© August 2014	Introduction Type: New Item					Final Version Date: 2/24/16					4/16	
PRODUCT INFORMATION						SPECIAL HANDLING AND STORAGE REQUIREMENTS*						
Company Name: AvKARE, INC Application: ANDA						a. Temperature – Indicate the USP temperature range for this product.						
Application Number for NDA/ANDA/BLA, Med Device: OTC						I. Freezer – between -25 and -10 C (-13° – 14° F)						
Rx Product/Proprietary Name: Vitamin D3 2000IU 50ct Tablet						II. Cold – between 2 and 8 C (36° – 46° F)						
NDC: 50268-0865-15 UPC:						III. Cool – between 8 and 15 C (46° – 59° F)						
CVX Code: MVX Code:						x IV. Controlled Room – between 20 and 25 C (68° – 77° F)						
Description: Vitamin D3 2000IU 50ct Tablet						allows for excursions between 15 and 30 C (59° – 86° F)  V. Avoid Excessive Heat – above 40 C (>104° F)						
Active ingredients:						VI. Other Temperature Range Requirement (write in)						
URL for Additional Product Information:						VII. No Requirement						
Address: 615 North First Street Address 2:						b. Contact for temperature excursion questions:						
City: Pulaski		State:	TN Zip: 38478			Name:						
Key Contact: Kim Brad		Email:	kbracey@avkare.com			Number:						
Phone Number: 931-908-				9	Is this product to be shipped to customers on ice?					_		
	F0	R GENERIC DRUG PRODU	CTS			Is this produ	uct to be shippe	ed to customer	s on dry ice?			
I. Orange Book Rating: II. Brand Name:						c. Special regulations for product in certain states?						
III. Generic Equivalent for Brand:							-			_		
DRUG SUPPLY CHAIN SECURITY ACT (DSCSA) INFORMATION						Special retu	rns requiremen	ts for this prod	uct?			
Does supplier meet DSCSA definition of manufacturer? Yes DUNS: 796560394  Is product exempt from DSCSA? No						d Store prod	uct (unit of sal	o) upright?				
· · · · ·							oduct (unit of s	,	•		-	
If yes, select exemption: Other exemption - Write in:						Protect pro	bauct (unit of s	are) from right	r		_	
						- 01-16116-						
Is product repackaged? Yes If Yes, was original product purchased direct from mfr? Yes Yes						e. Shelf life:	Initial shalf	Months ife at launch (	if different):		Months	
are any waivers granted for product ID/barcode?  No If yes, attach documentation from FDA							minual Sherri	ne at raunen (	ir dirici citty.		Months	
ADDITIONAL PRODUCT INFORMATION							ITEM AND	PACKING INF	ORMATION			
Is the Product Direct an	Direct and Drop Ship ORDER INFO			PMATION	MATION			Dimensions (US memts ) Volu				
Legend Device?	No No	Unit of Sale		NDC selling unit?	1	Weight Lbs.	Depth	Height	Width:	(Cube)	# Pieces:	
State Control?	No	Bottle	50 pills per b		14	0.5	2.00"	4.25"	3.25"	(Gase)	1	
ARCOS reportable?	No	x Box/Carton	10 boxes per case		Item:	0.5	2.00	4.25	3.25		1	
Co-Licensed?	No	Ampule (Write-in, e.g.		g. 1 Box of 10 Vials)	Box/							
Controlled Substance?	No	Glass			Carton:							
Schedule No.? (incl. N for non-narcotic)		Tube Vial Liquid Sgl	Minimum or	der quantity? Yes	Case:	5	9.50"	4.50"	6.50"		10	
Controlled Substance Code: Hazardous Material/Cytotoxic Ager	? No	Vial Liquid Multi Vial Powder Sql	If Yes, how	many of which package type? Each	Pallet:							
sous material sylviolitic Ager		Vial Power Multi		Inner/Carton/Pack	<del> </del>	Case:			-	1		
Is Item Unit Dos	:	Other: Write In	1	Case	UPC:	Carton:						
If Unit Dose, is item bar coded to un	t dose for											
hospital scanning?	Yes PHARMACY ORDER / BILL UNIT Other Product Informati				ion	COST INFORMATION						
Is it reverse numbered?	No	Rec. sell unit to customer? Size/Strength/Form:				Regular Cost Per Unit of Invoice Cost (WAC) (\$)				Federal Ex	ise Tax Per	
			50ct/2000IU/Tablet			Sal	e (\$)	5100 0031 (1170) (#)		Unit of Sale		
			(Write-in, e.g. 1 Vial) Product Shape: Round									
Vendor #: Rx billing unit to pharmacy:			nacy:	y: Product Color: White			\$14.77 \$12.31					
Whsl. Code #:				I								
Fineline Code:	neline Code: Gram Product Imprint: Milliliter							As of date:	2/24/16			
	OF PROPILET S	ACKACINO :		2/24/16								
Attach copy of SAFETY DATA SHEET (SDS) or non hazard letter, PACKAGE INSERT, LABEL AND PHOTO OF PRODUCT PACKAGING and BARCODE.												
*Please provide any additional info		SAFETY DATA SHEET (SD	,	For Designated Drop Ship Only.	AND PHOTO	Signature:	ACKAGING and	BARCODE.				