

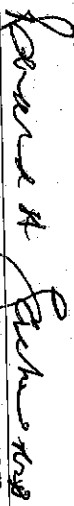
State of Ohio
STATE BOARD OF PHARMACY

77 South High Street, Room 1702; Columbus, Ohio 43215-6126 TEL: 614/466-4143 FAX: 614/752-4836 EML: licensing@pop.ohio.gov

Be it known that the **WHOLESALE DISTRIBUTOR OF DANGEROUS DRUGS** named below has given satisfactory evidence that all statutory requirements (ORC Sections 4729.52 & 4729.53) have been met, is duly registered, and is entitled to distribute dangerous drugs at wholesale in the state of Ohio until the expiration date of **JUNE 30, 2012**:

Identification Number **WFSR . 010726000** 00889

RESPONSIBLE PERSON:
RONALD SACHER DIR



SIGNATURE OF RESPONSIBLE PERSON

Any change of responsible person must be reported within thirty days on a "Notification of Change of Responsible Person" form.

Before change of name, address, or ownership, immediately notify the Licensing Department of the State Board of Pharmacy.

HOXWORTH BLOOD CTR, U OF CINCINNATI
3130 HIGHLAND AVE. ML0055
CINCINNATI OH 452670055

CLASS: Wholesale DDD - Full Service Wholesale - Category Two

SIGN AND KEEP IN A READILY RETRIEVABLE LOCATION AT THIS ADDRESS

A change in name, address, or ownership requires new application and fee. In the event of an address change, the State Board of Pharmacy must be notified prior to moving any dangerous drugs. [Sections 4729.51 and 4729.52, O.R.C.; Rule 4729.9-16, O.A.C.]

In accordance with paragraph (A)(7) of 4729.9-16 (OAC) (effective January 1, 2009), if a wholesale distributor is incorporated a criminal records check is required every time there is a change in officers. Please contact the Board office for the fingerprint cards.

On the State Board of Pharmacy shall be notified of any new facilities, work or storage areas to be constructed or utilized for dangerous drugs, or