	Ctorodoval	Duadinat	Information
пі ж	Stannarn	Product	intormation

Pharmaceutical Products

5	New Item	☐ Promotion/Deal	☐ Open Stock	☐ Post Launch Chang
		Page 1 of		

PRODUCT INFORMATION				SPECIAL HANDLING AND STORAGE REQUIREMENTS								
Manufacturer/Broker Name: AvKARE, Inc. Number:					a. Temperature – Indicate the normal temperature range for this product.							
Product Name: Amantadine HCI 100mg Capsule 5 x 10 Unit Dose					I. Controlled Room Temperature (68° – 77° F)							
Product ID Number:										_	_ _	
NDC 50268-0069-15	UPC/0	STIN #			II. Roon	n rempera	ature (59° –	00°F)				
Description: Amantadine HCI 100mg Ca	apsule 5 x 10 Ur	nit Dose			III. Excessive Heat (>104° F)							
Address: 615 North First Street					IV. Cool (46° – 59° F)							
City, State, Zip: Pulaski TN 38478					V. Refrigerated (36° – 46° F)							
Key Contact: Kim Bracey Fax: 931-292-6229					,							
Phone Number: <u>931-292-6222</u> Ext: <u>2603</u>				VI. Frozen (-4° – 14° F)				•				
Phone Number: 931-908-0028	E	xt:			VII. No Requirement							
Is the Product? 🛛 Direct Ship Item	າ 🛛 Drop S	hip Item									√ N -	
Is the Product a Controlled Drug?	∕es ⊠ No				b. Are temperature excursions permitted/allowed for product? ☐ Yes ☐ No							∆ NO
If Yes, Schedule Number:					If Yes, provide the temperature range and hours duration:							
Is this ARCOS reportable?					_		6	and		_		
Is this Product a Legend Device?	∕es ⊠ No				c. Are there	additions	l etorado a	nd chinning i	oquiromor	ste2	☐ Yes	⊠ No
Country of Origin: USA							_		equilemen	11.5:	163	∆ NO
Harmonization Code Number for Interna	•				If yes, please provide on page 2.							
Is this product a Hazardous Material or												
🗌 Yes 🛮 No If yes, p		al information	on page 2.									
Attach copy of Material Safety Data S	heet (MSDS)											
Attach Package Insert	1											
ADDITIONAL PRODUCT INFORMATION				IT	EM AND PAG	CKING IN	FORMATIC	ON				
Is there a minimum order quantity?	Size/Strength /Form	Unit Of Sale	UPC Code	Mstr. Shpr.		Wght. Lbs.	Cube	Case Dimensions	Iter Dimens		Pallet Dimensions	# Cases/ Pallet
If yes, ⊠ Case □ Carton □ Item	5 x 10 UD	☐ Bottle	Case:	500	10 box	Case:	Just	Depth:	Depth:		epth:	1 4.101
Number of Pieces? 1	100mg	⊠ Box			per	5.0		9.50"	2.00"			
Shelf Life: Months	capsule	☐ Glass jar	Carton:		case	Carton:		Height:	Height:	Н	eight:	
Whsl. Code #:		☐ Ampule			5 cards			4.50"	4.25"			
Fineline Code:		☐ Other	Item:		per	Item:		Width:	Width:	v	/idth:	
Is Item? ☑ Unit Dose ☐ Unit of Use			-]		box	.50		6.50"	3.25"			
	ii. Product Color: see page 2											
If Unit Dose, is item bar coded to unit dose for Hospital tracking purposes?												
☐ Yes ☐ No	COST INFORMATION											
				istribution All		Invoice	Net	Mfr's	Avg Ret		Excise	
Will handling data change in the first: Regular ☐ OI ☐ BB 6 months? ☐ Yes Cost (\$) \$ %		<u>в</u>	□ OI □	<u>вв</u> %	Cost (\$)	Cost (\$)	AWP	Price (\$	(\$)	Tax		
9 months?	DZ	(Ψ)	Ψ	/0 3		/0						
12 months?	EA		+				\$150.53		\$174.15			
Unknown?	PPK						,		, .			
J	•	i L	L					_ (

This offer is made on a proportionally equal basis to all sellers' accounts completive with customer. Signature:



Item Description: Amantadine HCl 100mg Capsule 5 x 10 Unit Dose Manufacturer: AvKARE, Inc.

If additional information is necessary, provide on right of pa	ge or as attachment.					
HAZARDOUS MATERIAL INFOR	MATION	ADDITIONAL INFORMATION AS NECESSARY				
Is this product:						
a) Cytotoxic? $\hfill \square$ Yes $\hfill \square$ No						
b) Carcinogen? ☐ Yes ☒ No						
c) Inhalation Hazard? 🔲 Yes 🛛 No						
d) Contact Hazard? ☐ Yes ☒ No						
Is this item considered a carcinogen?	☐ Yes					
Is this item an aerosol requiring special storage?	☐ Yes					
Does this product require special clean-up instructions?	☐ Yes ⊠ No					
If yes, attach MSDS with special instructions.						
Department of Transportation (DOT) I.D. Number:						
Hazard Class/ORM Code:	-					
OSHA/DOT CHEMICAL STORAGE	E CLASS					
Please check appropriate Class(s) for this product.						
☐ ORGANIC ☐ ANTINEOPLASTIC						
☐ INORGANIC ☐ STEROID/ANDROGEN						
☐ CORROSIVE/OXIDIZER ☐ ESSENTIAL CHEMICAL		yellow, soft gelatin capsules containing 100 mg of amantadine hydrochloride. Each				
☐ AEROSOL ☐ PRECURSOR CHEMICAL (De	escribe below)	capsule is imprinted with "A1" in black ink				
☐ AEROSOL CLASS ☐ MAXIMUM QTY LEVEL						
Is the product restricted for air shipping?						
☐ Passenger						
☐ Cargo						
☐ Passenger & Cargo						
Precursor Chemical:	Size/Strength					
Ephedrine ☐ Yes ☒ No						
Pseudoephedrine ☐ Yes ☒ No						
Phenylpropanolamine ☐ Yes ☒ No						
ADDITIONAL STORAGE AND SHIPPING I	REQUIREMENTS	<u> </u>				
Is this product to be shipped to customers on ice? ☐ Yes ☐ No						
Is this product to be shipped to customers on dry ice?	☐ Yes					
Does this product require refrigerated truck for transport?	☐ Yes					
Is this Product State Regulated?	☐ Yes					
If yes, list states on the right or as an attachment.						
Are there special returns requirements?	☐ Yes					
If yes, provide requirements in the space to the rigi	nt or as attachment.					

