/2023		PSASRETURNSCREDITS@MCKESSON.COM
PAYMENT DUE BY:	01/10/2023		3301 POLLOCK DRIVE
PRODUCT HELD UNTIL:	03/11/2023		CONROE TX 77303
VENDOR #	12592		
DEA#	A/P #	12592	DEA #:
			RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Regular Piece Processed Value	\$.00	\$14722.00	\$14722.00
State Rtn Piece Processed Val	\$.00	\$.00	\$.00
Regular Pieces Processed	0	17	17
State Rtn Pieces Processed	0	0	0
Piece Fee per Piece	\$0.86	\$0.86	
Piece Processing Fee	\$0.00	\$14.62	\$14.62
Total Due	\$.00	\$14736.62	\$14736.62

MCKESSON CORP CONTRACTUALLY FACILITATES ON BEHALF OF THEIR RETAIL CLIENTS TO PROCESS AND MAINTAIN ACCOUNTING TRANSACTIONS ASSOCIATED WITH ALL DAMAGED, OUTDATED, AND PARTIAL MERCHANDISE RETURNS OF PHARMACEUTICAL PRODUCTS RESULTING IN THE PROCESSING AND COLLECTION OF PHARMACEUTICAL RETURNS DEBIT MEMOS PRODUCED BY INMAR. MCKESSON CORPORATION RESERVES THE RIGHT TO DEDUCT THE FULL VALUE OF THIS INVOICE FROM CURRENT PURCHASES ON THEIR RETAIL CLIENT'S BEHALF. SUCH DEDUCTION WILL INCLUDE THE DEBIT MEMO NUMBER FOR RECONCILIATION REFERENCE. PAYMENT FOR THIS DEBIT MEMO INVOICE SHOULD BE MADE TO MCKESSON CORPORATION IN THE FORM OF A CREDIT MEMO PAYABLE TO THE 'REMIT TO & CREDIT THRU' LISTED ON THIS DEBIT MEMO INVOICE PAGE. QUESTIONS RELATED TO THE FINANCIAL TRANSACTIONS ASSOCIATED WITH THIS DEBIT MEMO SHOULD BE ADDRESSED VIA MCKESSON SUPPLIER WEB PORTAL OR 972-446-4800.

THIS DEBIT MEMO INVOICE IS A REQUEST FOR RETURN AUTHORIZATION AND/OR NOTIFICATION OF THE FINANCIAL VALUE OF THIS DEBIT MEMO CLAIM. IF INMAR DOES NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY THE PRODUCT INVENTORIED ON THIS DEBIT MEMO INVOICE FROM YOUR COMPANY THIS NOTIFICATION ALSO ACTS AS A SOLICITATION FOR DESTRUCTION PERMISSION. PLEASE CONFIRM THE 'SHIP TO' IDENTIFIED ABOVE. CONTACT THE INMAR CUSTOMER SERVICE CENTER WITH THE RA NUMBER AND SHIPPING/DESTRUCTION INSTRUCTIONS AT CLSINVOICE LINK <https://www.clsinvoice.link.inmar.com>. USING THE WEB ACCESS KEY LISTED BELOW, RXRA@IMAR.COM, FAX# 817-868-5341, OR BY CALLING 817-868-5300. IF A RETURN AUTHORIZATION IS NOT RECEIVED AT INMAR WITHIN SIXTY (60) DAYS OF THE DEBIT MEMO INVOICE DATE, THIS PRODUCT WILL BE DESTROYED IN ACCORDANCE WITH U.S. FEDERAL REGULATIONS.

ADDITIONAL DEBIT MEMO INVOICE COPIES ARE AVAILABLE VIA INMAR'S CLSINVOICE LINK USING THE WEB ACCESS KEY BELOW

Returned By:
 McKesson Independent Pharmacy Accounts

Processed by :
 INMAR RX SOLUTIONS, INC
 3845 Grand Lakes Way
 Grand Prairie, TX 75050
 DEA# RR0191902

These products are not intended for consumers - Do Not Redistribute "FOR DESTRUCTION ONLY"

Invoice can be reviewed at [HTTPS://WWW.CLSINVOICE LINK.INMAR.COM](https://www.clsinvoice.link.inmar.com)
 using WEB ACCESS KEY: 47000174-598085194535468

PHARMACEUTICAL RETURNS DEBIT INVOICE

	INVOICE #	XI1222188388	REMIT TO:	MCKESSON CORP. DBA MCKESSON DRUG CO.
	INVOICE DATE:	01/10/2023		PSASRETURNSCREDITS@MCKESSON.COM
	PAYMENT DUE BY:	01/10/2023		3301 POLLOCK DRIVE
	PRODUCT HELD UNTIL:	03/11/2023		CONROE TX 77303
	VENDOR #	12592		
DEA#	A/P #	12592	DEA #:	RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

RX PRODUCT								
NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
63801010701	BENSAL HP 3% OINTMENT	0386026	06/30/2022	F	1		866.00	866.00
63801010701	BENSAL HP 3% OINTMENT	0386028	06/30/2022	F	3		866.00	2598.00
63801010701	BENSAL HP 3% OINTMENT	0586037	08/31/2022	F	7		866.00	6062.00
63801010701	BENSAL HP 3% OINTMENT	0586037	unknown	F	6		866.00	5196.00
Sub-Total Rx Regular Piece Processed Value								\$14722.00
Total Rx Regular Pieces Processed								17
Sub-Total Rx State Rtn Piece Processed Value								\$.00
Total Rx State Rtn Pieces Processed								
Piece Processing Fee @ \$.86/piece								\$14.62
Sub-Total Processing Fees								\$14.62
Sub-Total								\$14736.62
Total Due								=====
								\$14736.62
								=====

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: XI1222188388

MCKESSON CORP CONTRACTUALLY FACILITATES ON BEHALF OF THEIR RETAIL CLIENTS TO PROCESS AND MAINTAIN ACCOUNTING TRANSACTIONS ASSOCIATED WITH ALL DAMAGED, OUTDATED, AND PARTIAL MERCHANDISE RETURNS OF PHARMACEUTICAL PRODUCTS RESULTING IN THE PROCESSING AND COLLECTION OF PHARMACEUTICAL RETURNS DEBIT MEMOS PRODUCED BY INMAR. MCKESSON CORPORATION RESERVES THE RIGHT TO DEDUCT THE FULL VALUE OF THIS INVOICE FROM CURRENT PURCHASES ON THEIR RETAIL CLIENT'S BEHALF. SUCH DEDUCTION WILL INCLUDE THE DEBIT MEMO NUMBER FOR RECONCILIATION REFERENCE. PAYMENT FOR THIS DEBIT MEMO INVOICE SHOULD BE MADE TO MCKESSON CORPORATION IN THE FORM OF A CREDIT MEMO PAYABLE TO THE 'REMIT TO & CREDIT THRU' LISTED ON THIS DEBIT MEMO INVOICE PAGE. QUESTIONS RELATED TO THE FINANCIAL TRANSACTIONS ASSOCIATED WITH THIS DEBIT MEMO SHOULD BE ADDRESSED VIA MCKESSON SUPPLIER WEB PORTAL OR 972-446-4800.

THIS DEBIT MEMO INVOICE IS A REQUEST FOR RETURN AUTHORIZATION AND/OR NOTIFICATION OF THE FINANCIAL VALUE OF THIS DEBIT MEMO CLAIM. IF INMAR DOES NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY THE PRODUCT INVENTORIED ON THIS DEBIT MEMO INVOICE FROM YOUR COMPANY THIS NOTIFICATION ALSO ACTS AS A SOLICITATION FOR DESTRUCTION PERMISSION. PLEASE CONFIRM THE 'SHIP TO' IDENTIFIED ABOVE. CONTACT THE INMAR CUSTOMER SERVICE CENTER WITH THE RA NUMBER AND SHIPPING/DESTRUCTION INSTRUCTIONS AT CLSINVOICE LINK <https://www.clsinvoicelink.inmar.com>. USING THE WEB ACCESS KEY LISTED BELOW, RXRA@IMAR.COM, FAX# 817-868-5341, OR BY CALLING 817-868-5300. IF A RETURN AUTHORIZATION IS NOT RECEIVED AT INMAR WITHIN SIXTY (60) DAYS OF THE DEBIT MEMO INVOICE DATE, THIS PRODUCT WILL BE DESTROYED IN ACCORDANCE WITH U.S. FEDERAL REGULATIONS.

ADDITIONAL DEBIT MEMO INVOICE COPIES ARE AVAILABLE VIA INMAR'S CLSINVOICELINK USING THE WEB ACCESS KEY BELOW

Returned By:
McKesson Independent Pharmacy Accounts

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F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: XI1222188388

RGAs Details

RGAs Information

RGAs: 100509298
Credit Memo Issued
Turnaround Time: 364 days, 11 hours
EPI Health LLC - 1402
Customer Type: Direct
RGAs Faxed To: 817-868-5341
Debit Memo #: X00222194064
Debit Memo Amount: \$6,699.08
Debit Memo Date: 02/28/2022
Debit Memo Receipt Date: 02/25/2022
Third Party Processor: Inmar RX Solutions Inc
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554728
MCKESSON CORPORATION
 1995 MCKESSON ST SUITE 101
 DBA MCKESSON DRUG COMPANY
 AURORA, IL 60502
 United States Of America
Phone:
Fax:
DEA #:

RGAs Creation

Created Date: 02/28/2022 07:32:14
Created By: Deimante Maliskaite
Faxed Date & Time: 02/28/2022 07:55:05
Faxed By: Deimante Maliskaite
Last Saved Date & Time: 03/28/2023 09:37:31
Last Saved By: Barbara Reiter

Return Receipt Info
of Boxes: 2

Batch Information

Batch #1: Credit Memo Issued
Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 03/28/2022
Received By: Joyce Powers
Receiving Facility: BROOKS 3PL
Total Days in Transit: 28

Return Confirmation Information
Confirmed Date: 04/18/2022
Confirmed By: Auto Confirm
Inventory Transaction #: 14047933

Itemized Return Information
Itemized Date: 04/18/2022
Itemized By: Yenny Distouart Breffe

Credit Memo Information

Credit Assessment Information

Client Approval Information

12/6/23, 1:39 PM

ReturnConnect - RGA Details

AR Transaction #: 15819242
Credit Memo Number: 72434248
Credit Memo Date: 03/28/2023
AR Transaction #: 14104408
Credit Memo Number: 71708977
Credit Memo Date: 04/28/2022
Turnaround Time: 30 days, 11 hours

Assessed Date: 04/21/2022
Assessed By: Angela Robinson

Approved Date: 04/28/2022
Approved By: Susan DeTorre

Batch #2: Credit Memo Issued

Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 03/23/2023
Received By: Annia Morales
Receiving Facility: BROOKS 3PL
Total Days in Transit: 388

Return Confirmation Information
Confirmed Date: 03/23/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 15798994

Itemized Return Information
Itemized Date: 03/23/2023
Itemized By: Annia Morales

Credit Memo Information
AR Transaction #: 15819242
Credit Memo Number: 72434248
Credit Memo Date: 03/28/2023
AR Transaction #: 14104408
Credit Memo Number: 71708977
Credit Memo Date: 04/28/2022
Turnaround Time: 4 days, 11 hours

Credit Assessment Information
Assessed Date: 03/28/2023
Assessed By: Barbara Reiter

Client Approval Information
Approved Date:
Approved By:

Debit Memo Items

Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0003-30	1402 0003-30 R	Rhofade 1% Cream 30g	REBG	05/31/2022	05/31/2022	8	\$543.54	\$4,348.32	\$478.52
2	1402 03-0003-30	1402 03-0003-30 R	Rhofade 1% Cream 30g	RECW	05/31/2022	05/31/2022	3	\$543.54	\$1,630.62	\$543.54

12/6/23, 1:39 PM

ReturnConnect - RGA Details

3	7140310130	1402 0101-30 R	Minolira 105MG Tabs 30Ct Each	T900741	05/15/2022	05/15/2022	1	\$709.82	\$709.82	\$650.00
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The Debit Total is: \$6,108.78
 The Customer's Extended Total is: \$6,688.76

Received Items

Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	7140310130	1402 0101-30 R	Minolira 105MG Tabs 30Ct Each	T900741	05/15/2022	Full	1	\$709.82	\$709.82		
1	2	1402 0003-30	1402 0003-30 R	Rhofade 1% Cream 30g	REBG	05/31/2022	Full	7	\$543.54	\$3,804.78		
1	3	1402 03-0003-30	1402 03-0003-30 R	Rhofade 1% Cream 30g	RECW	05/31/2022	Full	3	\$543.54	\$1,630.62		
2	1	1402 0003-30	1402 0003-30 R	Rhofade 1% Cream 30g	REBG	05/31/2022	Full	1	\$478.52	\$478.52		

The Credit Memo Total is: \$6,623.74

PHARMACEUTICAL RETURNS DEBIT INVOICE

	INVOICE #	X00222194064	REMIT TO: MCKESSON
	INVOICE DATE:	02/28/2022	IMAGINGOPERATIONS@MCKESSON.COM
	PAYMENT DUE BY:	02/28/2022	PO BOX 4017
	PRODUCT HELD UNTIL:	05/29/2022	DANVILLE IL 61834-4017
	VENDOR #	12592	
DEA#	A/P #	12592	

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: INTEGRATED COMMERCIALIZATION SOLUTIONS
 420 INTERNATIONAL BLVD STE 500
 BROOKS KY 40109

DEA: RI0248686

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Piece Processed Value	\$0.00	\$6688.76	\$6688.76
Pieces Processed	0	12	12
Piece Fee per Piece	\$0.86	\$0.86	
Piece Processing Fee	\$0.00	\$10.32	\$10.32
Case Processed Value	\$0.00	\$0.00	\$0.00
Case Pieces Processed	0	0	0
Case Fee per Piece	\$0.86	\$0.86	
Case Processing Fee	\$0.00	\$0.00	\$0.00
Total Due	\$0.00	\$6699.08	\$6699.08

THIS IS YOUR NOTIFICATION TO SEND RETURN AUTHORIZATION. MCKESSON WILL DEDUCT AMOUNTS WHEN CREDIT MEMO IS NOT PROVIDED TIMELY.

IF INMAR DOES NOT HAVE AN AUTOMATIC AUTHORIZATION TO RETURN OR DESTROY PRODUCT ON YOUR BEHALF, PLEASE CONSIDER THIS INVOICE AS A SOLICITATION FOR RETURN OR DESTRUCTION AUTHORIZATION. PLEASE CONTACT CUSTOMER SERVICE AT MCKESSON'S RETURN PROCESSING COMPANY (INMAR) WITH THE RETURN AUTHORIZATION NUMBER AT 817-868-5300, FAX TO 817-868-5341 OR EMAIL RXRA@INMAR.COM. PLEASE DO NOT SEND RETURN OR DESTRUCTION AUTHORIZATION DIRECTLY TO MCKESSON AS THIS WILL DELAY PRODUCT BEING SENT BACK TO YOUR COMPANY. PLEASE DIRECT ALL CREDIT MEMO INFORMATION TO THE ADDRESS IN THE REMIT TO ABOVE. IF A CREDIT MEMO IS NOT RECEIVED WITHIN 30 DAYS FROM THE INVOICE DATE, MCKESSON WILL DEDUCT THE TOTAL INVOICE AMOUNT INCLUDING PROCESSING FEES AS STATED ABOVE FROM THEIR NEXT PAYMENT TO YOUR COMPANY. IF NO REPLY IS RECEIVED BY INMAR WITHIN 90 DAYS OF THE INVOICE DATE, WE WILL DESTROY ALL PRODUCT CONTAINED ON THIS INVOICE IN ACCORDANCE WITH FEDERAL REGULATIONS. ONCE THE PRODUCT IS DESTROYED, THE DEDUCTION WILL STAND AND THE INVOICE WILL BE CONSIDERED CLOSED. PLEASE DO NOT SHIP PRODUCT TO THIS LOCATION LISTED BELOW. PLEASE CONTACT INMAR CUSTOMER SERVICE DIRECTLY FOR PRODUCT RECEIVED IN ERROR.

Returned By:
 McKesson Shared Services Center
 6555 North State Highway 161
 Irving, TX 75039 DEA # RM0328408

Processed by :
 INMAR RX SOLUTIONS, INC
 3845 Grand Lakes Way
 Grand Prairie, TX 75050
 DEA# RR0191902

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Invoice can be reviewed at [HTTPS://WWW.CLSINVOICEBLINK.INMAR.COM](https://www.clsinvoiceblink.inmar.com)
 using WEB ACCESS KEY: 47000128-254954193207457

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	X00222194064	REMIT TO:	MCKESSON
INVOICE DATE:	02/28/2022		IMAGINGOPERATIONS@MCKESSON.COM
PAYMENT DUE BY:	02/28/2022		PO BOX 4017
PRODUCT HELD UNTIL:	05/29/2022		DANVILLE IL 61834-4017
VENDOR #	12592		
DEA#	A/P #		12592

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: INTEGRATED COMMERCIALIZATION SOLUTIONS
 420 INTERNATIONAL BLVD STE 500
 BROOKS KY 40109

DEA: RI0248686

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

UNSALEABLE

RX PRODUCT

NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
71403000330	RHOFADE 1% CREAM	REBG	05/31/2022	F	8		543.54	4348.32
71403000330	RHOFADE 1% CREAM	RECW	05/31/2022	F	3		543.54	1630.62
71403010130	MINOLIRA ER 105 MG TABLET	T900741	05/15/2022	F	1		709.82	709.82
Sub-Total Rx Piece Processed Value								\$6688.76
Total Rx Pieces Processed								12
Piece Processing Fee @ \$.86/piece								\$10.32
Sub-Total Processing Fees								\$10.32
Sub-Total Rx Case Processed Value								\$.00
Total Rx Case Pieces Processed								
Case Processing Fee @ \$.86/piece								\$.00
Sub-Total for Piece & Case pieces								\$6699.08
Total Due (Unsaleable)								\$6699.08
								=====
Total Invoice Due								\$6699.08
								=====

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: X00222194064

THIS IS YOUR NOTIFICATION TO SEND RETURN AUTHORIZATION. MCKESSON WILL DEDUCT AMOUNTS WHEN CREDIT MEMO IS NOT PROVIDED TIMELY.

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Returned By:
McKesson Shared Services Center
6555 North State Highway 161
Irving, TX 75039 DEA # RM0328408

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F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: X00222194064

RGAs Details

RGAs Information

RGAs: 100555007
Credit Memo Issued
Turnaround Time: 72 days, 11 hours
EPI Health LLC - 1402
Customer Type: Direct
RGAs Faxed To: 817-868-5341
Debit Memo #: X11222188388
Debit Memo Amount: \$14,722.00
Debit Memo Date: 01/10/2023
Debit Memo Receipt Date: 01/09/2023
Third Party Processor: Inmar RX Solutions Inc
Third Party RAF: 1402_182
Return Facility: BROOKS 3PL

Direct Customer
Direct Customer #: 7554725
MCKESSON CORPORATION
 3301 POLLOK DRIVE
 DBA MCKESSON DRUG CO
 CONROE, TX 77303
 United States Of America
Phone:
Fax:
DEA #:

RGAs Creation

Created Date: 01/10/2023 09:40:54
Created By: Import180 Automated
Faxed Date & Time: 01/10/2023 11:25:13
Faxed By: Jerrick Robinson
Last Saved Date & Time: 04/10/2023 08:16:37
Last Saved By: Bob Hill

Return Receipt Info

of Boxes: 1

Batch Information

Batch #1: Credit Memo Issued
Return Receipt Information
Tracking Numbers
of Boxes: 1
Received Date: 01/27/2023
Received By: Francisca Santellan
Receiving Facility: BROOKS 3PL
Total Days in Transit: 17

Return Confirmation Information

Confirmed Date: 01/27/2023
Confirmed By: Auto Confirm
Inventory Transaction #: 15501719

Itemized Return Information

Itemized Date: 01/27/2023
Itemized By: Annia Morales

Credit Memo Information
AR Transaction #: 15883616
Credit Memo Number: 72460796
Credit Memo Date: 04/10/2023
Turnaround Time: 72 days, 11 hours

Credit Assessment Information
Assessed Date: 02/02/2023
Assessed By: Angela Robinson

Client Approval Information
Approved Date: 04/10/2023
Approved By: Bob Hill

Debit Memo Items										
Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Customer's Exp. Date	Exp. Date	Qty	Customer's Unit Cost	Customer's Extended Amount	Unit Cost
1	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0386026	06/30/2022	06/30/2022	1	\$866.00	\$866.00	\$330.00
2	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0386028	06/30/2022	06/30/2022	3	\$866.00	\$2,598.00	\$866.00
3	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0586037	08/31/2022	08/31/2022	7	\$866.00	\$6,062.00	\$20.50
4	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	UNKNOWN	01/01/1900	01/01/1900	6	\$866.00	\$5,196.00	\$0.00

The Debit Total is: \$3,071.50
 The Customer's Extended Total is: \$14,722.00

Received Items												
Batch #	Item	NDC / Global ID	ICS Product Code	Product Description	Lot	Exp. Date	F/P	Qty	Unit Cost	Extended Amount	Denial Reason	Note
1	1	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0386026	06/30/2022	Full	1	\$0.00	\$0.00	NRP	
1	2	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0386028	06/30/2022	Full	2	\$866.00	\$1,732.00		
1	3	1402 0107-01	1402 0107-01 R	Bensal HP 30G Tube 3-6% Each	0586037	08/31/2022	Full	13	\$0.00	\$0.00	NRP	

The Credit Memo Total is: \$1,732.00

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	XI0123189725	REMIT TO:	MCKESSON CORP. DBA MCKESSON DRUG CO.
INVOICE DATE:	02/03/2023		PSASRETURNSCREDITS@MCKESSON.COM
PAYMENT DUE BY:	02/03/2023		3301 POLLOCK DRIVE
PRODUCT HELD UNTIL:	04/04/2023		CONROE TX 77303
VENDOR #	12592		
DEA#	A/P #	12592	DEA #:
			RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

	Controls	Rx	Total
Regular Piece Processed Value	\$.00	\$11307.92	\$11307.92
State Rtn Piece Processed Val	\$.00	\$.00	\$.00
Regular Pieces Processed	0	13	13
State Rtn Pieces Processed	0	0	0
Piece Fee per Piece	\$0.86	\$0.86	
Piece Processing Fee	\$0.00	\$11.18	\$11.18
Total Due	\$.00	\$11319.10	\$11319.10

MCKESSON CORP CONTRACTUALLY FACILITATES ON BEHALF OF THEIR RETAIL CLIENTS TO PROCESS AND MAINTAIN ACCOUNTING TRANSACTIONS ASSOCIATED WITH ALL DAMAGED, OUTDATED, AND PARTIAL MERCHANDISE RETURNS OF PHARMACEUTICAL PRODUCTS RESULTING IN THE PROCESSING AND COLLECTION OF PHARMACEUTICAL RETURNS DEBIT MEMOS PRODUCED BY INMAR. MCKESSON CORPORATION RESERVES THE RIGHT TO DEDUCT THE FULL VALUE OF THIS INVOICE FROM CURRENT PURCHASES ON THEIR RETAIL CLIENT'S BEHALF. SUCH DEDUCTION WILL INCLUDE THE DEBIT MEMO NUMBER FOR RECONCILIATION REFERENCE. PAYMENT FOR THIS DEBIT MEMO INVOICE SHOULD BE MADE TO MCKESSON CORPORATION IN THE FORM OF A CREDIT MEMO PAYABLE TO THE 'REMIT TO & CREDIT THRU' LISTED ON THIS DEBIT MEMO INVOICE PAGE. QUESTIONS RELATED TO THE FINANCIAL TRANSACTIONS ASSOCIATED WITH THIS DEBIT MEMO SHOULD BE ADDRESSED VIA MCKESSON SUPPLIER WEB PORTAL OR 972-446-4800.

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ADDITIONAL DEBIT MEMO INVOICE COPIES ARE AVAILABLE VIA INMAR'S CLSINVOICE LINK USING THE WEB ACCESS KEY BELOW

Returned By:
 McKesson Independent Pharmacy Accounts

Processed by :
 INMAR RX SOLUTIONS, INC
 3845 Grand Lakes Way
 Grand Prairie, TX 75050
 DEA# RR0191902

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 using WEB ACCESS KEY: 47000174-598085194535468

PHARMACEUTICAL RETURNS DEBIT INVOICE

INVOICE #	XI0123189725	REMIT TO:	MCKESSON CORP. DBA MCKESSON DRUG CO.
INVOICE DATE:	02/03/2023		PSASRETURNSCREDITS@MCKESSON.COM
PAYMENT DUE BY:	02/03/2023		3301 POLLOCK DRIVE
PRODUCT HELD UNTIL:	04/04/2023		CONROE TX 77303
VENDOR #	12592		
DEA#	A/P #	12592	DEA #:
			RM0328408

BILL TO: EPI HEALTH LLC
 115 CENTRAL ISLAND STREET, STE 300
 CHARLESTON SC 29492

SHIP TO: SPECTRUM PHARMACEUTICALS INC
 ATTN: RETURNS DEPT.
 345 INTERNATIONAL BLVD.
 SUITE 100
 BROOKS KY 40109
 DEA: 80615SHIP

To ensure proper posting of credit please reference invoice number above.
 To expedite return, send authorization forms to the INMAR RX SOLUTIONS, INC address below.

RX PRODUCT

NDC/UPC	DESCRIPTION	LOT#	EXP. DATE	F/P/E	QTY	PARTIAL %	UNIT COST	EXTENDED COST
63801010701	BENSAL HP 3% OINTMENT	0586037	08/31/2022	F	8		866.00	6928.00
63801010701	BENSAL HP 3% OINTMENT	0586037	unknown	F	4		866.00	3464.00
71403004902	SITAVIG 50 MG BUCCAL TABLET	1014	01/31/2023	F	1		915.92	915.92
Sub-Total Rx Regular Piece Processed Value								\$11307.92
Total Rx Regular Pieces Processed								13
Sub-Total Rx State Rtn Piece Processed Value								\$.00
Total Rx State Rtn Pieces Processed								
Piece Processing Fee @ \$.86/piece								\$11.18
Sub-Total Processing Fees								\$11.18
Sub-Total								\$11319.10
Total Due								=====
								\$11319.10
								=====

MCKESSON CORP CONTRACTUALLY FACILITATES ON BEHALF OF THEIR RETAIL CLIENTS TO PROCESS AND MAINTAIN ACCOUNTING TRANSACTIONS ASSOCIATED WITH ALL DAMAGED, OUTDATED, AND PARTIAL MERCHANDISE RETURNS OF PHARMACEUTICAL PRODUCTS RESULTING IN THE PROCESSING AND COLLECTION OF PHARMACEUTICAL RETURNS DEBIT MEMOS PRODUCED BY INMAR. MCKESSON CORPORATION RESERVES THE RIGHT TO DEDUCT THE FULL VALUE OF THIS INVOICE FROM CURRENT PURCHASES ON THEIR RETAIL CLIENT'S BEHALF. SUCH DEDUCTION WILL INCLUDE THE DEBIT MEMO NUMBER FOR RECONCILIATION REFERENCE. PAYMENT FOR THIS DEBIT MEMO INVOICE SHOULD BE MADE TO MCKESSON CORPORATION IN THE FORM OF A CREDIT MEMO PAYABLE TO THE 'REMIT TO & CREDIT THRU' LISTED ON THIS DEBIT MEMO INVOICE PAGE. QUESTIONS RELATED TO THE FINANCIAL TRANSACTIONS ASSOCIATED WITH THIS DEBIT MEMO SHOULD BE ADDRESSED VIA MCKESSON SUPPLIER WEB PORTAL OR 972-446-4800.

THIS DEBIT MEMO INVOICE IS A REQUEST FOR RETURN AUTHORIZATION AND/OR NOTIFICATION OF THE FINANCIAL VALUE OF THIS DEBIT MEMO CLAIM. IF INMAR DOES NOT HAVE AN AUTOMATIC RETURN AUTHORIZATION OR AUTHORIZATION TO DESTROY THE PRODUCT INVENTORIED ON THIS DEBIT MEMO INVOICE FROM YOUR COMPANY THIS NOTIFICATION ALSO ACTS AS A SOLICITATION FOR DESTRUCTION PERMISSION. PLEASE CONFIRM THE 'SHIP TO' IDENTIFIED ABOVE. CONTACT THE INMAR CUSTOMER SERVICE CENTER WITH THE RA NUMBER AND SHIPPING/DESTRUCTION INSTRUCTIONS AT CLSINVOICE LINK <https://www.clsinvoicelink.inmar.com>. USING THE WEB ACCESS KEY LISTED BELOW, RXRA@IMAR.COM, FAX# 817-868-5341, OR BY CALLING 817-868-5300. IF A RETURN AUTHORIZATION IS NOT RECEIVED AT INMAR WITHIN SIXTY (60) DAYS OF THE DEBIT MEMO INVOICE DATE, THIS PRODUCT WILL BE DESTROYED IN ACCORDANCE WITH U.S. FEDERAL REGULATIONS.

ADDITIONAL DEBIT MEMO INVOICE COPIES ARE AVAILABLE VIA INMAR'S CLSINVOICELINK USING THE WEB ACCESS KEY BELOW

Returned By:
 McKesson Independent Pharmacy Accounts
 F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: XI0123189725

These products are not intended for consumers - Do Not Redistribute "FOR DESTRUCTION ONLY"

F/P/E => F - Full, P - Partial, E - Exact count

INVOICE #: XI0123189725

From: [ICS AR Support](#)
To: [Sanchez, Irma](#)
Subject: FW: RE: MedTurn: RA/222 Request Invoice No - CC220342035 [ref:_00D40IY2v._5008Z1sZRpD:ref] [thread::sm-XIPBpfeCbIqasdJT1mUQ::]
Date: Monday, September 30, 2024 9:13:55 AM
Attachments: [100514350.pdf](#)

This Message Is From an External Sender

This message came from outside your organization.

[Report Suspicious](#)

----- Forwarded Message -----

From: ReturnSupport [returnsupport@icsconnect.com]
Sent: 4/7/2022 1:24 AM
To: rxra@inmar.com
Subject: RE: MedTurn: RA/222 Request Invoice No - CC220342035 [ref:_00D40IY2v._5008Z1sZRpD:ref]

Hello,

Please find RGA 100514350 attached.

*Thank you for your business. **If you have further questions about this inquiry, please reply to this message.** For any new inquiry, please use the contact information for your established support team. Thank you for contacting EPI Health.*

*Regards,
Anastasija Zilionyte*

----- Original Message -----

From: [\[rxra@inmar.com\]](mailto:rxra@inmar.com)
Sent: 4/6/2022 11:02 PM
To: epihealthreturns@icsconnect.com
Subject: MedTurn: RA/222 Request Invoice No - CC220342035

Attached is a MFG Invoice / Debit Memo issued by CLS MedTurn Pharmaceutical Services (an Inmar Company) located in Fort Worth, Texas. Please respond with a RA to ship or destroy the material listed on the invoice via the rxinvoice@inmar.com email address. Questions regarding this invoice should be directed to our Client Services Department @ 1-800-967-5952.

Sincerely,

Manufacture Services
Inmar
CLS MedTurn



Pharmaceutical Services

ref:_00D40IY2v._5008Z1sZRpD:ref 

thread::sm-XIPBpfeCbIqasdJT1mUQ::

Returned Goods Authorization

EPI Health LLC

RG# 100514350

RG Date: 4/7/2022

Fax Number: 8178685341

Date: 4/7/2022

Thank you for your request for a Returned Goods Authorization. Please use the following instructions in order to process your return as quickly as possible.

If you have any questions about your return, please contact us at .

1. Package the items that you would like to return in a box.
2. Include a copy of this Returned Goods Authorization inside the box.
3. Affix this label or page to the outside of each box that you are returning.



Returned Goods Authorization
EPI Health LLC
RGA # 100514350
RGA Date: 4/7/2022



100514350

In order to process your return as quickly as possible, please (1) include a copy of this return authorization with your package and (2) affix the label on the first page to the outside of each box that you are returning.

This Returned Goods Authorization is an authorization for you to return the items listed below. **The Unit Price and Extended Prices shown on this document are listed as shown on your debit memo, they are not the credit amounts that may be given to you.**

Upon receipt, all returned products are subject to validation. Credit will be applied according to the current return policy effective at that time.

Customer Debit Memo #: 74900
Debit Memo Date: 4/6/2022
Debit Memo Amount: \$749.00

3rd Party Processor: Inmar RX Solutions Inc
3rd Party Processor RAF:

Returned By:
R33407
Costco Wholesale
999 Lake Drive
Issaquah WA 98027 United States Of America

Credit will be paid to:
7554728
MCKESSON CORPORATION
1995 MCKESSON ST SUITE 101
DBA MCKESSON DRUG COMPANY
AURORA IL 60502 United States Of America
MCKESSON CORPORATION
Payment via: Credit to AR Balance

The following items were listed on the return request that was received.

Item	NDC	Product Description	Unit	Lot	Debit Memo Exp Date	F/P	Qty	% Full	Debit Memo Unit Cost	Debit Memo Extended Cost	Reason
1	1402 0007-04	Bionect 100GM Cream .20% Each	EACH	D05700	02/20/2022	F	1	00	\$749.00	\$749.00	Expired Product

The unit cost on your debit memo does not match the unit cost calculated based on our current return policy. Please review our return policy.

RG Total: \$749.00