IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE

In re:	Chapter 11
Sancilio Pharmaceuticals Company, Inc., et al., 1	Case No. 18-11333 (CSS)
Debtors.	(Jointly Administered)

STATEMENT OF FINANCIAL AFFAIRS FOR SANCILIO & COMPANY, INC. (18-11334)

¹The Debtors in these Chapter 11 Cases, along with the business addresses and the last four (4) digits of each Debtor's federal tax identification number, if applicable, are: Sancilio Pharmaceuticals Company, Inc., 2129 N. Congress Avenue, Riviera Beach, FL 33404 (3353); Sancilio & Company, Inc., 2129 N. Congress Avenue, Riviera Beach, FL 33404 (7166); Blue Palm Advertising Agency, LLC, 2129 N. Congress Avenue, Riviera Beach, FL 33404 (n/a).

IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE

In re:	Chapter 11
SANCILIO PHARMACEUTICALS COMPANY, INC., et al., 1	Case No. 18-11333 (CSS)
COMPANY, INC., et al.,	(Jointly Administered)
Debtors.	

GLOBAL NOTES AND METHODOLOGY REGARDING THE DEBTORS' SCHEDULES OF ASSETS AND LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS

These Global Notes and Methodology Regarding the Debtors' Schedules of Assets and Liabilities and Statements of Financial Affairs (the "Global Notes") are an integral part of all of the Debtors' Schedules and Statements (defined below). The Global Notes should be referred to, considered, and reviewed in connection with any review of the Schedules and Statements. In the event that the Schedules and Statements differ from the Global Notes, the Global Notes shall control.

Introduction. The Schedules of Assets and Liabilities (the "Schedules") and Statements of Financial Affairs (the "Statements" or "SOFA"; together with the Schedules, the "Schedules and Statements") filed by Sancilio Pharmaceuticals Company, Inc. ("SPC"), Sancilio & Company, Inc. ("SCI") and Blue Palm Advertising Agency, LLC ("Blue Palm"), as debtors and debtors-in-possession (the "Debtors"), in the above-captioned chapter 11 cases (the "Chapter 11 Cases") with the United States Bankruptcy Court for the District of Delaware (the "Bankruptcy Court") have been prepared by the Debtors' management pursuant to section 521 of title 11 of the United States Code, 11 U.S.C. §§ 101–1532 (the "Bankruptcy Code") and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the "Bankruptcy Rules"). The Schedules and Statements are unaudited.

While the Debtors have made every reasonable effort to ensure that their Schedules and Statements are accurate and complete, based upon information that was available to them at the time of preparation, inadvertent errors or omissions may exist and the subsequent receipt of information and/or further review and analysis of the Debtors' books and records may result in changes to financial data and other information contained in the Schedules and Statements.

The Schedules and Statements have been signed by Karrilyn Thomas, the Debtors' Chief Financial Officer and an authorized signatory for each of the Debtors in respect of the Schedules and Statements. In reviewing and signing the Schedules and Statements, Ms. Thomas relied upon the efforts, statements, and representations of various personnel employed by the Debtors and their advisors. Ms. Thomas has not (and could not have) personally verified the accuracy of each statement and representation contained in the Schedules and Statements, including statements and representations concerning amounts owed to creditors, classification of such amounts, and creditor addresses.

¹ The Debtors in these Chapter 11 Cases, along with the business addresses and the last four (4) digits of each Debtor's federal tax identification number, if applicable, are: Sancilio Pharmaceuticals Company, Inc., 2129 N. Congress Avenue, Riviera Beach, FL 33404 (3353); Sancilio & Company, Inc., 2129 N. Congress Avenue, Riviera Beach, FL 33404 (n/a).

<u>Basis of Presentation.</u> The Schedules and Statements are unaudited and do not purport to be financial statements prepared in accordance with generally accepted accounting principles in the United States of America ("<u>U.S. GAAP</u>"), nor were they reconciled with the Debtors' financial statements. These Schedules and Statements represent the Debtors' good faith attempt to comply with the requirements of the Bankruptcy Code and Bankruptcy Rules using commercially reasonable efforts and resources available and are subject to further review and potential adjustment.

Reservation of Rights. The Debtors and their advisors who assisted in the preparation of the Schedules and Statements do not guarantee or warrant the accuracy or completeness of the data that is provided herein and shall not be liable for any loss or injury arising out of or caused in whole or in part by the errors or omissions, negligent or otherwise, in preparing, collecting, reporting, or communicating the information contained herein. The Debtors and their advisors do not have an obligation to update, modify, revise, or re-categorize the information provided herein, or to notify any third party upon such revisions. In no event shall the Debtors or their advisors be liable to any third party for any direct, indirect, incidental, consequential, or other damages (including, but not limited to, damages arising from the disallowance of a potential claim against the Debtors or damages to business reputation, lost business or lost profits), whether foreseeable or not and however caused, even if the Debtors or their advisors are advised of the possibility of such damages. The Debtors reserve all rights to amend and/or supplement the Schedules and Statements from time to time as is necessary and appropriate.

The failure to designate a claim in the Schedules and Statements as "contingent," "unliquidated," or "disputed" does not constitute an admission by the Debtors that such claim or amount is not "contingent," "unliquidated," or "disputed." The Debtors reserve their rights to dispute, or to assert offsets or defenses to, any claim reflected on their Schedules or Statements on any grounds, including, but not limited to, amount, liability, priority, status, or classification, or to otherwise subsequently designate any claim as "contingent," "unliquidated," or "disputed." Moreover, the Debtors reserve all of their rights to amend their Schedules and Statements as necessary and appropriate, including, but not limited to, with respect to claim description and designation.

The Debtors have made commercially reasonable efforts to correctly characterize, classify, and categorize claims, assets, executory contracts, among other items reported in the Schedules and Statements. However, the Debtors may have improperly characterized, classified, categorized, or designated certain items. The Debtors thus reserve all of their rights to recharacterize, reclassify, recategorize, or redesignate items reported in the Schedules and Statements at a later time as necessary or appropriate as additional information becomes available.

The Debtors accounting systems were designed and maintained to manage the consolidated treasury and cash management systems of the Debtors, as well as report the Debtors' financial results on a consolidated basis. Additionally, the Debtors' accounting and finance staff have been trained and followed procedures consistent with these primary objectives. Neither the Debtors nor their advisors can ensure that the transactions recorded in one of the Debtors' books and records does not inadvertently reflect activity of another Debtor.

Global Notes. These Global Notes are in addition to the specific notes set forth in the Schedules and Statements of the individual Debtor entities. The fact that the Debtors have prepared a Global Note with respect to a particular Schedule or Statement and not as to others does not

reflect and should not be interpreted as a decision by the Debtors to exclude the applicability of such Global Note to any or all of the Debtors' remaining Schedules or Statements, as appropriate. Disclosure of information in one Schedule, one Statement, or an exhibit or attachment to a Schedule or Statement, even if incorrectly placed, shall be deemed to be disclosed in the correct Schedule, Statement, exhibit, or attachment.

<u>Petition Date.</u> Unless otherwise noted, all asset and liability balances reported in the Schedules are as of June 5, 2018 (the "Petition Date").

<u>Valuation.</u> It would be prohibitively expensive, unduly burdensome, and an inefficient use of estate assets for the Debtors to obtain current market valuations of all of their assets. Accordingly, unless otherwise indicated, the Schedules and Statements reflect net book values as of the Petition Date. Cash is reported as of the Petition Date on a bank basis. Amounts ultimately realized may vary from net book value (or whatever value was ascribed) and such variance may be material. Accordingly, the Debtors reserve all of their rights to amend or adjust the value of each asset set forth herein. In addition, the amounts shown for total liabilities exclude items identified as "unknown" or "undetermined" and, thus, ultimate liabilities may differ materially from those stated in the Schedules and Statements.

<u>Ouantification of Claims.</u> Amounts that were not readily quantifiable by the Debtors were reported as "undetermined" which is not intended to reflect the magnitude of the claim.

<u>Claims Paid Pursuant to Court Orders.</u> The Bankruptcy Court authorized the Debtors to pay certain prepetition claims, including but not limited to, insurance payments, certain taxes, employee related claims, customer claims, including rebates, and critical vendor claims. Consequently, certain prepetition fixed, liquidated and undisputed unsecured claims have been paid following the Petition Date. As such, claims against the Debtors for prepetition amounts may have been paid as of the time the Schedules and Statements and may not have been included in the Schedules and Statements.

<u>Liabilities</u>. The Debtors have sought to allocate liabilities between the prepetition and postpetition periods based on the information and research conducted in connection with the preparation of the Schedules and Statements. As additional information becomes available and further research is conducted, the allocation of liabilities between the prepetition and postpetition periods may change. Accordingly, the Debtors reserve all of their rights to amend, supplement, or otherwise modify the Schedules and Statements as is necessary or appropriate.

Exclusions. The Debtors have excluded certain categories of assets, tax accruals, and liabilities from the Schedules and Statements, including employee benefit accruals, accrued accounts payable, and deferred gains. The Debtors also have excluded potential rejection damage claims of counterparties to executory contracts and unexpired leases that may be rejected, to the extent such damage claims may exist. In addition, certain immaterial assets and liabilities may have been excluded.

<u>Causes of Action.</u> The Debtors, despite their efforts, may not have listed all of their causes of action against third parties as assets in the Schedules and Statements. The Debtors reserve all of their rights with respect to any causes of action they may have, and neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any such causes of action.

<u>Insiders.</u> For purposes of the Schedules and Statements, the Debtors defined "insiders" as: (a) directors; (b) officers; and (c) debtor/non-debtor affiliates. Persons listed as "insiders" have been included for informational purposes only and by including them in the Schedules, shall not constitute an admission that those persons are insiders for purposes of section 101(31) of the Bankruptcy Code. Moreover, the Debtors do not take any position with respect to: (a) any insider's influence over the control of the Debtors; (b) the management responsibilities or functions of any such insider; (c) the decision making or corporate authority of any such insider; or (d) whether the Debtors or any such insider could successfully argue that he or she is not an "insider" under applicable law or with respect to any theories of liability or for any other purpose.

Leases. In the ordinary course of business, the Debtors may lease certain fixtures and equipment from certain third-party lessors for use in the daily operation of their businesses. The underlying lease agreements are listed on Schedule G and any current amount due under such leases that were outstanding as of the Petition Date are listed on Schedule F. Nothing in the Schedules and Statements is or shall be construed as an admission as to the determination of the legal status of any lease (including whether any lease is a true lease or a financing arrangement), and the Debtors reserve all rights with respect to such issues.

<u>Litigation.</u> Certain litigation reflected as claims against one of the Debtors may relate to any of the other Debtors. The Debtors have made reasonable efforts to accurately record these actions in the Schedules and Statements of the Debtors that are the party to the action.

<u>Totals.</u> All totals that are included in the Schedules and Statements represent totals of all the known amounts included in the schedules.

Employee Addresses. Employee addresses, including those of officers, have been listed as the address of the Debtors.

Fill in this informati	on to identify the case	\•			
	ilio & Company, Inc.	7.			
	ruptcy for the District	of: De	laware		Check if this is
Case number (if known		OI. DC	iawaic		an amended
Guse number (ii kiii	5W11). 10-11004				filing
Official Form 20	<u>)7</u>				
Statement of F	inancial Affair	s for	Non-Indivi	duals Filing for Bankruptcy	
he debtor's name and	er every question. If mo	-	ce is needed, attac	h a separate sheet to this form. On the top o	of any additional pages, wri
Part 1: Income					
1. Gross revenue from None	om business				
Identify the beginnin which may be a cale	g and ending dates of t endar year	he deb	tor's fiscal year,	Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning	From _{1/1/2018}	to	Filing date	Operating a business	\$ 4,467,897.00
of the fiscal year to filing date:		_		Other	
g date.					
For prior year:	From 1/1/2017	to	12/31/2017	Operating a business	\$ 14,298,000.00
				Other	
For the year before	From _{1/1/2016}	to	12/31/2016		\$ 24,867,551.00
that:	17077	_	12/31/2010	✓ Operating a business	Ψ 24,007,001.00
				U Other	
2. Non-business rev			- i- t-v-bl- No- b		ade manay adlastad from
				usiness income may include interest, divide ch separately. Do not include revenue listed	-
None				Description of sources of revenue	Gross revenue
					from each source (before deductions and exclusions)
From the beginning	From _{1/1/2018}	to	Filing date	GRANT REVENUE	\$ 14,190.00
of the fiscal year to filing date:		_			
For prior year:	From 1/1/2017	to	12/31/2017	GRANT REVENUE	\$ 60,885.00
For the year before	From _{1/1/2016}	to	12/31/2016	GRANT REVENUE	\$ 369,600.00

that:

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 c List payments or transfers - including expense reimbursements before filing this case unless the aggregate value of all propadjusted on 4/01/19 and every 3 years after that with respective None	ents - to any perty transfe	creditor, other than regerred to that creditor is le	ess than \$6,	425. (This a	
Creditor's name and address	Dates	Total amount or value	Reasons f	or payment that apply	or transfer
3.1 © Creditor's name and address SEE SOFA 3 EXHIBIT		\$_3,863,878.10		ured loan re ers or vend	epayments fors
4. Payments or other transfers of property made within List payments or transfers, including expense reimburseme guaranteed or cosigned by an insider unless the aggregate \$6,425. (This amount may be adjusted on 4/01/19 and ever Do not include any payments listed in line 3. Insiders include relatives; general partners of a partnership debtor and their agent of the debtor. 11 U.S.C. § 101(31).	ents, made v value of all ry 3 years a le officers, d	vithin 1 year before filing property transferred to of fter that with respect to of lirectors, and anyone in	this case of or for the be cases filed control of a	on debts owe enefit of the on or after the corporate d	ed to an insider or insider is less than ne date of adjustment. lebtor and their
Insider's name and address	Dates	Total amount or value	Reasons f	or payment	or transfer
Insider's name and address SEE SEE SOFA 4 EXHIBIT Relationship to debtor		\$ 2,088,234.95		ured loan re ers or vend	epayments ors
 5. Repossessions, foreclosures, and returns List all property of the debtor that was obtained by a creditor creditor, sold at a foreclosure sale, transferred by a deed in None 	-	_	-		
Creditor's name and address	Description	n of the property		Date	Value of property
6. Setoffs List any creditor, including a bank or financial institution, the account of the debtor without permission or refused to mak debtor owed a debt. None		-			
Creditor's name and address	Descriptio	n of the action creditor t	ook	Date action was	Amount

Case 18-11333-CSS Doc 73 Filed 06/26/18 Page 8 of 32 7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case. None Case title Nature of case Court or agency's name and address Status of case 7.1 Name Pending SEE SOFA 7 EXHIBIT On appeal Concluded Street City State Zip 8. Assignments and receivership List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case. ✓ None Custodian's name and address Description of the property Value **Certain Gifts and Charitable Contributions** 9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000 ✓ None Recipient's name and address Description of the gifts or contributions Dates given Value Part 5: Losses 10. All losses from fire, theft, or other casualty within 1 year before filing this case Amount of payments received for the loss Date of loss Value of property If you have received payments to cover the lost loss, for example, from insurance,

10. All losses from fire, theft, or other casualty within 1 year before filing this case None Description of the property lost and how the loss occurred Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

\$ 283,738.24

9/10/2017

\$208,738.24

BUILDING DAMAGE AND INVENTORY

LOSS DUE TO HURRICANE IRMA

Part 6: Certain Payments or Transfe	rs		
	of property made by the debtor or person acting ty, including attorneys, that the debtor consulted y case.		
Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1 Name and Address SEE SOFA 11 EXHIBIT			\$ 900,970.62
Email or website address			
Who made the payment, if not debtor?			
12. Self-settled trusts of which the debtor is List any payments or transfers of property the filing of this case to a self-settled trust to Do not include transfers already listed on this self-settled.	made by the debtor or a person acting on bel or similar device.	nalf of the debtor withi	n 10 years before
Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
debtor within 2 years before the filing of this ca	ement by sale, trade, or any other means□made by the se to another person, other than property transf and transfers made as security. Do not include	erred in the ordinary cou	urse of business or
Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
Part 7: Previous Locations			
14.Previous address List all previous addresses used by the debtor w	vithin 3 years before filing this case and the date	s the addresses were us	sed.
Does not apply	- ,		

Dates of occupancy

Address

Part 8: He	aith Care Bankruptcies		
Is the debtor	are bankruptcies primarily engaged in offering services and fac ng or treating injury, deformity, or disease, or	cilities for:	
providing	any surgical, psychiatric, drug treatment, or o	obstetric care?	
✓ No. Go to	o part 9.		
Yes. Fill i	n the information below.		
Facility nam	e and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
	rsonally Identifiable Information		
	e debtor collect and retain personally ident	ifiable information of customers?	
✓ No.			
☐ Yes. State	e the nature of the information collected and i	retained.	
	es the debtor have a privacy policy about that ormation?		
	No		
	Yes		
	years before filing this case, have any em profit-sharing plan made available by the d	ployees of the debtor been participants in any ERISA, 4 lebtor as an employee benefit?	101(k), 403(b), or other
No. Go to	Part 10.		
Yes. Doe	s the debtor serve as plan administrator?		
	No. Go to Part 10.		
	Yes. Fill in below:		
	me of plan NCILIO & COMPANY 401K PLAN	Employer identification number of the pla 20-1747166	ın
•	s the plan been terminated? No Yes		

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

house	es, cooperatives, associat one	ions, and o	ther financial ir	nstitutions.			
Fina	ncial institution name and	address		Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1	Name CAPITAL BANK Street 3399 PGA BOULEVARE City PALM BEACH GARDENS	State FL	Zip 33410	<u>9506</u> 	Checking Savings Money market Brokerage Other	MID YEAR 2017	\$ 0.00
18.2	Name CAPITAL BANK Street 3399 PGA BOULEVARE City PALM BEACH GARDENS), SUITE 10 State FL	Zip 33410	8006	Checking Savings Money market Brokerage Other	MID YEAR 2017	\$ 0.00
18.3	Name CAPITAL BANK Street 3399 PGA BOULEVARD City PALM BEACH GARDENS), SUITE 10 State FL	Zip 33410		Checking Savings Money market Brokerage Other PAYROLL ACCOUNT	MID YEAR 2017	\$ 0.00
18.4	Name CAPITAL BANK Street 3399 PGA BOULEVARE City PALM BEACH GARDENS	State FL	Zip 33410	_ 2306	☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☑ Other CREDIT CARD SALES ACCOUNT	MID YEAR 2017	\$ 0.00

18.5	Name CAPITAL BANK	Case 18-113	33-CSS	Doc 73 4206	Filed 06		Page 12 of 32 MID YEAR 2017	\$ 0.00
	Street	VADD CUITE 100		_	Saving			
	3399 PGA BOULE	•	 Zip	_	☐ Money			
	PALM BEACH		33410	=	☐ Brokera	age		
	GARDENS				Other			
					DEPOSIT /	ACCOUNT	<u>-</u>	
18.6	Name CAPITAL BANK			9406	Checki	•	MID YEAR 2017	\$ 0.00
	Street	VADD CUITE 400			☐ Saving			
	3399 PGA BOULE		<u>Z</u> ip	=	☐ Money	market		
	PALM BEACH		33410	_	Brokera	age		
	GARDENS				Other			
19. S	afe deposit boxes				OVERNIGH SWEEP AC		_	
List a	ny safe deposit bo e filing this case.	ox or other deposit	ory for secu	urities, cash	, or other va	luables th	ne debtor now has or di	d have within 1 year
Depo	ository institution nai	me and address	Names of to it	of anyone wit	th access	Descript	ion of the contents	Does debtor still have it?
List a	of a building in whi	n storage units or v		s within 1 ye	ear before fil	ing this ca	ase. Do not include faci	ilities that are in a
Facil	ity name and addres	SS	Names of to it	of anyone wit	th access	Descript	ion of the contents	Does debtor still have it?
Part	11: Property th	e Debtor Holds	or Contro	ols that the	e Debtor D	oes Not	t Own	
List a	roperty held for and any property that the ld in trust. Do not l	ne debtor holds or		at another e	ntity owns.	nclude ar	ny property borrowed fr	om, being stored for,

□ None			
Owner's name and address	Location of the property	Description of the property	Value
MYLAN PHARMACEUTICAL, 781 CHESTNUT RIDGE ROAD, MORGANTOWN, WV 26505	3874 FISCAL COURT, SUITE 200, RIVIERA BEACH, FL 34983	VARIOUS CUSTOMER SUPPLY MATERIALS	NOMINAL
THERAPEUTICS MD, 951 BROKEN SOUND PARKWAY NW, SUITE 320, BOCA RATON, FL 33487	3874 FISCAL COURT, SUITE 200, RIVIERA BEACH, FL 34983	VARIOUS CUSTOMER SUPPLY MATERIALS	\$30,000.00
AMERIGEN PHARMACEUTICALS, 9 POLITO AVENUE, SUITE 900, LYNDHURST, NJ 07070	3874 FISCAL COURT, SUITE 200, RIVIERA BEACH, FL 34983	VARIOUS CUSTOMER SUPPLY MATERIALS	\$50,000.00

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

Site name and address

- Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

	contaminant, or a similar	ny manimal substance.		
•	as the debtor been a party	I proceedings known, regardless of when the in any judicial or administrative proceeding	=	clude settlements and
✓ N	0.			
☐ Y	es. Provide details below.			
Case	e title	Court or agency name and address	Nature of the case	Status of case
of an	environmental law?	otherwise notified the debtor that the debtor	may be liable or potentially liable	under or in violation
				D
Site	name and address	Governmental unit name and address	Environmental law, if known	Date of notice
23.1	Name SANCILIO & COMPANY, INC.	Name CITY OF WEST PALM BEACH, UTILITIES DEPARTMENT	INDUSTRIAL WASTEWATER DISCHARGE PERMIT #C10152012	03/15/2017
	Street 2121 N. CONGRESS AVENUE	Street 401 CLEMATIS STREET City State Zip		
	City State Zip RIVIERA FL 33404 BEACH	WEST PALM BEACH FL 33402		
№ N	0	governmental unit of any release of hazardo	us material?	
	es. Provide details below.			

Environmental law, if known

Date of notice

Governmental unit name and address

Case 18-11333-CSS Doc 73 Filed 06/26/18 Page 14 of 32 Details About the Debtor's Business or Connections to Any Business

25.Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name and address	Describe the nature of the business	Employer Identification number
		Do not include Social Security number or ITIN.
25.1 Name and Address BLUE PALM ADVERTISING AGENCY, LLC	WHOLLY-OWNED SUBSIDIARY	Dates business existed From APRIL 2013 to PRESENT
25.2 Name and Address SANCILIO MEDICAL TECHNOLOGY (SHANGHAI) CO., LTD	WHOLLY-OWNED SUBSIDIARY	Dates business existed From JUNE 2008 to PRESENT
25.3 Name and Address SANCILIO PHARMACEUTICALS PRIVATE LIMITED	WHOLLY-OWNED SUBSIDIARY	EIN N/A Dates business existed From MARCH 2014 to PRESENT

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address	Dates of service	
26a.1 Name and Address MARC WOLFF (FORMER CHIEF FINANCIAL OFFICER), 3122 SAN MICHELE DRIVE, PALM BEACH GARDENS, FL 33418	From JUNE 2016	to APRIL 2018
26a.2 Name and Address WILLIAM PHELAN (FORMER CHIEF ACCOUNTING OFFICER), 818 PARKRIDGE DRIVE, MEDIA, PA 19063	From JUNE 2016	to DECEMBER 2017
26a.3 Name and Address CHRISTINE CARSON (FORMER CONTROLLER), 14769 ENCLAVE LAKES DRIVE T3, DELRAY BEACH, FL 33484	From JUNE 2016	to DECEMBER 2017
26a.4 Name and Address SHAMIM TOPIWALA (CONTROLLER), 2129 N. CONGRESS AVE, RIVIERIA BEACH, FL 33404	From JANUARY 2018	to CURRENT
26a.5 Name and Address KARRILYN THOMAS (CHIEF FINANCIAL OFFICER), 2129 N. CONGRESS AVE, RIVIERIA BEACH, FL 33404	From APRIL 2018	to CURRENT

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name and address	Dates of service	
26b.1 Name and Address GRANT THORNTON LLP, PO BOX 532019, ATLANTA, GA 30353	From JUNE 2016 to	APRIL 2018

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26c. Li	ist all firms or individuals who were in possession of the debtor's one	books of account and r	ecords wher	n this case is filed.
Name	e and address		-	ks of account and records are e, explain why
-	Name and Address GRANT THORNTON LLP, PO BOX 532019, ATLANTA, GA 303	553		
	Name and Address BERKOWITZ POLLACK BRANT ADVISORS AND CONSULTA 200 SOUTH BISCAYNE BLVD, SIXTH & SEVENTH FLOORS,			
	ist all financial institutions, creditors, and other parties, including ent within 2 years before filing this case.	mercantile and trade ag	gencies, to w	hom the debtor issued a financial
Name	e and address			
	Name and Address MIDCAP FUNDING XVIII TRUST C/O MIDCAP FINANCIAL SERVICES, LLC 7255 WOODMONT AVENUE, SUITE 200, BETHESDA, MD 208	314		
AGRE	RIOUS THIRD PARTIES HAVE BEEN ISSUED FINANCIAL STA EMENTS, IN ASSOCIATION WITH GENERATING INTEREST Ventories any inventories of the debtor's property been taken within 2 year	IN THE POTENTIAL SA	ALE OF THE	
□ No				
✓ Ye	s. Give the details about the two most recent inventories.			
Name	e of the person who supervised the taking of the inventory	Date of inventory		amount and basis (cost, market, asis) of each inventory
GRAI	NT THORNTON, LLP	DECEMBER 2017	\$ <u>2,418,20</u> 2	2.00
Name	e and address of the person who has possession of inventory			
27.1	Name and Address GRANT THORNTON, LLP PO BOX 532019, ATLANTA, GA 30353-2019			
	Select From Name/Address List			
	st the debtor's officers, directors, managing members, gene people in control of the debtor at the time of the filing of thi		s in control,	controlling shareholders, or
Nam	e	Position and nature of interest	f any	% of interest, if any
28.1	Name and Address ALBERT CAVAGNARO, 2129 N. CONGRESS AVENUE, RIVIERA BEACH, FL 33404	CHIEF LEGAL OFFICE	ER	0%
28.2	Name and Address DENNIS LANGER, 12 CLEVELAND LANE, PRINCETON, NJ 08540	BOARD MEMBER		6% OF COMMON STOCK

	Case 18-11333-CSS D	oc 73	Filed 06/26/18	Page 16	of 32	
28.3	Name and Address GEOFFREY GLASS, 2129 N. CONGRESS AVENUE, RIVIERA BEACH, FL 33404	•	RESIDENT AND CHIE EXECUTIVE OFFICER	 -	0%	
28.4	Name and Address KARRILYN THOMAS, 2129 N. CONGRESS AVENUE, RIVIERA BEACH, FL 33404		CHIEF FINANCIAL OF	FICER	0%	
28.5	Name and Address PATRICK GRAY, 300 COMMERCIAL STREET, UNIT #6 BOSTON, MA 02109		BOARD MEMBER		5% OF CO	MMON STOCK
28.6	Name and Address SANCILIO PHARMACEUTICALS COMPANY, INC., 212 CONGRESS AVENUE, RIVIERA BEACH, FL 33404	29 N. <u>F</u>	PARENT COMPANY		100%	
mem	Vithin 1 year before the filing of this case, did the deb nbers in control of the debtor, or shareholders in cont No Yes. Identify below.				_	-
	ne and Address		Position and nature of interest	of any	Period dur	ing which position or as held
29.1	DR. FREDERICK SANCILIO, 63 ST. GEORGE PLACE, PALM BEACH GARDENS, FL 33418 JAMES GALE, SIGNET HEALTHCARE PARTNERS, CARNEGIE HA	LL TOWER,	PRESIDENT & CEO			015 - JANUARY 2018
29.2	152 WEST 57TH STREET, 59TH FLOOR, NEW YORK, NY 10019 MARC WOLFF, 3874 FISCAL COURT, SUITE 200, RIVIERA		BOARD MEMBER		2017 - JUNE	
29.3	BEACH, FL 34983 OSCAR GROET, O3 USA, INC., 794 SUNRISE BLVD.,		CHIEF FINANCIAL OFFICER		JANUARY 2015 - APRIL 2018	
29.4			BOARD MEMBER		JANUARY 2	2018 - MAY 2018
With bonu	Payments, distributions, or withdrawals credited or gi in 1 year before filing this case, did the debtor provide an ises, loans, credits on loans, stock redemptions, and opti	insider w	ith value in any form, i	ncluding sala	ry, other con	npensation, draws,
	es. Identify below.					
Nar	·		money or and value of	Dates		Reason for providing the value
30.1						
	<u> </u>					
Rela	ationship To Debtor					

^{**} SEE PART 2, QUESTION 4 FOR LISTING OF PAYMENTS, DISTRIBUTIONS, OR WITHDRAWALS CREDITED OR GIVEN TO INSIDERS.

Case 18-11333-CSS Doc 73 Filed 06/26/18 31.Within 6 years before filing this case, has the debtor been a member of any consolid No	Page 17 of 32 lated group for tax purposes?
Yes. Identify below.	
Name of the parent corporation	Employer Identification number of the parent corporation
31.1 SANCILIO PHARMACEUTICALS COMPANY, INC.	EIN 47-3943353
32. Within 6 years before filing this case, has the debtor as an employer been responsib ✓ No ✓ Yes. Identify below.	- '
Name of the pension fund	Employer Identification number of the pension fund

Fill in this information to identify the case:				
Debtor name: Sancilio & Company, Inc.				
United States Bankruptcy for the District of: Delaware				Check if this is
Case number (if known): 18-11334				an amended filing
Part 14: Signature and Declaration				
WARNING - Bankruptcy fraud is a serious crime. Making a false fraud in connection with a bankruptcy case can result in fines up §§ 152, 1341, 1519, and 3571. I have examined the information in this Statement of Financial Affair is true and correct. I declare under penalty of perjury that the foregoing is true and corre	ip to \$500,0	000 or imprisonment for u	p to 20 years, o	or both. 18 U.S.C
Executed on June 21, 2018 When Thomas Signature of individual signing on behalf of debtor	KARR Printed	ILYN THOMAS		
CHIEF FINANCIAL OFFICER				
Position or relationship to debtor				
Are additional pages to Statement of Financial Affairs for Non-	-Individuals	Filing for Bankruptcy (Of	ificial Form 207) attached?
□ No				

Yes

Ŀ					
Number					
Line	Name	Address	Description	Date of	Amount
3.1	ACCOUNTING PRINCIPAL	Address DEPT CH 14031, PALATINE, IL 60055	Description SUPPLIERS AND VENDORS	Payment 03/12/2018	\$6,810.17
3.2	ACCOUNTING PRINCIPAL ACCOUNTING PRINCIPAL	DEPT CH 14031, PALATINE, IL 60055	SUPPLIERS AND VENDORS	04/02/2018	\$7,090.04 \$3,824.32
3.3	ACCOUNTING PRINCIPAL ACCOUNTING PRINCIPAL	DEPT CH 14031, PALATINE, IL 60055 DEPT CH 14031, PALATINE, IL 60055	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	04/25/2018 05/01/2018	\$3,731.60
3.5	ACCOUNTING PRINCIPAL	DEPT CH 14031, PALATINE, IL 60055	SUPPLIERS AND VENDORS	05/08/2018	\$3,731.60
3.6	ACCOUNTING PRINCIPAL ACCOUNTING PRINCIPAL	DEPT CH 14031, PALATINE, IL 60055 DEPT CH 14031, PALATINE, IL 60055	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/16/2018 05/22/2018	\$3,731.60 \$3,762.87
3.8	ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - HSA EMPLOYER	03/09/2018	
3.9		PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - 401K	03/16/2018	
	ADP SCREENING AND SELECTION SERVICES ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177 PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - ADP FEES PAYROLL DEDUCTIONS - HSA EMPLOYEE	03/16/2018 03/16/2018	
3.12		PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - ADP FEES	03/23/2018	
	ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - FSA	03/24/2018	\$1,421.60
	ADP SCREENING AND SELECTION SERVICES ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177 PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - 401K PAYROLL DEDUCTIONS - ADP FEES	03/30/2018 03/30/2018	\$9,711.75 \$1,981.30
	ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - HSA EMPLOYEE	03/30/2018	
	ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - WAGE WORK FEES	03/30/2018	
3.18	ADP SCREENING AND SELECTION SERVICES ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177 PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - 401K PAYROLL DEDUCTIONS - ADP FEES	04/13/2018 04/13/2018	\$10,387.76 \$1,498.97
3.20	ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - HSA EMPLOYEE	04/13/2018	\$2,404.56
	ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - ADP FEES	04/20/2018	
	ADP SCREENING AND SELECTION SERVICES ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177 PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - HSA EMPLOYER PAYROLL DEDUCTIONS - 401K	04/20/2018 04/27/2018	\$5,516.61 \$9,755.54
	ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - 40TK PAYROLL DEDUCTIONS - ADP FEES	04/27/2018	
	ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - HSA EMPLOYEE	04/27/2018	
3.26	ADP SCREENING AND SELECTION SERVICES ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177 PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - WAGE WORK FEES PAYROLL DEDUCTIONS - ADP FEES	04/27/2018 05/04/2018	\$50.00 \$12.93
3.28		PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - 401K	05/11/2018	
3.29	ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - ADP FEES	05/11/2018	\$1,461.50
	ADD SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177 PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - HSA EMPLOYEE	05/11/2018	\$2,199.25
3.31	ADP SCREENING AND SELECTION SERVICES ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177 PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - HSA EMPLOYER PAYROLL DEDUCTIONS - 401K	05/17/2018 05/24/2018	\$5,429.11 \$8,780.68
	ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - HSA EMPLOYEE	05/24/2018	
	ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - WAGE WORK FEES	05/24/2018	\$50.00
3.35	ADP SCREENING AND SELECTION SERVICES ADP SCREENING AND SELECTION SERVICES	PO BOX 645177, CINCINNATI, OH 45264-5177 PO BOX 645177, CINCINNATI, OH 45264-5177	PAYROLL DEDUCTIONS - 401K PAYROLL DEDUCTIONS - HSA EMPLOYEE	06/05/2018 06/05/2018	
	AIRGAS - 1193643	AIRGAS USA, LLC PNC BANK, PO BOX 532609, ATLANTA, GA 30353-2609	SUPPLIERS AND VENDORS	04/17/2018	\$729.27
3.38	AIRGAS - 1193643	AIRGAS USA, LLC PNC BANK, PO BOX 532609, ATLANTA, GA 30353-2609 AIRGAS USA, LLC PNC BANK, PO BOX 532609, ATLANTA,	SUPPLIERS AND VENDORS	04/25/2018	\$313.06
3.39	AIRGAS - 1193643	GA 30353-2609 AIRGAS USA, LLC PNC BANK, PO BOX 532609, ATLANTA,	SUPPLIERS AND VENDORS	05/01/2018	\$407.84
3.40	AIRGAS - 1193643	GA 30353-2609 AIRGAS USA, LLC PNC BANK, PO BOX 532609, ATLANTA, BARGAS USA, LLC PNC BANK, PO BOX 532609, ATLANTA,	SUPPLIERS AND VENDORS	05/08/2018	\$639.24
3.41	AIRGAS - 1193643	GA 30353-2609 10 INVERNESS CENTER PKWY, STE 110, BIRMINGHAM,	SUPPLIERS AND VENDORS	05/16/2018	\$313.06
3.42	ALABAMA STATE BOARD OF PHARMACY	AL 35242	SUPPLIERS AND VENDORS	05/01/2018	\$50.00
3.43	ALABAMA-FEDERAL	ALABAMA MEDICAID AGENCY, ATTN: DRUG REBATE/ACCOUNTS RECEIVABLE501, DEXTER AVENUE, PO BOX 5624, MONTGOMERY, AL 36103-5624	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$119.14
		STATE OF ALASKA DEPT. OF HEALTH AND SOCIAL			
	ALASKA MEDICAID	SERVICES, PO BOX 84991, SEATTLE, WA 98124-6291 12260 SW 53RD ,ST #501B , FORT LAUDERDALE, FL	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$88.56
	ALL STATE INSURANCE	33404 12260 SW 53RD ,ST #501B , FORT LAUDERDALE, FL	SUPPLIERS AND VENDORS	03/08/2018	\$628.17
	ALL STATE INSURANCE	33404 12260 SW 53RD ,ST #501B , FORT LAUDERDALE, FL	SUPPLIERS AND VENDORS	04/06/2018	\$628.13
	ALL STATE INSURANCE	33404 ATTN: PAYMENT PROCESSING CENTER, PO BOX 650514,	SUPPLIERS AND VENDORS	05/07/2018	
	ALLSTATE BENEFITS	DALLAS, TX 75265-0514 ATTN: PAYMENT PROCESSING CENTER, PO BOX 650514,	SUPPLIERS AND VENDORS	04/05/2018	\$4,279.00
	ALLSTATE BENEFITS AMAZON SELLER REPAY	DALLAS, TX 75265-0515 410 TERRY AVE NORTH, SEATTLE, WA 98109	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/07/2018 05/08/2018	\$4,205.08 \$117.30
3.51	AMERICAN EXPRESS-31003	AMERICAN EXPRESS, PO BOX 650448, DALLAS, TX 75265- 0448	SUPPLIERS AND VENDORS	03/19/2018	\$16,365.01
3.52	AMERICAN EXPRESS-31003	AMERICAN EXPRESS, PO BOX 650448, DALLAS, TX 75265- 0449	SUPPLIERS AND VENDORS	04/16/2018	\$46,601.99
	AMERICAN EXPRESS-31003	AMERICAN EXPRESS, PO BOX 650448, DALLAS, TX 75265- 0450	SUPPLIERS AND VENDORS	05/03/2018	\$1,208.28
	ANALYTICAL INSTRUMENTATION SERVICES INC.	220 MILL CREEK RD SE, BOLIVIA, NC 28422 ATTN: ROBERT ALEXANDER, PO BOX 499125, EVERETT,	SUPPLIERS AND VENDORS	05/11/2018	.,,
	ANDLER PACKAGING	MA 02149 ATTN: ROBERT ALEXANDER, PO BOX 499125, EVERETT,	SUPPLIERS AND VENDORS	04/17/2018	\$22,079.90
	ANDLER PACKAGING	MA 02150 ATTN: ROBERT ALEXANDER, PO BOX 499125, EVERETT,	SUPPLIERS AND VENDORS	04/25/2018	\$29,457.50
	ANDLER PACKAGING	MA 02151 ATTN: ROBERT ALEXANDER, PO BOX 499125, EVERETT,	SUPPLIERS AND VENDORS	05/01/2018	\$7,831.55
	ANDLER PACKAGING	MA 02152 ATTN: ROBERT ALEXANDER, PO BOX 499125, EVERETT,	SUPPLIERS AND VENDORS	05/08/2018	\$12,794.40
3.59	ANDLER PACKAGING	MA 02153	SUPPLIERS AND VENDORS	05/16/2018	\$16,568.30

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Line Number	Name	Address	Description	Date of Payment	Amount
	Name	AHCCCS ATTN: STATE OF ARIZONA, PO BOX 741573,	Description	Fayinent	Amount
3 60	ARIZONA - FEDERAL	ATTN: AZ MEDICAID FFS PROG.DRUG REBATE, ATLANTA, GA 30374	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$15.19
		STATE OF ARIZONA-AHCCCS ATTN: AZ/ MCO DRUG		03/20/2010	
3.61	ARIZONA MCO	REBATE, PO BOX 741573, ATLANTA, GA 30374 ARKANSAS DEPT OF HEALTH & HUMAN SVCS, BANK OF	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$627.10
		AMERICA LOCKBOX SERVICES, ATTN: AR MEDICAID FFS			
	ADVANAG FEDERAL	DRUG REBATE, PO BOX 505297 , ST. LOUIS, MO 63150-	MEDICALD DOUG DEDATE DOCCDAM DAVAGENT		
3.62	ARKANAS-FEDERAL	5297 ARKANSAS DEPT OF HUMAN SVCS BANK OF AMERICA	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$98.86
		LOCKBOX SERVICES, PO BOX 505297, ST. LOUIS, MO			
	ARKANSAS FEDERAL EXPANSION ASCENTIUM CAPITAL LLC.	63150 PO BOX 301593, DALLAS, TX 75303-1593	MEDICAID DRUG REBATE PROGRAM PAYMENT SUPPLIERS AND VENDORS	03/26/2018 03/16/2018	\$6.93 \$4.773.00
	ASCENTIUM CAPITAL LLC.	PO BOX 301593, DALLAS, TX 75303-1593	SUPPLIERS AND VENDORS	04/16/2018	\$4,773.00
	ASCENTIUM CAPITAL LLC.	PO BOX 301593, DALLAS, TX 75303-1595	SUPPLIERS AND VENDORS	05/16/2018	\$4,773.00
3.67	AT&T	PO BOX 5014, CAROL STREAM, IL 60197-5014 PO BOX 5014, CAROL STREAM, IL 60197-5015	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/07/2018 05/07/2018	\$51.56 \$312.50
3.69	AUTOMATION DIRECT (ONLINE)	3505 HUTCHINGSON RD, CUMMING, GA 30040	SUPPLIERS AND VENDORS	05/12/2018	\$35.50
3.70	BERLIN PACKAGING, LLC	PO BOX 95584, CHICAGO, IL 60694-5584	SUPPLIERS AND VENDORS	05/16/2018	\$3,481.74
3.71	BISWAS, AMRITA	7140 COLONY CLUB DR, APT 310, LAKE WORTH, FL 33463	EXPENSE REIMBURSEMENT	04/12/2018	\$615.40
0.70	DI II CANCILIO COM	10 CORPORATE DRIVE, SUITE 300, BURLINGTON, MA	CLIPPLIEDS AND VENDORS	05/40/0040	\$25.00
3.72	BLU SANCILIO.COM	01803 ACCOUNTING SECTION MEDI-CAL DRUG REBATE ACCTS	SUPPLIERS AND VENDORS	05/13/2018	\$35.99
		RECEIVABLE, MS 1101, PO BOX 997413, SACRAMENTO,			
3.73	CALIFORNIA COHS	CA 95899 DEPARTMENT OF HEALTHCARE SERVICES ACCOUNTING	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$1,967.74
		SECTION / MEDI-CAL DRUG REBATE ACCOUNTS			
0.74	OALIFORNIA COLIDACA EVE	RECEIVABLE, MS1101, PO BOX 997413, SACRAMENTO,	MEDICALD DOUG DEDATE DOCCDAM DAVAGENT	00/00/0040	* 07.00
3.74	CALIFORNIA COHS ACA EXP	CA 95899 CALIFORNIA MCO ACCOUNTS RECEIVABLE, PO BOX	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$27.20
3.75	CALIFORNIA MCO	997413, SACRAMENTO, CA 95899-7413	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$7,215.64
		DEPARTMENT OF HEALTHCARE SERVICES ACCOUNTINF SECTION /MEDI-CAL DRUG REBATE ACCOUNT			
		RECEIVBLES, 1101, PO BOX 997413 SACRAMENTO, CA			
3.76	CALIFORNIA MCO ACA EXP	95899	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$100.70
		ACCOUNTING SECTION MEDI-CAL DRUG REBATE ACCOUNTS RECEIVABLE, MS 1101, PO BOX 997413,			
3.77	CALIFORNIA MEDICAID	SACRAMENTO, CA 95899-7413	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$769.25
		DEPARTMENT OF HEALTHCARE SERVICES ACCOUNTING SECTION/MEDI-CAL DRUG REBATE ACCOUNTS			
		RECEIVABLE, MS 1101, PO BOX 997413, SACRAMENTO,			
	CALIFORNIA MEDICAID ACA EXP	CA 95899	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$3.29
	CASSEL SALPERETER & CO CATO RESEARCH	801 BRICKELL AVENUE, SUITE 1900, MIAMI, FL 33131 PO BOX 890127, CHARLOTTE, NC 28289-0127	PROFESSIONAL FEES SUPPLIERS AND VENDORS	06/04/2018 04/02/2018	\$150,000.00 \$34,633.34
3.81	CATO RESEARCH	PO BOX 890127, CHARLOTTE, NC 28289-0128	SUPPLIERS AND VENDORS	04/17/2018	\$42,737.00
	CATO RESEARCH CATO RESEARCH	PO BOX 890127, CHARLOTTE, NC 28289-0129 PO BOX 890127, CHARLOTTE, NC 28289-0130	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/01/2018 05/16/2018	\$34,633.34 \$45,000.00
	CHASE	270 PARK AVE., NEW YORK, NY 10017	BANK FEES	01/05/2018	\$125.00
	CHASE	270 PARK AVE., NEW YORK, NY 10017	BANK FEES	01/19/2018	\$2,353.54
	CHASE CHASE	270 PARK AVE., NEW YORK, NY 10017 270 PARK AVE., NEW YORK, NY 10017	BANK FEES BANK FEES	02/16/2018 03/03/2018	\$2,411.21 \$500.00
3.88	CHASE	270 PARK AVE., NEW YORK, NY 10017	BANK FEES	03/16/2018	\$3,164.35
	CHASE CHASE	270 PARK AVE., NEW YORK, NY 10017 270 PARK AVE., NEW YORK, NY 10017	BANK FEES BANK FEES	04/06/2018 04/20/2018	\$125.00 \$2,935.45
	CHASE	270 PARK AVE., NEW YORK, NY 10017	BANK FEES	05/17/2018	\$3,140.42
3.92	CHASE	270 PARK AVE., NEW YORK, NY 10017 30-5 DONGSUNONGGONGDANJI-GIL NAJU. SOUTH	BANK FEES	06/15/2018	\$2,414.09
3.93	CHEMPORT INC.	JEOLLIA PROVINC 520330, KOREA	SUPPLIERS AND VENDORS	03/12/2018	\$22,000.00
3.94	CIGNA DENTAL	CHLIC, PO BOX 644546, PITTSBURGH, PA 15264-4546	SUPPLIERS AND VENDORS	03/12/2018	\$10,094.61
	CIGNA DENTAL CIGNA DENTAL	CHLIC, PO BOX 644546, PITTSBURGH, PA 15264-4547 CHLIC, PO BOX 644546, PITTSBURGH, PA 15264-4548	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	04/12/2018 05/14/2018	\$2,963.75 \$3,144.49
0.00	OIOIN BEITHE		OOT ELENOTING VEHICLE	00/14/2010	ψο, 144.40
2.07	CIGNA HEALTHCARE	ATTN: KATHY WAGNER, 1571 SAWGRASS CORPORATE PARKWAY, SUITE 140, SUNRISE, FL 33323	SUPPLIERS AND VENDORS	03/20/2018	#65 465 00
3.97	CIGNA REALI ROAKE	PARRWAT, SUITE 140, SUNRISE, FL 33323	SUPPLIERS AND VENDORS	03/20/2018	\$65,465.30
		ATTN: KATHY WAGNER, 1571 SAWGRASS CORPORATE			
3.98	CIGNA HEALTHCARE	PARKWAY, SUITE 140, SUNRISE, FL 33324	SUPPLIERS AND VENDORS	04/20/2018	\$88,884.76
		ATTN: KATHY WAGNER, 1571 SAWGRASS CORPORATE			
	CIGNA HEALTHCARE CITY OF RIVIERA BEACH	PARKWAY, SUITE 140, SUNRISE, FL 33325 PO BOX 628320, ORLANDO, FL 32862-8320	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/22/2018 03/20/2018	\$68,748.04
	CITY OF RIVIERA BEACH	PO BOX 628320, ORLANDO, FL 32862-8320 PO BOX 628320, ORLANDO, FL 32862-8321	SUPPLIERS AND VENDORS	03/20/2018	\$375.14 \$355.83
	CITY OF RIVIERA BEACH	PO BOX 628320, ORLANDO, FL 32862-8322	SUPPLIERS AND VENDORS	05/11/2018	\$365.49
3 103	CLARUSONE SOURCING SERVICES LLP	RUSSELL SQUARE HOUSE 10-12 RUSSELL SQUARE, LONDON WC1B 5EH, UNITED KINGDOM	SUPPLIERS AND VENDORS	03/07/2018	\$25,105.00
200		COLORADO DEPARTMENT OF HEALTH CARE POLICY,		55/01/2010	Ψ20,100.00
3 104	CO MCO CHIP	ATTN: CO MCO CHIP PROGRAM DRUG REBATE, PO BOX 5897, DENVER, CO 80217-5897	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	en 42
3.105	COCILOVA, COURTNEY	300 SW 15TH DR, BOCA RATON, FL 33432	EXPENSE REIMBURSEMENT	03/26/2018	\$0.12 \$61.56
	COCILOVA, COURTNEY	300 SW 15TH DR, BOCA RATON, FL 33432	EXPENSE REIMBURSEMENT	04/25/2018	\$229.77

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Line Numbe					
ine l	Mana	Address	Dannington.	Date of	A4
	Name	Address COLORADO DEPARTMENT OF HEALTH CARE POLICY &	Description	Payment	Amount
3 107	COLORADO FFS CHIP	FINANCING, ATTN: CO MEDICAID CHIP PROGRAM DRUG REBAT, PO BOX 5897, DENVER, CO 80217-5897	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$10.43
3.107	COLONADO 11 O CIIII		WEDICAID DIGG REDATE I ROGRAWIT ATWIENT	03/20/2010	ψ10. 4 3
		COLORADO DEPARTMENT OF HEALTH CARE POLICY & FINANCING, ATTN:CO MEDICAID EXPANSION PROGRAM			
3.108	COLORADO FFS EXPANSION	DRUG, PO BOX 5897, DENVER, CO 80217-5897	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$57.50
		COLORADO DEPARTMENT OF HEALTH CARE POLICY &			
0.400	COLORADO FFS INH	FINANCING, ATTN: CO MEDICAID INH PROGRAM DRUG	MEDICAID DRUG REBATE PROGRAM PAYMENT	00/00/0040	64.70
3.109	COLORADO FFS INFI	REBATE, PO BOX 5897, DENVER, CO 80217-5897 CO DEPT OF HEALTHCARE POLICY & FINANCING, ATTN:	MEDICAID DRUG REBATE PROGRAM PATMENT	03/26/2018	\$1.76
2 1 1 0	COLORADO MANACER CARE (MCO)	CO MCO MEDICAID PROGRAM DRUG REBATE, POBOX	MEDICAID DRUG BEDATE DROCDAM DAVMENT	02/26/2010	¢4.60
3.110	COLORADO MANAGED CARE (MCO)	5897, DENVER, CO 80217-5897	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$1.63
		COLORADO DEPARTMENT OF HEALTH CARE POLICY & FINANCING, ATTN:CO MCO EXPANSION PROGRAM DRUG			
3.111	COLORADO MCO EXPANSION	REBATE, PO BOX 5897, DENVER, CO 80217-5897	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$0.58
		COLORADO DEPARTMENT OF HEALTH CARE POLICY &			
		FINANCING, ATTN: CO MEDICAID NNE PROGAM DRUG			
	COLORADO-FFS NNE COMCAST BUSINESS	REBATE, PO BOX 5897, DENVER, CO 80217-5897 COMCAST, PO BOX 105184, ATLANTA, GA 30348-5184	MEDICAID DRUG REBATE PROGRAM PAYMENT SUPPLIERS AND VENDORS	03/26/2018 04/04/2018	\$0.47 \$249.58
	COMCAST BUSINESS	COMCAST, PO BOX 105184, ATLANTA, GA 30348-5184	SUPPLIERS AND VENDORS	05/04/2018	\$129.41
	COMCAST MONETARY DR	COMCAST, PO BOX 105184, ATLANTA, GA 30348-5184	SUPPLIERS AND VENDORS	05/04/2018	\$275.60
	COMCAST-3900 FISCAL COMCAST-3900 FISCAL	COMCAST, PO BOX 105184, ATLANTA, GA 30348-5184 COMCAST, PO BOX 105184, ATLANTA, GA 30348-5184	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	04/04/2018 05/04/2018	\$235.90 \$245.90
3.118	CORPORATION SERVICE COMPANY	PO BOX 13397, PHILADELPHIA, PA 19101-3397	SUPPLIERS AND VENDORS	04/17/2018	\$805.12
	CORPORATION SERVICE COMPANY	PO BOX 13397, PHILADELPHIA, PA 19101-3398	SUPPLIERS AND VENDORS	05/01/2018	\$2,752.64
	CORPORATION SERVICE COMPANY CRODA INC.	PO BOX 13397, PHILADELPHIA, PA 19101-3399 PO BOX 416595, BOSTON, MA 02241	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/16/2018 05/08/2018	\$1,062.68 \$541.00
		CONGRESS PARK POA, C/O CROMWELL REALTY			***
3.122	CROMWELL REALTY SERVICES	SERVICES, 905 US HIGHWAY 1, STE G, LAKE PARK, FL 33404	SUPPLIERS AND VENDORS	05/16/2018	\$1,129.85
	CYNTHIA GUERRA	927 WEST POLO GROUNDS DR., VERO BEACH, FL 32966	SUPPLIERS AND VENDORS	04/03/2018	\$4,485.00
3.124	CYNTHIA GUERRA	927 WEST POLO GROUNDS DR., VERO BEACH, FL 32966 ACS STATE HEALTHCARE, DRUG REBATE PROGRAM, PO	SUPPLIERS AND VENDORS	05/09/2018	\$4,481.66
3.125	DC MCO	BOX 34722, WASHINGTON, DC 20043 XEROX STATE OF HEALTHCARE, PO BOX 34722,	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$111.69
3.126	DC MCO CHIP	WASHINGTON, DC 20043-4722	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$2.82
3 127	DC-FEDERAL	ACS STATE HEALTHCARE, DRUG REBATE PROGRAM, PO BOX 34722, WASHINGTON, DC 20043	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$43.70
	DE LAGE LANDEN FINANCIAL SERVICES, INC	PO BOX 41602, PHILADELPHIA, PA 19101-1602	SUPPLIERS AND VENDORS	04/03/2018	\$917.07
3.129	DE LAGE LANDEN FINANCIAL SERVICES, INC	PO BOX 41602, PHILADELPHIA, PA 19101-1603	SUPPLIERS AND VENDORS	05/04/2018	\$8,321.32
3.130	DEDICATEDIT	8895 N. MILITARY TRAIL, SUITE 303C, PALM BEACH GARDENS, FL 33410	SUPPLIERS AND VENDORS	04/25/2018	\$2,031.44
2 121	DEDICATEDIT	8895 N. MILITARY TRAIL, SUITE 303C, PALM BEACH GARDENS, FL 33410	SUPPLIERS AND VENDORS	05/08/2018	\$9,139.50
3.131	DEDICATEDIT	DELAWARE SECRETARY OF STATE STATE OF	SOFFLIERS AND VENDORS	03/08/2018	φθ, 139.30
2 122	DELAWARE SECRETARY OF STATE	DELAWARE DIV OF CORP'S, PO BOX 5509, BINGHAMTON, NY 13902-5509	TAYES	05/22/2019	¢10.762.90
3.132	DELAWARE SECRETARY OF STATE	8292 CALABRIA LAKES DRIVE, BOYNTON BEACH, FL	TAXES	05/22/2018	\$10,763.89
3.133	DELLARCIPRETE, MICHAEL	33473 1940 NORTH MONROE STREET, TALLAHASSEE, FL 32399-	EXPENSE REIMBURSEMENT	03/26/2018	\$74.00
3.134	DEPT OF BUSINESS AND PROF REG FL	1047	SUPPLIERS AND VENDORS	05/01/2018	\$30.00
3.135	DESIGNERS PRESS, INC.	PO BOX 824263, PHILIADELPHIA, PA 19182-4263 D.C TREASURER, MEDICAL ASSISTANCE ADMIN XERON	SUPPLIERS AND VENDORS	04/17/2018	\$957.65
		SATE HEALTHCARE, PO BOX 34722, WASHINGTON, DC			
3.136	DISTRICT OF COLUMBIA EARLY OPTION MCO	20043-4722	SUPPLIERS AND VENDORS	04/13/2018	\$25.54
3 137	DOERR'S TRAILERS, LLC	829 BENOIST FARMS ROAD, WEST PALM BEACH, FL 33411	SUPPLIERS AND VENDORS	05/08/2018	\$460.50
	DONNELLEY FINANCIAL, LLC	PO BOX 531832, ATLANTA, GA 30353-1832	SUPPLIERS AND VENDORS	05/01/2018	\$2,725.00
	DR. AHMED DAAK DR. AHMED DAAK	10 SEAPORT DRIVE, APT 2312, QUINCY, MA 02171	EXPENSE REIMBURSEMENT	05/08/2018	\$913.43
	DSM NUTRITIONAL PRODUCTS	10 SEAPORT DRIVE, APT 2312, QUINCY, MA 02171 3927 COLLECTION CENTER DRIVE, CHICAGO, IL 60693	EXPENSE REIMBURSEMENT SUPPLIERS AND VENDORS	05/16/2018 03/12/2018	\$626.58 \$24,187.50
3.142	DSM NUTRITIONAL PRODUCTS	3927 COLLECTION CENTER DRIVE, CHICAGO, IL 60693	SUPPLIERS AND VENDORS	04/25/2018	\$1,499.02
	DSM NUTRITIONAL PRODUCTS ESTES EXPRESS LINES	3927 COLLECTION CENTER DRIVE, CHICAGO, IL 60693 PO BOX 25612, RICHMOND, VA 23260-5612	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/08/2018 04/17/2018	
	ESTES EXPRESS LINES	PO BOX 25612, RICHMOND, VA 23260-5613	SUPPLIERS AND VENDORS	04/17/2018	\$2,009.58
3.146	ESTES EXPRESS LINES	PO BOX 25612, RICHMOND, VA 23260-5614	SUPPLIERS AND VENDORS	05/01/2018	\$1,288.16
	ESTES EXPRESS LINES ESTES EXPRESS LINES	PO BOX 25612, RICHMOND, VA 23260-5615 PO BOX 25612, RICHMOND, VA 23260-5616	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/08/2018 05/16/2018	\$870.07 \$1,337.40
3.149	EUROFIN LANCASTER LABORATORIES, INC.	2425 NEW HOLLAND PIKE, LANCASTER, PA 17601	SUPPLIERS AND VENDORS	06/04/2018	\$9,937.50
	EUROFINS LANCASTER LABORATORIES, INC.	2425 NEW HOLLAND PIKE, LANCASTER, PA 17601	SUPPLIERS AND VENDORS	03/14/2018	\$159.00
	EXECUTIVE COFFEE SERVICE, INC EXECUTIVE COFFEE SERVICE, INC	PO BOX 2326, WEST PALM BEACH, FL 33402 PO BOX 2326, WEST PALM BEACH, FL 33403	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	03/15/2018 04/02/2018	\$192.54 \$160.45
	EXECUTIVE COFFEE SERVICE, INC	PO BOX 2326, WEST PALM BEACH, FL 33404	SUPPLIERS AND VENDORS	05/01/2018	\$160.45
3.154	FARMER, DAWN.	109 ALMERIA STREET, ROYAL PALM BEACH, FL 33411	EXPENSE REIMBURSEMENT	03/26/2018	\$116.49
3.155	FARMER, DAWN.	109 ALMERIA STREET, ROYAL PALM BEACH, FL 33411	EXPENSE REIMBURSEMENT	05/01/2018	\$51.62
J. 1JJ	Producting Drivers.	1.00 / EMERIN OTHER I, NOTAL I ALM DEADIN I E 33411	12.0 2.10E IVENIDOROENIENI	00/01/2010	ψυ 1.02

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	Name FEDEX	Address PO BOX 660481, DALLAS, TX 75266-0481	Description SUPPLIERS AND VENDORS	Payment 04/02/2018	\$15,821.35
3.157		PO BOX 660481, DALLAS, TX 75266-0482	SUPPLIERS AND VENDORS	04/17/2018	\$16,567.77
3.158	FEDEX	PO BOX 660481, DALLAS, TX 75266-0483	SUPPLIERS AND VENDORS	04/25/2018	\$17,358.97
	FEDEX	PO BOX 660481, DALLAS, TX 75266-0484	SUPPLIERS AND VENDORS	05/01/2018	\$6,063.91
	FEDEX FEDEX	PO BOX 660481, DALLAS, TX 75266-0485 PO BOX 660481, DALLAS, TX 75266-0486	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/08/2018 05/16/2018	\$5,684.75 \$7,880.16
	FEDEX 3661	PO BOX 660481, DALLAS, TX 75266-0481	SUPPLIERS AND VENDORS	04/17/2018	\$110.61
	FEDEX 3661	PO BOX 660481, DALLAS, TX 75266-0482	SUPPLIERS AND VENDORS	04/25/2018	\$237.69
	FEDEX 3661	PO BOX 660481, DALLAS, TX 75266-0483	SUPPLIERS AND VENDORS	05/01/2018	\$49.56
	FEDEX 3661	PO BOX 660481, DALLAS, TX 75266-0484	SUPPLIERS AND VENDORS	05/08/2018	\$178.16
	FEDEX 3661 FIRST INSURANCE FUNDING	PO BOX 660481, DALLAS, TX 75266-0485 PO BOX 7000, CAROL STREAM, IL 60197-7000	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/16/2018 04/03/2018	\$55.94 \$7,053.16
	FIRST INSURANCE FUNDING	PO BOX 7000, CAROL STREAM, IL 60197-7001	SUPPLIERS AND VENDORS	05/02/2018	\$7,053.16
	FIRST INSURANCE FUNDING	PO BOX 7000, CAROL STREAM, IL 60197-7002	SUPPLIERS AND VENDORS	06/04/2018	\$7,053.16
	FISHER SCIENTIFIC	ATTN: 963805, PO BOX 404705, ATLANTA, GA 30384-4705		04/25/2018	\$1,664.82
3.171	FISHER SCIENTIFIC	ATTN: 963805, PO BOX 404705, ATLANTA, GA 30384-4706	SUPPLIERS AND VENDORS	05/01/2018	\$2,907.34
	FISHER SCIENTIFIC	ATTN: 963805, PO BOX 404705, ATLANTA, GA 30384-4707		05/08/2018	\$665.59
3.173	FLORIDA DEPT. OF AG AND CONSUMER SERVICE	PO BOX 6720, TALLAHASSEE, FL 32314-6720	MEDICAID DRUG REBATE PROGRAM PAYMENT	05/01/2018	\$365.00
		ATTN: GLORIA COLLINS, AGENCY FOR HEALTHCARE ADMINISTRATION FINANCE & ACCTING/ DRUG REBATE, 2727 MAHAN DR. MAIL STOP #14, TALLAHASSEE, FL			
3.174	FLORIDA- MCO FEDERAL PHARMACY	32308	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$805.82
		AGENCY FOR HEALTH CARE ADMINISTRATION FINANCE & ACCOUNTING/DRUG REBATE, ATTN:GLORIA COLLINS, AGENCY FOR HEALTHCARE, 2727 MAHAN DRIVE, MAIL			
3.175	FLORIDA MEDICAID	STOP #14, TALLAHASSEE, FL 32308	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$42.52
	FOUNDATION FOR SICKLE CELL DISEASE	0101 111, 11120 11110022, 12 02000	SUPPLIERS AND VENDORS	05/25/2018	\$895.00
3.177		PO BOX 524013, MIAMI, FL 33152-4013	SUPPLIERS AND VENDORS	04/02/2018	\$17,685.61
3.178	FPL	PO BOX 524013, MIAMI, FL 33152-4014	SUPPLIERS AND VENDORS	05/01/2018	\$19,766.57
0.470	OFOROE DIMETA DOO OFOUNDE TEOU	ATTN: HENRI G. D'MEZA, 4932 122ND DR NORTH, WEST	OURDI IEDO AND VENDODO	05/40/0040	04.040.50
	GEORGE D'MEZA PRO SERVICE TECH GEORGIA MCO	PALM BEACH, FL 33411 PO BOX 741426, ATLANTA, GA 30349-1426	SUPPLIERS AND VENDORS MEDICAID DRUG REBATE PROGRAM PAYMENT	05/16/2018 04/13/2018	\$1,212.50 \$776.40
		GEORGIA DEPARTMENT OF COMMUNITY HEALTH, PO BOX 198194, ATLANTA, GA 30384-8194	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$156.06
	GEORGIA-FEDERAL FFSU OBRA) GLOBALTRANZ	PO BOX 203285, DALLAS, TX 75320-33285	SUPPLIERS AND VENDORS	04/17/2018	\$340.65
	GLOBALTRANZ	PO BOX 203285, DALLAS, TX 75320-33286	SUPPLIERS AND VENDORS	04/25/2018	\$890.02
3.184	GOOGLE		SUPPLIERS AND VENDORS	05/22/2018	\$500.00
3.185	GOOGLE		SUPPLIERS AND VENDORS	06/03/2018	\$500.00
3.186	GRAHAM, DAREN	5270 DESERT VIXEN ROAD, PALM BEACH GARDEN, FL 33418 DEPT. 868041575, PO BOX 419267, KANSAS CITY, MO	SETTLEMENT PAYMENT	03/29/2018	\$250,000.00
3.187	GRAINGER	64141-6267	SUPPLIERS AND VENDORS	04/25/2018	\$868.30
3.188	GRAINGER	DEPT. 868041575, PO BOX 419267, KANSAS CITY, MO 64141-6268	SUPPLIERS AND VENDORS	05/01/2018	\$1,401.60
		DEPT. 868041575, PO BOX 419267, KANSAS CITY, MO			
3.189	GRAINGER	64141-6269 ATTN: MATTHEW MILLER, 401 EAST LAS OLAS BLVD, STE	SUPPLIERS AND VENDORS	05/16/2018	\$111.55
3.190	GREENBURG TRAURIG, P.A.	2000, FORT LAUDERDALE, FL 33301 ATTN: MATTHEW MILLER, 401 EAST LAS OLAS BLVD, STE	PROFESSIONAL FEES	04/17/2018	\$50,000.00
3.191	GREENBURG TRAURIG, P.A.	2000, FORT LAUDERDALE, FL 33302 ATTN: MATTHEW MILLER, 401 EAST LAS OLAS BLVD, STE	PROFESSIONAL FEES	05/18/2018	\$225,000.00
3.192	GREENBURG TRAURIG, P.A.	2000, FORT LAUDERDALE, FL 33303 ATTN: MATTHEW MILLER, 401 EAST LAS OLAS BLVD, STE	PROFESSIONAL FEES	06/04/2018	\$75,000.00
3 193	GREENBURG TRAURIG, P.A.	2000, FORT LAUDERDALE, FL 33304	PROFESSIONAL FEES	06/04/2018	\$165,000.00
	HARBOR FREIGHT TOOLS	440 NORHTLAKE BLVD. LAKE PARK, FL 33408	SUPPLIERS AND VENDORS	05/31/2018	\$83.41
3.195	HARBOR FREIGHT TOOLS	440 NORHTLAKE BLVD. LAKE PARK, FL 33408	SUPPLIERS AND VENDORS	06/05/2018	\$28.23
3.196	HARDY DIAGNOSTICS	PO BOX 645264, CINCINNATI, OH 45264-5264	SUPPLIERS AND VENDORS	05/02/2018	\$1,044.75
3.197	HAWAII MEDICAID	XEROX STATE HEALTHCARE LLC, PO BOX 1480 , HONOLULU, HI 96807-1206 HAWAII MEDICAID FISCAL AGENT HAWAII MEDICAID	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$9.69
3.198	HAWAII-MCO	DRUG REBATES CONDUENT, PO BOX 1480, HONOLULU, HI 96806-1206	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$1,683.18
3.199	HOME DEPOT	3860 NORHTLAKE BLVD, PALM BEACH GARDEN, FL 33403	SUPPLIERS AND VENDORS	05/23/2018	\$54.77
	HOME DEPOT	3860 NORHTLAKE BLVD, PALM BEACH GARDEN, FL 33403		06/02/2018	\$828.38
	HULETT ENVIRONMENTAL SERVICES	PO BOX 220928, WEST PALM BEACH, FL 33422-0928	SUPPLIERS AND VENDORS	04/25/2018	\$484.71
3.202	HULETT ENVIRONMENTAL SERVICES	PO BOX 220928, WEST PALM BEACH, FL 33422-0929 1011 US ROUTE 22 WEST, SUITE 104, BRIDGEWATER, NJ	SUPPLIERS AND VENDORS	05/01/2018	\$1,505.49
3.203	ICONTRACTS, INC.	08807 MAGELLAN MEDICAID ADMINISTRATION, ATTN: FINANCE	SUPPLIERS AND VENDORS	05/08/2018	\$26,506.50
3.204	IDAHO-FEDERAL	DEPARTMENT, 11013 W. BROAD STREET, STE 500, GLEN ALLEN, VA 23060	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$470.90
		HEALTHCARE AND FAMILY SVCS RECOVERIES			
3.205	ILLINOIS-FEDERAL	UNIT/DRP, PO BOX 19107, SPRINGFIELD, IL 62794	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$369.96

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13-07 INDIVIDUAL		Name		Description	Fayinent	Amount
2020 NROWAGEL						
200 NOVINCEL						\$136.26 \$20.36
ATTN_LUB_LAPONT_14103 SW 118 AVE_MAMI_F_33105 SUPPLERS AND VENDORS 0.90420918 52	0.200	INDIVITAL EDETORE	20000 NETWORKT ENDE, OFFICEOUT 1200	INEDIO/IID DIGG RED/ITE I ROGIGIMI / TIMENT	04/10/2010	Ψ20.00
ATTN. LUB LAFONT, 14193 SW 119 AVE, MAMIL R. 2016	3.209	INNOVAGEL	ATTN: LUIS LAFONT, 14193 SW 119 AVE., MIAMI, FL 33186	SUPPLIERS AND VENDORS	03/29/2018	\$22,979.84
ATTN. LUB LAFONT, 14193 SW 119 AVE, MAMIL R. 2016	3.210	INNOVAGEL	ATTN: LUIS LAFONT. 14193 SW 119 AVE., MIAMI, FL 33187	SUPPLIERS AND VENDORS	04/25/2018	\$25,884.75
ATTH. LIBL ACOUT. FLORE OF THE SOT. AMERICA. NO. 200 WIST PARKWAY, SUIT SID. OF STANLESCHE. SUPPLIES AND VENDORS 06/22/2018 52						
231 NAGURANCE OFFICE OF AMERICA, NC. 1,24114 PARROWAY, SUITE 300, WEST PAM BEACH. 1,24114 SUPPLIERS AND VENDORS 0,122016 33 23 IN SUBJECTION OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 23 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 23 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 23 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 23 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 1,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 2,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 2,24114 SUPPLIERS AND VENDORS 0,0012016 3 24 IN SUBJECT OF AMERICA, NC. 2,241	3.211	INNOVAGEL	ATTN: LUIS LAFONT, 14193 SW 119 AVE., MIAMI, FL 33188	SUPPLIERS AND VENDORS	05/01/2018	\$24,132.67
SAZIA INSURANCE OFFICE OF AMERICA, INC.	3.212	INNOVAGEL	ATTN: LUIS LAFONT, 14193 SW 119 AVE., MIAMI, FL 33189	SUPPLIERS AND VENDORS	05/22/2018	\$77,359.35
2.714 AGURANCE OFFICE OF AMERICA, INC. 1. 2441 1. 2415 1. 2416 1	0.040	INCLIDANCE OFFICE OF AMERICA, INC.		CURRULERO AND VENDORO	00/40/0040	\$20,004.00
3211 INSURANCE OFFICE OF AMERICA, INC. 2008 VETA PARKWAY, SUITE 300, WEST PAUM BEACH. 2009 VETA PARKWAY, SUITE 300, WEST PAUM BEACH. 2019 VETA PAUM AND VETA PAUM AND VETA PAUM BEACH. 2019 VETA PAUM AND VETA PAUM AND VETA PAUM BEACH. 2019 VE	3.213	INSURANCE OFFICE OF AMERICA, INC.		SUPPLIERS AND VENDORS	03/12/2018	\$30,094.60
3215 INSURANCE OFFICE OF AMERICA, INC. IT. 33411 SURPLIERS AND VENDORS OS1402018 51	3.214	INSURANCE OFFICE OF AMERICA, INC.	FL 33411	SUPPLIERS AND VENDORS	05/08/2018	\$4,074.60
226 NAURANCE CEFICE OF AMERICA, INC. 2006 WITA PARKWAY, SULF 300, WEST PAUR BEACH. 500 AFFSU ORDAN 510 AFFSU O	2 215	INSTIDANCE OFFICE OF AMERICA INC		STIDDLIEDS AND VENDORS	05/16/2019	\$6,379.56
A MEDICADD ENTERPRISE, DRIVE REBATES, PO BOX MEDICAD DRIVE	3.213	INSURANCE OFFICE OF AWIERICA, INC.		SUFFLIERS AND VENDORS	03/10/2018	\$0,379.30
3211 DOWA FESU GBRA 31019. DES MONES, IA 5031-0199 DOWA MOD GBRA MARCHADE PREPARES ENUG REBATE, PO BOX MEDICAID DRUG REBATE PROGRAM PAYMENT 0,5062018	3.216	INSURANCE OFFICE OF AMERICA, INC.		SUPPLIERS AND VENDORS	05/31/2018	\$11,296.26
100M MEDICAD ENTERPRISE, DRUG REBATE, PO BOX MEDICAD DRUG REBATE PROGRAM PAYMENT 0608/2016	3 217	IOWA FESI LOBRA		MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$10.90
AMEDICAD ENTERPRISE, DRUG REBATE, PRODUCT REBATE, PRODUCT STATES, PO BOX 1919, DES MONRES & 1939-195 1900, DON INTERNATIONAL UMITED 1917, TO THE PROGRAM PAYMENT 0.528/2018 0.5076, PROPERTY RESTRICTURING 1921, DRUG REBATE PROGRAM PAYMENT 0.528/2018 0.5076, PROPERTY RESTRICTURING 1922, DRUG REBATE PROGRAM PAYMENT 0.508/2018 1922, DRUG REBATE PROGRAM PAYMENT 0.604/2018 1922, DRUG REBATE PROGRAM PAYMENT 0.608/2018 1922, DRUG REBATE PROGRAM PAYMEN	0.217	TOWN TO US OF THE TOWN TO US O			00/20/2010	ψ10.50
2210 DOWN-FEDERAL 310196, DES MONIES, IL 60031-0196 30076 2019 70076 700	3.218	IOWA MCO OBRA		MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$8.86
SUPPLEAS NOTE 1203 12F, RUTTONUE HOUSE 11 DUDOELL	3.219	IOWA-FEDERAL		MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$2.37
3222 NO CORPORATE RESTRUCTURING			SUITE 1203 12/F, RUTTONJEE HOUSE 11 DUDDELL			
1222 COMISON, SHARON						\$3,043.80 \$10,000.00
3.223 K.D. PHARMA BEXBACH GMBH BEXBACH, D. BEASO, C. BEMANY SUPPLIERS AND VENDORS 03/12/2018 312						\$471.72
DEPT. OF MEDICAD SVCS., 275 EAST MAIN ST 6W C, ATTN: MEDICAID DRUG REBATE; FRANKFORT, KY 40621 MEDICAID DRUG REBATE PROGRAM PAYMENT 05/08/2018						
3.225 KENTUCKY MCO	3.223	K.D PHARMA BEXBACH GMBH	BEXBACH, D-66450, GERMANY	SUPPLIERS AND VENDORS	03/12/2018	\$127,110.00
DEPT OF MEDICAID SVCS, 275 EAST MAIN ST 6W C . ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 MEDICAID DRUG REBATE; PROGRAM PAYMENT 05/08/2018 ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 MEDICAID DRUG REBATE; PROGRAM PAYMENT 05/18/2018 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C. ATTN: MEDICAID DRUG REBATE; FRAMKFORT, KY 40621 MEDICAID DRUG REBATE PROGRAM PAYMENT OF MAIN STREET, E. 34670 EXPENSE REMBURSEMENT OF MAIN STREET, E. 34670 OF MAIN STREET, E.						
2.225 KENTUCKY HUMANA	3.224	KENTUCKY COVENTRY	ATTN: MEDICAID DRUG REBATE, FRANKFORT, KY 40621	MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$42.63
2.225 KENTUCKY HUMANA			DEPT OF MEDICAID SVCS., 275 EAST MAIN ST 6W C.			
ATT:: MEDICAID DRUG REBATE, FRANKFORT, KY 40621 MEDICAID DRUG REBATE PROGRAM PAYMENT 05/16/2018 KENTUCKY MEDICAID STREET, 6W-C, FRANKFORT, KY 40621 MEDICAID DRUG REBATE PROGRAM PAYMENT 05/16/2018 TREASURER STATE OF KENTUCKY-MIN, 275 EAST MAIN MEDICAID DRUG REBATE PROGRAM PAYMENT 05/08/2018 ATT:: MEDICAID SVCS, 275 EAST MAIN ST 6W C, ATT:: MEDICAID DRUG REBATE, FRANKFORT, KY 40621 MEDICAID DRUG REBATE PROGRAM PAYMENT 05/08/2018 ATT:: MEDICAID DRUG REBATE, FRANKFORT, KY 40621 MEDICAID DRUG REBATE PROGRAM PAYMENT 05/08/2018 ATT:: MEDICAID DRUG REBATE, FRANKFORT, KY 40621 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 ATT:: MEDICAID DRUG REBATE, FRANKFORT, KY 40621 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 ATT:: DRUG REBATE PRO	3.225	KENTUCKY HUMANA	ATTN: MEDICAID DRUG REBATE, FRANKFORT, KY 40621	MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$21.04
3.226 KENTUCKY MCO			DEPT, OF MEDICAID SVCS, 275 FAST MAIN ST 6W C			
TREASURER STATE OF KENTUCKY MEDICAID STREET, BWC, FRANKFORT, KY 40621	3.226	KENTUCKY MCO		MEDICAID DRUG REBATE PROGRAM PAYMENT	05/16/2018	\$40.25
3.227 KENTUCKY MEDICAID STREET, 6W-C, FRANKFORT, KY 40621 MEDICAID DRUG REBATE PROGRAM PAYMENT 05/08/2018						
DEPT. OF MEDICAID SVCS, 275 EAST MAIN ST 6W C, ATTH: MEDICAID DRUG REBATE; FRANKFORT, KY 40621 MEDICAID DRUG REBATE PROGRAM PAYMENT 05/08/2018	3.227	KENTUCKY MEDICAID		MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$117.46
3.228 KENTUCKY WELLCARE						
DEPT OF MEDICAID SVCS., 275 EAST MAIN ST 6W C, ATTN: MEDICAID DRUG REBATE, FRANKFORT, KY 40621 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 3.231 KOLLER, VICTORIA 14510 867H RD N. LOXAHATCHEE, Ft. 33470 EXPENSE REIMBURSEMENT 0.5012/1018 3.231 KOLLER, VICTORIA 14510 867H RD N. LOXAHATCHEE, Ft. 33470 EXPENSE REIMBURSEMENT 0.502/2018 3.231 LEGALSHIELD PO BOX 2829, ADA, OK 74821-2829 SUPPLIERS AND VENDORS 0.402/2018 3.231 LEGALSHIELD PO BOX 2829, ADA, OK 74821-2830 SUPPLIERS AND VENDORS 0.6012/2018 3.231 LEGALSHIELD PO BOX 2629, ADA, OK 74821-2830 SUPPLIERS AND VENDORS 0.6012/2018 3.231 LEGALSHIELD PO BOX 2629, ADA, OK 74821-2830 SUPPLIERS AND VENDORS 0.6012/2018 3.231 LEGALSHIELD PO BOX 2629, ADA, OK 74821-2830 SUPPLIERS AND VENDORS 0.6012/2018 3.235 LEWIS, TOMMY 3.25 BEACH ROAD, UNIT 21, UPITER, Ft. 33469 EXPENSE REIMBURSEMENT 0.4712/2018 3.235 LEWIS, TOMMY 3.25 BEACH ROAD, UNIT 21, UPITER, Ft. 33469 EXPENSE REIMBURSEMENT 0.4712/2018 3.237 LEWIS, TOMMY 3.25 BEACH ROAD, UNIT 21, UPITER, Ft. 33469 EXPENSE REIMBURSEMENT 0.4712/2018 3.236 LIQUID WEB HOSTING 2703 ENA DR. LANSING, MI 48917 SUPPLIERS AND VENDORS 0.506/2018 3.239 LODOVICO, TONY 1.2 LITTLE HARBOR WAY, DEERFIELD BEACH, Ft. 33441 EXPENSE REIMBURSEMENT 0.4712/2018 3.236 LIQUID WEB HOSTING 2703 ENA DR. LANSING, MI 48917 SUPPLIERS AND VENDORS 0.506/2018 3.241 LOUISIANA MCO EXPANSION 6.2951, NEW ORLEANS, LA 70162-2951 MEDICAID DRUG REBATE PROGRAM PAYMENT 0.4713/2018 3.241 LOUISIANA MCO EXPANSION 6.2951, NEW ORLEANS, LA 70162-2951 MEDICAID DRUG REBATE PROGRAM PAYMENT 0.4713/2018 3.242 LOUISIANA MEDICAID 70162 MEDICAID DRUG REBATE PROGRAM PAYMENT 0.4713/2018 3.242 LOUISIANA MEDICAID DRUG REBATE PAYMENTS, ATTN: PHARMACY REBATE, PO BOX 62951, NEW ORLEANS, LA 70162 MEDICAID DRUG REBATE PROGRAM PAYMENT 0.4713/2018 3.244 LOWES 401 NORTH CONGRESS AVE, LAKE PARK F1.33403 SUPPLIERS AND VENDORS 0.5077/2018 3.245 LOWES 4	3 228	KENTLICKY WELL CARE		MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$79.70
3.229 KENTUCKY-FEDERAL	0.220	KENTOOKT WEELOAKE	ATTAL MEDICALD DIXOG REDATE, FRANKI OKT, KT 40021	MEDICAID DIGG REDATE I ROGRAMT ATMENT	03/00/2010	Ψ19.10
3230 KOLLER, VICTORIA		WENTHOW FEREN		MEDICAID DOUG DEDATE DOCCDAM DAVAGENT	0.4/4.0/004.0	00.40
3.231 KOLLER, VICTORIA						\$0.16 \$294.14
3.233 LEGALSHIELD	3.231	KOLLER, VICTORIA	14610 86TH RD N, LOXAHATCHEE, FL 33470	EXPENSE REIMBURSEMENT	05/22/2018	\$701.50
1208 SE FLEMING WAY, STUART, FL 34997 EXPENSE REIMBURSEMENT 04/12/2018						\$483.30 \$280.05
3.236 LEWIS, TOMMY 325 BEACH ROAD, UNIT 21, JUPITER, FL 33469 EXPENSE REIMBURSEMENT 0.4/12/2018 3.237 LEWIS, TOMMY 325 BEACH ROAD, UNIT 21, JUPITER, FL 33469 EXPENSE REIMBURSEMENT 0.5/16/2018 3.238 LIOUID WEB HOSTING 2703 ENA DR. LANSING, MI 48917 SUPPLIERS AND VENDORS 0.5/06/2018 3.239 LODOVICO, TONY 12 LITTLE HARBOR WAY, DEERFIELD BEACH, FL 33441 EXPENSE REIMBURSEMENT 0.4/12/2018 3.240 LOUISIANA MCO EXPANSION 62951, NEW ORLEANS, LA 70162-2951 LOUISIANA DEPARTMENT OF HEALTH& HOSPITALS, ATTN: DARA HORCASITAS-PHARMACY REBATE, PO BOX 62951, NEW ORLEANS, LA 70162-2951 MEDICAID DRUG REBATE PROGRAM PAYMENT 0.4/13/2018 3.241 LOUISIANA EXPANSION 62951, NEW ORLEANS, LA 70162-2951 MEDICAID DRUG REBATE PROGRAM PAYMENT 0.4/13/2018 3.242 LOUISIANA MEDICAID 70162 MEDICAID DRUG REBATE PROGRAM PAYMENT 0.4/13/2018 3.243 LOUISIANA MEDICAID 70162 MEDICAID DRUG REBATE PROGRAM PAYMENT 0.4/13/2018 3.244 LOUISIANA MEDICAID 70162 MEDICAID DRUG REBATE PROGRAM PAYMENT 0.4/13/2018 3.245 LOUISIANA-MCO REBATE PROBLEM REPORTS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 0.5/10/2018 3.244 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 0.5/10/2018 3.245 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 0.5/10/2018 3.246 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 0.5/10/2018 3.248 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 0.5/10/2018 3.248 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 0.5/10/2018 3.249 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 0.5/10/2018 3.249 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 0.5/10/2018 3.249 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 0.5/10/2018 3.249 MAINE MEDICAID 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDO						
3.237 LEWIS, TOMMY 325 BEACH ROAD, UNIT 21, JUPITER, FL 33469 EXPENSE REIMBURSEMENT 0.5/16/2018						\$489.97
3.238 LIQUID WEB HOSTING 2703 ENA DR. LANSING, MI 48917 SUPPLIERS AND VENDORS 0.5/08/2018						\$191.11 \$212.36
ATTN: DARA HOSCASITAS-PHARMACY REBATE, PO BOX 62951, NEW ORLEANS, LA 70162-2951 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 \$						
ATTN: DARA HOSCASITAS-PHARMACY REBATE, PO BOX 62951, NEW ORLEANS, LA 70162-2951 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 \$	2 222	LODOVICO TONY	12 LITTLE HARRON WAY DEEDELD DEADLE CO	EVDENCE DEIMBURGEMENT	04/40/0040	#000 00
3.240 LOUISIANA MCO EXPANSION 62951, NEW ORLEANS, LA 70162-2951 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 \$ ATTN: DARA HORCASITAS- PHARMACY REBATE, PO BOX 62951, NEW ORLEANS, LA 70162-2951 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 3.241 LOUSIANA EXPANSION 62951, NEW ORLEANS, LA 70162-2951 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 3.242 LOUSIANA MEDICAID 70162 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 3.243 LOUSIANA-MCO REBATE, PO BOX 62951, NEW ORLEANS, LA 70162 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 3.244 LOWES DHH DRUG REBATE PAYMENT, ATTN:-PHARMACY REBATE, PO BOX 62951, NEW ORLEANS, LA 70162 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 3.245 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/07/2018 3.246 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/14/2018 3.247 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/14/2018 3.248 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/14/2018 3.249 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/14/2018 3.248 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/14/2018 3.249 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/14/2018 3.249 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/14/2018 3.249 MAINE MEDICAID AUGUSTA, ME 04333-0011 MEDICAID DRUG REBATE PROGRAM PAYMENT 03/26/2018 3.249 MAINE MEDICAID AUGUSTA, ME 04333-0011 MEDICAID DRUG REBATE PROGRAM PAYMENT 03/26/2018 3.249 MAINE MEDICAID AUGUSTA, ME 04333-0011 MEDICAID DRUG REBATE PROGRAM PAYMENT 03/26/2018	ა.∠39	LODOVICO, TONY		EAPEINGE KEIMBUKGEMEN I	04/12/2018	\$232.38
ATTN: DARA HORCASITAS- PHARMACY REBATE, PO BOX MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018	3.240	LOUISIANA MCO EXPANSION	62951, NEW ORLEANS, LA 70162-2951	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$5,112.48
3.241 LOUSIANA EXPANSION 62951, NEW ORLEANS, LA 70162-2951 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018						
PHARMACY REBATE, PO BOX 62951, NEW ORLEANS, LA MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018	3.241	LOUSIANA EXPANSION		MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$0.12
3.242 LOUSIANA MEDICAID T0162 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018						
DHH DRUG REBATE PAYMENT, ATTN:-PHARMACY MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 \$ 3.244 LOUSIANA-MCO REBATE, PO BOX 62991, NEW ORLEANS, LA 70162 MEDICAID DRUG REBATE PROGRAM PAYMENT 04/13/2018 \$ 3.244 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/07/2018 \$ 3.245 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/14/2018 \$ 3.247 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/14/2018 \$ 3.247 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/21/2018 \$ 3.248 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 \$ 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 \$ 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 \$ 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 \$ 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 \$ 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 401	3 242	LOUSIANA MEDICAID		MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$29.47
3.244 LOWES			DHH DRUG REBATE PAYMENT, ATTN:-PHARMACY			
3.245 LOWES						\$1,450.78 \$44.66
3.246 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/14/2018 3.247 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 05/21/2018 3.248 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 3.248 LOWES DHHS RECEIVABLES - DRUG REBATE, C/O CASH DHHS RECEIVABLES - DRUG REBATE, C/O CASH RECEIPTS, SHS #11 SHS #11, 221 STATE STREET, 3.249 MAINE MEDICAID AUGUSTA, ME 04333-0011 MEDICAID DRUG REBATE PROGRAM PAYMENT 03/26/2018						
3.248 LOWES 401 NORTH CONGRESS AVE, LAKE PARK FL33403 SUPPLIERS AND VENDORS 06/04/2018 DHHS RECEIVABLES - DRUG REBATE, C/O CASH RECEIPTS, SHS #11 SHS #11, 221 STATE STREET, AUGUSTA, ME 04333-0011 MEDICAID DRUG REBATE PROGRAM PAYMENT 03/26/2018	3.246	LOWES	401 NORTH CONGRESS AVE, LAKE PARK FL33403	SUPPLIERS AND VENDORS	05/14/2018	\$82.34
DHHS RECEIVABLES - DRUG REBATE, C/O CASH RECEIPTS, SHS #11 SHS #11, 221 STATE STREET, 3.249 MAINE MEDICAID MEDICAID MEDICAID DRUG REBATE PROGRAM PAYMENT 03/26/2018						
3.249 MAINE MEDICAID MEDICAID MEDICAID DRUG REBATE PROGRAM PAYMENT 03/26/2018	J.240	201120	DHHS RECEIVABLES - DRUG REBATE, C/O CASH	COLLEGIO AND VENDONO	00/04/2010	φ <i>1</i> υ. 10
	2 2 4 2	MAINE MEDICAID		MEDICAID DRIVE DEPATE DROCDAY SAVASSIT	00/00/0045	#001 C-
						\$281.85 \$3,235.34

mber					
Line Numbe				Date of	
Lin	Name	Address MARYLAND MEDICAL ASSISTANCE RECOVERIES	Description	Payment	Amount
		MARYLAND MEDICAL ASSISTANCE RECOVERIES MEDICAID DRUG, REBATE PROGRAMS, PO BOX 17185,			
3.252	MARYLAND- ACA NEW ADULTS FFS	BALTIMORE, MD 21297-1185 MARYLAND MEDICAL ASSISTANCE RECOVERIES	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$6.26
0.050	MADVI AND ACANEW ADJUTO FFO	MEDICAID DRUG, REBATE PROGRAMS, PO BOX 17185,	MEDICALD DRUG DEDATE DROCDAM DAVAMENT	05/00/0040	60.05
3.253	MARYLAND- ACA NEW ADULTS FFS	BALTIMORE, MD 21297-1186 DIVISION OF RECOVERIES & FINANCIAL SVCS, ATTN:	MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$0.35
3 254	MARYLAND DHMH (STATE ONLY)	TPL/COB UNIT, PO BOX 17185, BALTIMORE, MD 21298- 9892	MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$0.43
0.204	WENTERNO BINNIT (OTATE ONE)	MD DHMH (MCHP FFS) MEDICAL ASSISTANCE	MEDIONID BROCKEBATE I ROOM WITH ATMENT	00/00/2010	ψ0.40
3.255	MARYLAND-CHILDRENS HEALTH PROG. MCHP FFS	RECOVERIES MEDICAID, DRUG REBATE PROGRAMS, PO BOX 17185, BALTIMORE, MD 21297-1185	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$1.09
		MD DHMH (MCHP FFS) MEDICAL ASSISTANCE			
3.256	MARYLAND-CHILDRENS HEALTH PROG. MCHP FFS	RECOVERIES MEDICAID, DRUG REBATE PROGRAMS, PO BOX 17185, BALTIMORE, MD 21297-1186	MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$7.25
3 257	MASSACHUSETTS MEDICAID-FFS	MASSHEALTH DRUG REBATE PROGRAM-FFS PROGRAM, PO BOX 3070, BOSTON, MA 02241-3070	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$1,336.20
		MASSHEALTH DRUG REBATE PROGRAM-MCO			
	MASSACHUSETTS MEDICAID-MCO MCA FINANCIAL GROUP, LTD	PROGRAM, PO BOX 417688, BOSTON, MA 02241-7688 4909 N 44TH ST, PHOENIX, AZ 85018	MEDICAID DRUG REBATE PROGRAM PAYMENT PROFESSIONAL FEES	04/13/2018 04/17/2018	\$1,588.60 \$10,000.00
3.260	MCA FINANCIAL GROUP, LTD	4909 N 44TH ST, PHOENIX, AZ 85018	PROFESSIONAL FEES	04/25/2018	\$19,062.58
	MCA FINANCIAL GROUP, LTD	4909 N 44TH ST, PHOENIX, AZ 85018	PROFESSIONAL FEES	05/02/2018	\$18,337.87
	MCA FINANCIAL GROUP, LTD MCA FINANCIAL GROUP, LTD	4909 N 44TH ST, PHOENIX, AZ 85018 4909 N 44TH ST, PHOENIX, AZ 85018	PROFESSIONAL FEES PROFESSIONAL FEES	05/09/2018 05/17/2018	\$16,309.66 \$17,760.51
	MCA FINANCIAL GROUP, LTD	4909 N 44TH ST, PHOENIX, AZ 85018	PROFESSIONAL FEES PROFESSIONAL FEES	05/18/2018	\$144,500.00
	MCA FINANCIAL GROUP, LTD	4909 N 44TH ST, PHOENIX, AZ 85018	PROFESSIONAL FEES	06/04/2018	\$50,000.00
3.266	MCMASTER-CARR SUPPLY CO.	PO BOX 7690, CHICAGO, IL 60680-7690	SUPPLIERS AND VENDORS	04/25/2018	\$150.17
3.267	MCMASTER-CARR SUPPLY CO.	PO BOX 7690, CHICAGO, IL 60680-7691	SUPPLIERS AND VENDORS	05/14/2018	\$21.39
2 260	MEDPACE REFERENCE LABORATORIES	ATTN: TINA BENJAMIN, 5375 MEDPACE WAY, CINCINNATI,	SUPPLIERS AND VENDORS	02/44/2049	¢22 420 75
3.200	MEDIFACE REFERENCE LABORATORIES	OH 45227 ATTN: TINA BENJAMIN, 5375 MEDPACE WAY, CINCINNATI,	SUPPLIERS AND VENDORS	03/14/2018	\$32,139.75
3.269	MEDPACE REFERENCE LABORATORIES	OH 45228 ATTN: TINA BENJAMIN, 5375 MEDPACE WAY, CINCINNATI,	SUPPLIERS AND VENDORS	04/17/2018	\$25,304.14
3.270	MEDPACE REFERENCE LABORATORIES	OH 45229	SUPPLIERS AND VENDORS	05/01/2018	\$3,591.25
0.074	MEDPACE REFERENCE LABORATORIES	ATTN: TINA BENJAMIN, 5375 MEDPACE WAY, CINCINNATI, OH 45230	SUPPLIERS AND VENDORS	05/40/0040	\$15,750.61
	MERCHANT & CREDIT CARD FEES	01140230	SUPPLIERS AND VENDORS	05/16/2018 03/09/2018	\$953.74
	MERCHANT & CREDIT CARD FEES		SUPPLIERS AND VENDORS	03/16/2018	\$25.49
	MERCHANT & CREDIT CARD FEES		SUPPLIERS AND VENDORS	03/23/2018	\$912.49
	MERCHANT & CREDIT CARD FEES		SUPPLIERS AND VENDORS	03/30/2018	\$55.33
	MERCHANT & CREDIT CARD FEES		SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	04/06/2018	\$968.64 \$717.56
	MERCHANT & CREDIT CARD FEES MERCHANT & CREDIT CARD FEES		SUPPLIERS AND VENDORS	04/13/2018 04/27/2018	\$1.24
	MERCHANT & CREDIT CARD FEES		SUPPLIERS AND VENDORS	05/04/2018	\$2,207.28
	MERCHANT & CREDIT CARD FEES		SUPPLIERS AND VENDORS	05/17/2018	\$43.43
3.281	MERCHANT & CREDIT CARD FEES		SUPPLIERS AND VENDORS	06/05/2018	\$1,891.68
3.282	MICHIGAN MEDICAID	STATE OF MICHIGAN - DCH, DEPT. 77951, PO BOX 77000, DETROIT, MI 48277-7951	MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$437.15
		STATE OF MICHIGAN-DCH BANK ONE WHOLESALE,			
3.283	MICHIGAN-MCO	ATTN: MI MCO PROGRAM DRUG REBATE, LOCKBOX NO. 77951, 900 HAGGERTY RD, BELLEVILLE, MI 48111	MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$2,016.82
		ATTN: ACCOUNT MANAGER FOR SANCILIO			
		TRANSACTION, C/O MIDCAP FINANCIAL SERVICES, LLC,			
3.284	MIDCAP FINANCIAL, LLC	7255 WOODMONT AVE., SUITE 200, BETHESDA, MD 20814	INTEREST PAYMENT	04/02/2018	\$157,262.03
3.285	MINNESOTA BOARD OF PHARMACY	2829 UNIVERSITY AVENUE SE, #530, MINNEAPOLIS, MN 55414-3251	SUPPLIERS AND VENDORS	05/01/2018	\$235.00
3 286	MINNESOTA MEDICAID-EXPANSION REBATE 054	DHS MEDICAID EXPANSION REBATE 054, PO BOX 64837, ST. PAUL, MN 55164-0837	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$56.09
		DHS-DRUG REBATE 050, PO BOX 64837, ST PAUL, MN			
3.287	MINNESOTA MEDICAID-FEDERAL	55164-0837 DHS MANAGED CARE DRUG REBATE 052, PO BOX 64837.	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$125.77
3.288	MINNESOTA MEDICAID-MANAGED CARE	ST. PAUL, MN 55164-0837	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$460.97
		STATE OF MS- DIV. OF MEDICAID-MAGNOLIA CONDUENT			
		STATE HEALTHCARE, LLC, ATTN: KATHERINE THOMAS,			
3.289	MISSISSIPPI MEDICAID -MAGNOLIA	PO BOX 6014, RIDGELAND, MS 39158-6014	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$85.66
		STATE OF MS- DIV OF MEDICAID- UHC CONDUENT STATE			
	MICCICCIPPI MEDICAID LILIC	HEALTHCARE, LLC, ATTN: KATHERINE THOMAS, PO BOX	MEDICAID DOLIC DEDATE DOCCDAM DAVMENT	00/00/0040	#400 0 7
3.290	MISSISSIPPI MEDICAID UHC	6014, RIDGELAND, MS 39158-6014 STATE OF MS-DIV. OF MEDICAID CONDUENT STATE	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$100.97
		HEALTHCARE, LLC, ATTN: KATHERINE THOMAS, PO BOX			
3.291	MISSISSIPPI MEDICAID-FED	6014, RIDGELAND, MS 39158-6014 MO HEALTHNET DIVISION CASH CONTROL UNIT, PO BOX	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$20.33
3.292	MISSOURI MEDICAID	6500, JEFFERSON CITY, MO 65102	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$879.35
	MITZVAH ASSOCIATES, J.V.	6761 W. INDIANTOWN ROAD, SUITE 29, JUPITER, FL 33458		04/02/2018	
	·	6761 W. INDIANTOWN ROAD, SUITE 29, JUPITER, FL	SUPPLIERS AND VENDORS		\$18,007.69
3.294	MITZVAH ASSOCIATES, J.V.	33458 6761 W. INDIANTOWN ROAD, SUITE 29, JUPITER, FL	SUPPLIERS AND VENDORS	05/01/2018	\$17,992.69
2 205	MITZVAH ASSOCIATES, J.V. MOLLANAZAR, LEANDRA	33458	SUPPLIERS AND VENDORS	06/04/2018	\$17,992.69
		10516 HOMESTEAD DRIVE, TAMPA, FL 33616	EXPENSE REIMBURSEMENT	03/16/2018	\$192.60

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Line Number	Name	Address	Description	Date of Payment	Amount
		MONTANA MEDI EXP DRUG REBATE PROGRAM, PO BOX			
3.297	MONTANA FFS HELP	20291, 1400 BROADWAY, ROOM A206, HELENA, MT 59620 MEDICAID DRUG REBATE PROGRAM HEALTH RESOURCE		04/13/2018	\$29.53
3 298	MONTANA MEDICAID	DIVISION, PO BOX 202951, 1400 BROADWAY, A206, HELENA, MT 59620-2951	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$339.30
3.299	MTC INDUSTRIES, INC.	255 OSER AVE, HAUPPAUGE, NY 11788	SUPPLIERS AND VENDORS	04/17/2018	\$24,200.00
	MUTUAL OF OMAHA	PO BOX 2147, OMAHA, NE 68103-2147	SUPPLIERS AND VENDORS	04/05/2018	\$3,600.60
	MUTUAL OF OMAHA MUTUAL OF OMAHA	PO BOX 2147, OMAHA, NE 68103-2148 PO BOX 2147, OMAHA, NE 68103-2149	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/03/2018 06/04/2018	\$4,696.79 \$4,072.78
	NATIONWIDE.	FILE 50939, LOS ANGELES, CA 90074-0939	SUPPLIERS AND VENDORS	04/02/2018	\$87.84
3.304	NATIONWIDE.	FILE 50939, LOS ANGELES, CA 90074-0940	SUPPLIERS AND VENDORS	05/01/2018	\$175.68
3.305	NAVIGANT	685 3RD AVE, 14TH FLOOR, NEW YORK, NY 10016 NE DHHS-MLTC, ATTN: KATHI SITZMAN, 301 CENTENNIAL	SUPPLIERS AND VENDORS	04/02/2018	\$45,675.00
2 206	NEBRASKA MCO 7100 POINT OF SALE	MALL SOUTH, 5TH FLOOR, PO BOX 95026, LINCOLN, NE 68509-5026	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/43/3049	¢140.12
3.306	NEBRASIA MICO / TOU FOINT OF SALE		WEDICAID DROG REBATE FROGRAM FATMENT	04/13/2018	\$140.13
3.307	NEBRASKA MCO 7200 POINT OF SALE	HEALTH AND HUMAN SERVICES DEPARTMENT FINANCE AND SUPPORT, PO BOX 95026, LINCOLN, NE 68509-5026	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$71.09
0.000	NEDD AGIA MOG TOGG DON'T OF GALE	HEALTH AND HUMAN SERVICES DEPARTMENT FINANCE	MEDICALD DELIC DEDATE DECORAN DAVAGENT	0.4/4.0/00.4.0	000.74
3.308	NEBRASKA MCO 7300 POINT OF SALE	AND SUPPORT, PO BOX 95026, LINCOLN, NE 68509-5026 DIV OF HEALTH CARE FINANCING & POLICY-NV	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$86.74
		ACCOUNTING UNIT, DRUG REBATE PROGRAM, ATTN:			
3.309	NEVADA AMERIGROUP (MCO 2)	LEAH LAMBORN, 1100 EAST WILLIAM ST SUITE 108, CARSON CITY, NV 89701	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$72.49
		DUCED STATE OF NEWADA DRUG BERATE BROODAM			
		DHCFP, STATE OF NEVADA DRUG REBATE PROGRAM, ATTN: ACCRING., UNIT 1100 EAST WILLIAMS STREET,			
3.310	NEVADA SILVER SUMMIT (MCO 3)	SUITE 108, CARSON CITY, NV 89701 DIV. OF HEALTHCARE FINANCING & POLICY-NV,	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$3.84
		ACCOUNTING UNIT-DRUG REBATE PROGRAM, ATTN:			
2 211	NEVADA UHC (MCO 1)	LEAH LAMBORN, 1100 EAST WILLIAM ST, SUITE 108, CARSON CITY. NV 89701	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$213.48
3.311	NEVADA UNC (NICO I)	DIVISION OF HEALTHCARE FINANCING & POLICY	MEDICAID DRUG REBATE PROGRAM PATMENT	03/20/2016	\$∠13.46
		ACCOUNTING UNIT, DRUG REBATE PROGRAM, ATTN:			
3.312	NEVADA-FEDERAL	LEAH LAMBORN, 1100 EAST WILLIAM STREET, SUITE 108, CARSON CITY, NV 89701	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$124.95
		NEW HAMPSHIRE BOARD OF PHARMACY, 121 SOUTH			•
3.313	NEW HAMPSHIRE BOARD OF PHARMACY	FRUIT STREET, SUITE 401, CONCORD, NH 03301-2412	SUPPLIERS AND VENDORS	05/30/2018	\$250.00
3.314	NEW HAMPSHIRE MCO	DEPT. OF HEALTH & HUMAN SERVICES, C/O OFFICE OF FINANCE, ATTN:NH MEDICAID MCO OBRA DRUG REBATE, 129 PLEASANT STREET, CONCORD, NH 03301	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$4.25
		DEPT. OF HEALTH & HUMAN SERVICES, C/O OFFICE OF FINANCE, ATTN: NH MEDICAID PROGRAM DRUG REBATE,			
3.315	NEW HAMPSHIRE-FEDERAL	129 PLEASANT STREET, CONCORD, NH 03301	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$9.69
		C/O NEW JERSEY ENCOUNTER DRUG REBATE PROGRAM, DIV OF REVENUE (DMAHS), PO BOX 655,			
3.316	NEW JERSEY ENCOUNTER MCO	TRENTON, NJ 08646	MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$31,285.03
		C/O NEW MEXICO HUMAN SERVICES DEPT ASD, ACCOUNTING RECEIVABLE BUREAU, PO BOX 2348,			
3.317	NEW MEXICO -FEDERAL	SANTA FE, NM 87504-2348	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$4.80
		C/O NEW MEXICO HUMAN SERVICES DEPT ASD, REV & REPORTING BUREAU, PO BOX 2348, SANTA FE, NM 87504			
3.318	NEW MEXICO MEDICAID-MCO	2348	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$37.88
		C/O OBRA REBATE PROGRAM-FFS, NYS DEPARTMENT			
3.319	NEW YORK MEDICAID-FFS	OF HEALTH REVENUE UNIT, ALBANY, NY 12237-0016 C/O OBRA REBATE PROGRAM-FP, GNARESP TOWER	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/02/2018	\$491.88
		BUILDING, REVENUE UNIT-ROOM 1717, ALBANY, NY			
	NEW YORK MEDICAID-MCO NEXTERNAL.COM	12237-0016 685 3RD AVE 14TH FLOOR, NEW YORK, NY 10016	MEDICAID DRUG REBATE PROGRAM PAYMENT SUPPLIERS AND VENDORS	04/02/2018 05/08/2018	\$8,824.14 \$1,099.09
	NEXTERNAL.COM	685 3RD AVE 14TH FLOOR, NEW YORK, NY 10016	SUPPLIERS AND VENDORS	06/05/2018	\$827.29
3 323	NINGBO PHARMA BIOTECH CO. LTD	C/O DBASE VI, LLC, ONE HIBISCUS ALLEY, ST THOMAS 802, US VIRGIN ISLANDS	SUPPLIERS AND VENDORS	04/18/2018	\$2,020.00
	NORTH CAROLINA DEPARTMENT OF REVENUE	PO BOX 25000, RALEIGH, NC 27640-0520	SUPPLIERS AND VENDORS	04/13/2018	\$200.00
3,325	NORTH CAROLINA MEDICAID	C/O NC DHHS DRUG REBATE, CMS POST OFFICE BOX 602872, CHARLOTTE, NC 28260-2872	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$724.63
		1906 EAST BROADWAY AVENUE, BISMARCK, ND 58501- 4700	SUPPLIERS AND VENDORS		
3.326	NORTH DAKOTA BOARD OF PHARMACY	C/O FISCAL- DRUG REBATE PROGRAM, NORTH DAKOTA	OOLI EIERO AIAD VEIADONO	05/15/2018	\$400.00
3.327	NORTH DAKOTA -FEDERAL	DEPARTMENT OF HUMAN SERVICES, 600 E. BOULEVARD AVE., BISMARCK, ND 58505-0261	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$38.33
		C/O FISCAL- DRUG REBATE PROGRAM, NORTH DAKOTA		22.20.20.0	200.00
3 220	NORTH DAKOTA- MEDICAID EXPANSION MCO	DEPT. OF HUMAN SERVICES, 600 E. BOULEVARD AVE., DEPT 325, BISMARCK, ND 58505-0261	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	¢E FO
J.JZ0	NU-CHEK PREP, INC.	PO BOX 295, ELYSIAN, MN 56028	SUPPLIERS AND VENDORS	05/01/2018	\$5.50 \$200.00

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Line Numbe	Name	Address	Description	Date of Payment	Amount
2 220	OHIO MEDICAID-FEDERAL	ATTN: TREASURER OF THE STATE OF OHIO, OHIO DEPT OF MEDICAID L-3649 DRUG REBATE, COLUMBUS, OH 43260	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$165.70
3.330	OF HO WIEDIOAID-I EDEIXAE	OHIO BOARD OF PHARMACY, 77 SOUTH HIGH STREET,		03/20/2010	ψ103.70
3.331	OHIO STATE BOARD OF PHARMACY	17TH FLOOR, COLUMBUS, OH 43215 SUPPLIERS AND VENDORS ATTN: TRESURER STATE OF OHIO, MCP DRUG REBATE,		06/01/2018	\$953.50
3.332	OHIO-MANAGED CARE	MEDICAID DRUG REBATE, PO BOX 932206, CLEVELAND, OH 44193	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$2,834.56
		ATTN: TREASURER STATE OF OHIO, MEDICAID DRUG REBATE MCP DRUG REBATE, PO BOX 932206,			
3.333	OHIO-MCO JCODE	CLEVELAND, OH 44193	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$0.04
3 334	OREGON FEDERAL	C/O OREGON DRUG REBATE PROGRAM, OHA RECEIPTING UNIT/ DRUG REBATE, 500 SUMMER ST., NE E-80, SALEM, OR 97301	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$110.96
0.00+	ONLOGIV EDELIVIE	C/O OREGON DRUG REBATE PROGRAM, OHA	MEDIO NED NED NED NET THOUSAND THE NET	04/10/2010	ψ110.50
3.335	OREGON MEDICAID	RECEIPTING UNIT/DRUG REBATE, 500 SUMMER ST., NE- 08, SALEM, OR 97301-1077	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$2,599.89
	ORGANIC TECHNOLOGIES	ATTN: KATRINA MCDONALD, 545 WALNUT STREET, PO BOX 640, COSHOCTON, OH 43812	SUPPLIERS AND VENDORS	04/02/2018	\$25,205.40
3.337	PALM BEACH COUNTY SHERIFF'S OFFICE	C/O ACCOUNTING- ALARM UNIT, PO BOX 24681, WEST PALM BEACH, FL 33416	SUPPLIERS AND VENDORS	05/16/2018	\$25.00
	PEIRCE, SUMNER H.	1501 NW 42ND STREET, FORT LAUDERDALE, FL 33309- 4527	EXPENSE REIMBURSEMENT	04/12/2018	\$71.36
	PEIRCE, SUMNER H.	1501 NW 42ND STREET, FORT LAUDERDALE, FL 33309- 4527	EXPENSE REIMBURSEMENT	05/09/2018	\$148.61
		C/O PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES, PO BOX 780634, PHILADELPHIA, PA 19178-			
3.340	PENNSYLVANIA MEDICAID-MCO	0634 C/O PENNSYLVANIA DEPARTMENT OF HUMAN	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$5,479.34
3.341	PENNSYLVANIA-FEDERAL	SERVICES, PO BOX 780634, PHILADELPHIA, PA 19178- 0634	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$57.46
3.342	PETER CLOUGH	GRAYBURN GARDEN HOUSE NEWBEGIN, BEVERLEY, NORTH HUMBERSIDE HU17 8EG, UNITED KINGDOM	SUPPLIERS AND VENDORS	03/12/2018	\$3,145.38
3.343	PEX EXPEDITE FEES		SUPPLIERS AND VENDORS	05/15/2018	\$45.00
	PHARMACY SELECT INC PHARMAPOLARIS INTERNATIONAL, INC.	1550 COLUMBUS STREET, SUN PRAIRIE, WI 53590	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	04/02/2018	\$42.67 \$6,500.00
	PHARMAPOLARIS INTERNATIONAL, INC.	PO BOX 342444, BETHESDA, MD 20827 PO BOX 342444, BETHESDA, MD 20828	SUPPLIERS AND VENDORS	04/02/2018 05/02/2018	\$6,000.00
	PHARMAPOLARIS INTERNATIONAL, INC.	PO BOX 342444, BETHESDA, MD 20829	SUPPLIERS AND VENDORS	05/09/2018	\$23,000.00
	PITNEY BOWES, INC.	PO BOX 371896, PITTSBURGH, PA 15250-7874	SUPPLIERS AND VENDORS	05/16/2018	\$511.30
3.349	PREVALUS, JACQUES	5801 N MILITARY TRL, APT 201, WEST PALM BEACH, FL 33407 5801 N MILITARY TRL, APT 201, WEST PALM BEACH, FL	EXPENSE REIMBURSEMENT	03/21/2018	\$587.93
3.350	PREVALUS, JACQUES	33407	EXPENSE REIMBURSEMENT	06/04/2018	\$587.93
3.351	PRINOVA	285 E. FULLERTON AVENUE, CAROL STREAM, IL 60188	SUPPLIERS AND VENDORS	04/02/2018	\$89,538.21
	PRINOVA	285 E. FULLERTON AVENUE, CAROL STREAM, IL 60188	SUPPLIERS AND VENDORS	05/08/2018	\$44,073.69
3.353	PSG HOLDINGS	PO BOX 739, CLARK, NJ 07066 C/O TRESCAL DBA QUALITY SYSTEMS LABORATORY,	SUPPLIERS AND VENDORS	05/01/2018	\$11,248.92
3.354	QUALITY SYSTEMS LAB	INC, PO BOX 559, HARTLAND, MI 48353	SUPPLIERS AND VENDORS	05/15/2018	\$192.00
3.355	RABINOWICZ, DR. ADRIAN	ATTN: DR. ADRIAN RABINOWICZ, 6 VULTEE DRIVE, FLORHAM PARK, NJ 07932	EXPENSE REIMBURSEMENT	05/01/2018	\$393.40
3.356	RABINOWICZ, DR. ADRIAN	ATTN: DR. ADRIAN RABINOWICZ, 6 VULTEE DRIVE, FLORHAM PARK, NJ 07933	EXPENSE REIMBURSEMENT	05/16/2018	\$982.68
	RACETRAC	4156 BLUE HERON BLVD, RIVIERA BEACH, FL 33404	SUPPLIERS AND VENDORS	05/25/2018	\$73.69
3.358	RED2GREEN GROUP LLC	1444 NORTH WELLS STREET, #2, CHICAGO, IL 60610	SUPPLIERS AND VENDORS	03/16/2018	\$3,000.00
3 359	RHODE ISLAND MCO	C/O HB ENTERPRISE SERVICES, PO BOX 2006, WARWICK RI 02887-2006	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$37.16
3.360	SALAZAR, ELIZABETH	411 SW BYRON ST, PORT ST. LUCIE, FL 34983	EXPENSE REIMBURSEMENT	05/01/2018	\$150.00
	SALAZAR, ELIZABETH	411 SW BYRON ST, PORT ST. LUCIE, FL 34983	EXPENSE REIMBURSEMENT	05/22/2018	\$20.00
3.362	SALESFORCE.COM	PO BOX 203141, DALLAS, TX 75320-3141 ATTN: CRESCENT J. SANCILIO, #2 OAK LANE,	SUPPLIERS AND VENDORS	05/01/2018	\$7,520.01
3.363	SANCILIO (V), CRESCENT J.	MONTVILLE, NJ 07045	EXPENSE REIMBURSEMENT	03/22/2018	\$3,653.11
3.364	SANCILIO-MARINER, CHARLENE	ATTN: CHARLENE SANCILIO-MARINER, 378 NORTHLAKE BLVD , #198, NORTH PALM BEACH, FL 33408	SUPPLIERS AND VENDORS	03/12/2018	\$25,017.33
3.365	SGS CANADA, INC.	PO BOX 4580, DEPT 5, STATION A, TORONTO, ON M5W 4W2, CANADA	SUPPLIERS AND VENDORS	04/17/2018	\$6,539.00
3.366	SGS CANADA, INC.	PO BOX 4580, DEPT 5, STATION A, TORONTO, ON M5W 4W2, CANADA	SUPPLIERS AND VENDORS	04/27/2018	\$1,785.00
3.367	SGS NORTH AMERICA, INC.	CITIBANK NEW CASTLE- DELAWARE, PO BOX 2502, CAROL STREAM, IL 60132-2502	SUPPLIERS AND VENDORS	04/17/2018	\$1,277.00
3 360	SHOPIFY	C/O SHOPIFY INC., ATTN:CONTRACTS DEPARTMENT, 150 ELGIN STREET, 8TH FLOOR, OTTAWAY, ON K2P 1L4, CANADA	SUPPLIERS AND VENDORS	05/07/2018	¢102 42
J.308	OHOLII (C/O SHOPIFY INC., ATTN:CONTRACTS DEPARTMENT, 150		05/07/2018	\$183.43
3.369	SHOPIFY	ELGIN STREET, 8TH FLOOR, OTTAWAY, ON K2P 1L4, CANADA	SUPPLIERS AND VENDORS	05/31/2018	\$163.17
3 370	SHREDASSURED INC.	ATTN: NANCY ERWIN, PO BOX 213321, ROYAL PALM BEACH, FL 33421	SUPPLIERS AND VENDORS	04/25/2018	\$144.00
		ATTN: NANCY ERWIN, PO BOX 213321, ROYAL PALM			
3.371	SHREDASSURED INC.	BEACH, FL 33422	SUPPLIERS AND VENDORS	05/01/2018	\$144.0

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<u> </u>	Name	Address POYAL BALL	Description	Payment	Amount
3 372	SHREDASSURED INC.	ATTN: NANCY ERWIN, PO BOX 213321, ROYAL PALM BEACH, FL 33423 SUPPLIERS AND VENDORS		05/08/2018	\$144.00
3.312	STINEDAGGONED INC.	ATTN: NANCY ERWIN, PO BOX 213321, ROYAL PALM	OUT LIERO AND VENDORO	03/00/2010	Ψ144.00
3.373	SHREDASSURED INC.	BEACH, FL 33424	SUPPLIERS AND VENDORS	05/16/2018	\$144.00
	OMONE OTRUGTURES IV	6761 W. INDIANTOWN ROAD, SUITE 29, JUPITER, FL	OLIDBUIEDO AND VENDODO		
3.374	SIMONE STRUCTURES JV	33458 6761 W. INDIANTOWN ROAD, SUITE 29, JUPITER, FL	SUPPLIERS AND VENDORS	04/02/2018	\$66,364.24
3.375	SIMONE STRUCTURES JV	33458	SUPPLIERS AND VENDORS	05/01/2018	\$66,349.24
		6761 W. INDIANTOWN ROAD, SUITE 29, JUPITER, FL			
3.376	SIMONE STRUCTURES JV	33458 25BL-5LT 446-5, NONHYUN-DONG, NAMDONG-GU	SUPPLIERS AND VENDORS	06/04/2018	\$66,349.24
3.377	SKY SOFTGEL CO., LTD	INCHEON, SOUTH KOREA	SUPPLIERS AND VENDORS	04/17/2018	\$210.00
		DEPT. OF HEALTH AND HUMAN SVCS., FHSC-SC DRUG			
		REBATE, ATTN: NMA-SC DRUG REBATE, PO BOX 60009,			
3.378	SOUTH CAROLINA- ABSOLUTE	CHARLOTTE, NC 28260 DEPT. OF HEALTH AND HUMAN SVCS, FHSC-SC DRUG	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$69.63
		REBATE, ATTN: MMA-SC DRUG REBATE, PO BOX 60009,			
3.379	SOUTH CAROLINA- WELLCARE	CHARLOTTE, NC 28260	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$33.58
		DEPARTMENT OF HEALTH & HUMAN SERVICES, FHSC-SC			
0.000	COLITIL CAROLINA FERENAL	DRUG REBATE, ATTN: MMA-SC DRUG REBATE, PO BOX	MEDICAID DDIIG DEDATE DDOGDAM DAVMENT	00/00/0040	¢47.05
3.380	SOUTH CAROLINA-FEDERAL	60009, CHARLOTTE, NC 28260-0009 DEPT. OF HEALTH AND HUMAN SVCS, FHSC- SC DRUG	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$47.85
		REBATE, ATTN: MMA-SC DRUG REBATE, PO BOX 60009,			
3.381	SOUTH CAROLINA-FIRST CHOICE	CHARLOTTE, NC 28260	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$115.87
		DEPT. OF HEALTH AND HUMAN SVCS, FHS- SC DRUG			
3 382	SOUTH CAROLINA-MOLINA	REBATE, ATTN: MMA-SC DRUG REBATE, PO BOX 60009, CHARLOTTE, NC 28260	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$48.67
0.002	OOOTH CARCOLINA MOLINA	DEPARTMENT OF SOCIAL SCIENCES, SD OFFICE OF THE	MEDIONID DICO REDICE PROGRAMMY ANNIENT	00/20/2010	ψ.σ.σ.
		SECRETARY - FINANCE, ATTN: JARED BOYER, 700			
	SOUTH DAKOTA-FEDERAL	GOVERNORS DRIVE, PIERRE, SD 57501	MEDICAID DRUG REBATE PROGRAM PAYMENT	05/08/2018	\$61.59
	STAMPS.COM STAMPS.COM	1990 E. GRAND AVE, EL SEGUNDO, CA 90245-5013 1990 E. GRAND AVE, EL SEGUNDO, CA 90245-5013	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/05/2018 05/09/2018	\$450.00 \$15.99
	STAMPS.COM	1990 E. GRAND AVE, EL SEGUNDO, CA 90245-5013	SUPPLIERS AND VENDORS	05/22/2018	\$400.00
	STAMPS.COM	1990 E. GRAND AVE, EL SEGUNDO, CA 90245-5013	SUPPLIERS AND VENDORS	05/31/2018	\$200.00
	STAMPS.COM	1990 E. GRAND AVE, EL SEGUNDO, CA 90245-5013	SUPPLIERS AND VENDORS	06/04/2018	\$15.99
3.389	STAMPS.COM	1990 E. GRAND AVE, EL SEGUNDO, CA 90245-5013 STAPLES BUSINESS ADVANTAGE DEPT ATL, PO BOX	SUPPLIERS AND VENDORS	06/05/2018	\$200.00
3.390	STAPLES ADVANTAGE	405386, ATLANTA, GA 30384-5386	SUPPLIERS AND VENDORS	04/25/2018	\$239.40
		STAPLES BUSINESS ADVANTAGE DEPT ATL, PO BOX			
3.391	STAPLES ADVANTAGE	405386, ATLANTA, GA 30384-5387	SUPPLIERS AND VENDORS	05/08/2018	\$217.32
3 392	STAPLES ADVANTAGE	STAPLES BUSINESS ADVANTAGE DEPT ATL, PO BOX 405386, ATLANTA, GA 30384-5388	SUPPLIERS AND VENDORS	05/16/2018	\$195.00
0.002	6111 EE671547111116E	STAPLES BUSINESS ADVANTAGE DEPT ATL, PO BOX	OCT LIERO THE VENDORO	00/10/2010	Ψ100.00
3.393	STAPLES ADVANTAGE	405386, ATLANTA, GA 30384-5389	SUPPLIERS AND VENDORS	05/20/2018	\$127.46
2 204	STATE OF NEW JERSERY MEDI DMALIS EV MCO	LOCKBOX 655-200, WOLVERTON AVE, BLDG 200,	MEDICAID DDIIC BERATE DROCDAM DAVMENT	02/26/2018	¢665.70
	STATE OF NEW JERSERY MEDI. DMAHS FX-MCO STATE OF VERMONT AGENCY OF HUMAN SERVICES	TRENTON, NJ 08646 DVHA - AR, PO BOX 1335, WILLISTON, VT 05495	MEDICAID DRUG REBATE PROGRAM PAYMENT MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018 05/08/2018	\$665.70 \$0.04
	STATE OF VERMONT AGENCY OF HUMAN SERVICES	DVHA - AR, PO BOX 1335, WILLISTON, VT 05496	MEDICAID DRUG REBATE PROGRAM PAYMENT	05/16/2018	\$1,872.13
3.397	STERICYCLE COMMUNICATION SOLUTIONS, INC.	PO BOX 6582, CAROL STEAM, IL 60197-6582	SUPPLIERS AND VENDORS	04/03/2018	\$1,702.58
0.000	STOVER TED	10431 SE JUPITER NARROWS DRIVE, HOBE SOUND, FL 33455	EXPENSE REIMBURSEMENT	0.4/4.0/004.0	£4.750.00
	STOVER, TED SUNRISE PARTY RENTAL	PO BOX 881, LAKE WORTH FL 33460	SUPPLIERS AND VENDORS	04/12/2018 06/05/2018	\$4,753.22 \$195.15
0.000		NGLIC C/O SUPERIOR VISION SRVS INC., PO BOX 201839,		00/00/2010	ψ100.10
3.400	SUPERIOR VISION	DALLAS, TX 75320-1839	SUPPLIERS AND VENDORS	04/02/2018	\$833.06
2 404	SUPERIOR VISION	NGLIC C/O SUPERIOR VISION SRVS INC., PO BOX 201839, DALLAS, TX 75320-1840	CURRULERS AND VENDORS	05/04/2048	¢750.06
3.401	SUPERIOR VISION	BB&T COMMERICAL EQUIPMENT CAPITAL, ATTN:	SUPPLIERS AND VENDORS	05/01/2018	\$758.06
		ACCOUNTS RECEIVABLE DEPT., PO BOX 896534,			
3.402	SUSQUEHANNA COMMERICAL FINANCE	CHARLOTTE, NC 28289-6534	SUPPLIERS AND VENDORS	04/02/2018	\$786.00
		BB&T COMMERICAL EQUIPMENT CAPITAL, ATTN:			
3 403	SUSQUEHANNA COMMERICAL FINANCE	ACCOUNTS RECEIVABLE DEPT., PO BOX 896534, CHARLOTTE, NC 28289-6535	SUPPLIERS AND VENDORS	05/01/2018	\$786.00
	TAX COLLECTOR - PALM BEACH COUNTY	PO BOX 3353, WEST PALM BEACH, FL 33402-3353	TAXES	03/26/2018	\$720.18
	TAX COLLECTOR - PALM BEACH COUNTY	PO BOX 3353, WEST PALM BEACH, FL 33402-3354	TAXES	03/26/2018	\$6,327.46
	TAX COLLECTOR - PALM BEACH COUNTY	PO BOX 3353, WEST PALM BEACH, FL 33402-3355	TAXES	03/26/2018	
3.407	TAX COLLECTOR - PALM BEACH COUNTY	PO BOX 3353, WEST PALM BEACH, FL 33402-3356	TAXES	03/26/2018	\$85,569.19
		BUREAU OF TENNCARE, DEPARTMENT #554, ATTN:			
		TENNESSEE FFS MEDICAID DRUG REBATE REGULAR			
3.408	TENNCARE-FEDERAL	TENNCARE, PO BOX 11407, BIRMINGHAM, AL 35246-5544	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$63.00
		CASH RECEIPT BRANCH, MC 2003, DEPARTMENT OF			
3.409	TEXAS ADAP	HEALTH SERVICES, PO BOX 149347, AUSTIN, TX 78714	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$0.59
		THERMO-PAK COMPANY, INC. 360 BALM COURT, WOOD			
3.410	THERMO-PAK COMPANY, INC.	DALE, IL 60191 THERMO-PAK COMPANY, INC. 360 BALM COURT, WOOD	SUPPLIERS AND VENDORS	04/17/2018	\$19,232.23
3 411	THERMO-PAK COMPANY, INC.	DALE, IL 60192	SUPPLIERS AND VENDORS	05/01/2018	\$20,254.86
	THETA HAT STATISTICAL CONSULTANTS LLC.	3723 BIRCHMERE CT, OWINGS MILLS, MD 21117	SUPPLIERS AND VENDORS	03/16/2018	\$20,254.86
3.413	THETA HAT STATISTICAL CONSULTANTS LLC.	3723 BIRCHMERE CT, OWINGS MILLS, MD 21117	SUPPLIERS AND VENDORS	03/22/2018	\$8,325.00
3.414	THETA HAT STATISTICAL CONSULTANTS LLC.	3723 BIRCHMERE CT, OWINGS MILLS, MD 21117	SUPPLIERS AND VENDORS	05/02/2018	\$8,000.00
3 415	TOLEDANO , MIGUEL LOPEZ	12114 SUNSET POINT CIRCLE, WELLINGTON, FL 33414	EXPENSE REIMBURSEMENT	04/12/2018	\$60.00
J.71J	I OLLDANINO , IVIIOOLL LOI LZ	TIZITE SUNDET FORME CINCLE, WELLINGTON, FL 33414	TEVL FLACE LINIDOLOFINEIAL	U=/12/2010	φυυ.υυ

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Line Number				Date of	
	Name TREASURER, STATE OF MAINE	ATTN: DHHS- PHARMACY, 11 STATE HOUSE STATION, AUGUSTA. ME 04333-0011	Description MEDICAID DRUG REBATE PROGRAM PAYMENT	03/20/2018	\$500.00
	TRUE COMMERCE, INC.	NW 6119, PO BOX 1450, MINNEAPOLIS, MN 55485-6199			\$600.00
		NW 6119, PO BOX 1450, MINNEAPOLIS, MN 55485-6200	SUPPLIERS AND VENDORS	04/26/2018	
3.410	TRUE COMMERCE, INC.		SUFFEIERS AND VENDORS	05/07/2018	\$1,600.00
	TURNKEY PHARMA CONSULTING LTD	MORTON HOUSE, 9 BEACON COURT, PITSTONE GREEN BUSINESS PARK, PITSTONE LU7 9GY, UNITED KINGDOM	SUPPLIERS AND VENDORS	04/17/2018	\$1,750.00
	TYCO INTEGRATED SECURITY TYCO INTEGRATED SECURITY	PO BOX 371967, PITTSBURGH, PA 15250-7967 PO BOX 371967, PITTSBURGH, PA 15250-7968	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	04/02/2018 05/01/2018	\$903.97 \$903.97
3.422	ULINE	PO BOX 88741, CHICAGO, IL 60680-1741 521 MAIN ST., NEW PALTZ, NY 12561	SUPPLIERS AND VENDORS	04/25/2018	\$460.00
	ULTRA SEAL CORP.	·	SUPPLIERS AND VENDORS	05/08/2018	\$4,599.10
	UNITED REFRIGERATION INC. 8305 GARDEN RD, STE#1, WEST PALM BEACH, FL 33460 SUPPLIERS AND VENDORS		05/31/2018	\$124.36	
	UNITED REFRIGERATION INC. UPS - Y00	8305 GARDEN RD, STE#1, WEST PALM BEACH, FL 33460 PO BOX 7247-0244, PHILADELPHIA, PA 19170-0001	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	06/01/2018 03/26/2018	\$18.02 \$122.43
			SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	04/02/2018 05/01/2018	\$30.00 \$147.53
	UPS FREIGHT	PO BOX 650690, DALLAS, TX 75265-0690	SUPPLIERS AND VENDORS SUPPLIERS AND VENDORS	05/01/2018	\$312.45
3.430	US DEPARTMENT OF HOMELAND SECURITY	505 S 2ND STREET, SUITE 100, FORT PIERCE, FL 34950	SUPPLIERS AND VENDORS	03/19/2018	\$460.00
3.431	US DEPARTMENT OF HOMELAND SECURITY	505 S 2ND STREET, SUITE 100, FORT PIERCE, FL 34950	SUPPLIERS AND VENDORS	03/19/2018	\$460.00
3.432	US DEPARTMENT OF HOMELAND SECURITY	505 S 2ND STREET, SUITE 100, FORT PIERCE, FL 34950	SUPPLIERS AND VENDORS	03/19/2018	\$500.00
3.433	US DEPARTMENT OF HOMELAND SECURITY	505 S 2ND STREET, SUITE 100, FORT PIERCE, FL 34950	SUPPLIERS AND VENDORS	03/19/2018	\$500.00
3.434	US DEPARTMENT OF HOMELAND SECURITY	505 S 2ND STREET, SUITE 100, FORT PIERCE, FL 34950	SUPPLIERS AND VENDORS	03/19/2018	\$500.00
3.435	US DEPARTMENT OF HOMELAND SECURITY	505 S 2ND STREET, SUITE 100, FORT PIERCE, FL 34950	SUPPLIERS AND VENDORS	03/19/2018	\$1,225.00
3.436	US DEPARTMENT OF HOMELAND SECURITY	505 S 2ND STREET, SUITE 100, FORT PIERCE, FL 34950	SUPPLIERS AND VENDORS	03/19/2018	\$1,500.00
3.437	US DEPARTMENT OF HOMELAND SECURITY	505 S 2ND STREET, SUITE 100, FORT PIERCE, FL 34950	SUPPLIERS AND VENDORS	03/19/2018	\$1,500.00
3.438	US DEPARTMENT OF HOMELAND SECURITY	505 S 2ND STREET, SUITE 100, FORT PIERCE, FL 34950	SUPPLIERS AND VENDORS	03/19/2018	\$1,500.00
3.439	US DEPARTMENT OF HOMELAND SECURITY	505 S 2ND STREET, SUITE 100, FORT PIERCE, FL 34950 THE U.S. PHARMACOPEIAL CONVENTION, INC., ATTN:	SUPPLIERS AND VENDORS	04/26/2018	\$700.00
3.440	USP - US PHARMACOPEIA	ACCOUNTS RECEIVABLE, 12601 TWINBROOK PARKWAY, ROCKVILLE, MD 20852	SUPPLIERS AND VENDORS	04/17/2018	\$2,900.00
		THE U.S. PHARMACOPEIAL CONVENTION, INC., ATTN: ACCOUNTS RECEIVABLE, 12601 TWINBROOK PARKWAY,			
3.441	USP - US PHARMACOPEIA	ROCKVILLE, MD 20853 THE U.S. PHARMACOPEIAL CONVENTION, INC., ATTN:	SUPPLIERS AND VENDORS	04/25/2018	\$520.00
3.442	USP - US PHARMACOPEIA	ACCOUNTS RECEIVABLE, 12601 TWINBROOK PARKWAY, ROCKVILLE, MD 20854	SUPPLIERS AND VENDORS	05/02/2018	\$850.00
		UTAH STATE TREASURER, ATTN: ACCOUNTS RECEIVABLE, PO BOX 413133, SALT LAKE CITY, UT 84141			•
3.443	UTAH FFSU-OBRA	3133 UTAH STATE TREASURER, PO BOX 413133, SALT LAKE	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$73.22
3.444	UTAH MCOU-OBRA	CITY, UT 84141-3133 ATTN: ANTHONY VALETUTTI III, 600 LINCOLN AVE.,	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$751.97
3.445	VALETUTTI II, ANTHONY	HAWTHORNE, NJ 07506	EXPENSE REIMBURSEMENT	03/16/2018	\$359.77
3.446	VALETUTTI II, ANTHONY	ATTN: ANTHONY VALETUTTI III, 600 LINCOLN AVE., HAWTHORNE, NJ 07507	EXPENSE REIMBURSEMENT	04/12/2018	\$1,217.59
3.447	VALETUTTI II, ANTHONY	ATTN: ANTHONY VALETUTTI III, 600 LINCOLN AVE., HAWTHORNE, NJ 07508	EXPENSE REIMBURSEMENT	05/01/2018	\$269.40
3.448	VALETUTTI II, ANTHONY	ATTN: ANTHONY VALETUTTI III, 600 LINCOLN AVE., HAWTHORNE, NJ 07509	EXPENSE REIMBURSEMENT	05/08/2018	\$557.57
3.449	VALETUTTI II, ANTHONY	ATTN: ANTHONY VALETUTTI III, 600 LINCOLN AVE., HAWTHORNE, NJ 07510	EXPENSE REIMBURSEMENT	05/22/2018	\$1,743.33
3.450	VERITIV OPERATING COMPANY	UNISOURCE-MIAMI, POBOX 409884, ATLANTA, GA 30384-9884	SUPPLIERS AND VENDORS	04/17/2018	\$984.11
3.451	VERITIV OPERATING COMPANY	UNISOURCE-MIAMI, POBOX 409884, ATLANTA, GA 30384- 9885	SUPPLIERS AND VENDORS	04/25/2018	\$3,560.37
3.452	VERITIV OPERATING COMPANY	UNISOURCE-MIAMI, POBOX 409884, ATLANTA, GA 30384- 9886	SUPPLIERS AND VENDORS	05/01/2018	\$1,686.07
3.453	VERITIV OPERATING COMPANY			05/08/2018	\$4,991.69
3.454	VERITIV OPERATING COMPANY	UNISOURCE-MIAMI, POBOX 409884, ATLANTA, GA 30384- 9888	SUPPLIERS AND VENDORS	05/16/2018	\$2,728.20
3.455	VERMONT MEDICAID-FEDERAL	STATE OF VT, STATE AGENCY OF HUMAN SVS DVHA-AR, PO BOX 1335, WILLISTON, VT 05495	MEDICAID DRUG REBATE PROGRAM PAYMENT	03/26/2018	\$608.57
		COMMONWEALTH OF VA DEPT. OF MEDICAL ASST., DEPT. OF MEDICAL ASST. SERVICES, ATTN: VA			
3.456	VIRGINIA MCO	MEDALLION 3.0 MCO DRUG REBATE, PO BOX 75991, BALTIMORE, MD 21275-5991	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$992.54

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Line Number					
ine	Name	Address	Description	Date of	Amount
	Name	Address COMMONWEALTH OF VA DEPT OF MEDICAL ASST.,	Description	Payment	Amount
		DEPT. OF MEDICAL ASST. SERVICES, ATTN: VA MEDICAID			
		FFS DRUG REBATE, PO BOX 75991, BALTIMORE, MD			
3.457	VIRGINIA MEDICAID	21275	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$25.48
		DEPARTMENT OF MEDICAL ASSISTANCE SERVICES,			
0.450	VIDOINIA COO DI LIC MOO	ATTN: VA CCC PLUS MCO DRUG REBATE, 600 EAST	MEDICAID DDIIG DEDATE DDOCDAM DAVMENT	0.4/4.0/004.0	60.00
3.458	VIRGINIA-CCC PLUS MCO	BROAD ST, SUITE 1300, RICHMOND, VA 23219-1857 VWR INTERNATIONAL, LLC, PO BOX 640169,	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$8.83
3 459	VWR INTERNATIONAL, INC.	PITTSBURGH, PA 15264-0169	SUPPLIERS AND VENDORS	04/17/2018	\$1,893.49
0.400	THE INTERIOR E, INC.	VWR INTERNATIONAL, LLC, PO BOX 640169,	CONTRICTION VENDONO	04/11/2010	ψ1,000.40
3.460	VWR INTERNATIONAL, INC.	PITTSBURGH, PA 15264-0170	SUPPLIERS AND VENDORS	04/25/2018	\$2,655.40
		VWR INTERNATIONAL, LLC, PO BOX 640169,			
3.461	VWR INTERNATIONAL, INC.	PITTSBURGH, PA 15264-0171	SUPPLIERS AND VENDORS	05/16/2018	\$1,330.10
		HEALTH CARE AUTHORITY DRUG REBATE PROGRAM, PO			
3.462	WASHINGTON- MCO	BOX 9501, OLYMPIA, WA 98507	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$1,572.47
2 462	WASHINGTON MEDICAID	HEALTH CARE AUTHORITY DRUG REBATE PROGRAM, PO BOX 9501, OLYMPIA, WA 98507-9501	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$405.87
3.403	WASHINGTON MEDICAID	WASTE MANAGEMENT OF PALM BEACH, PO BOX 105453,	MEDICAID DROG REBATE PROGRAM PATMENT	04/13/2016	φ 4 03.67
3.464	WASTE MANAGEMENT	ATLANTA, GA 30348-5453	SUPPLIERS AND VENDORS	05/03/2018	\$836.32
		WASTE MANAGEMENT OF PALM BEACH, PO BOX 105453,		00,00,00	***************************************
3.465	WASTE MANAGEMENT	ATLANTA, GA 30348-5454	SUPPLIERS AND VENDORS	05/04/2018	\$1,202.97
3.466	WATER ZONE, INC.	1432-B SKEES ROAD, WEST PALM BEACH, FL 33411	SUPPLIERS AND VENDORS	04/17/2018	\$2,656.10
3.467	WATER ZONE, INC.	1432-B SKEES ROAD, WEST PALM BEACH, FL 33412	SUPPLIERS AND VENDORS	05/01/2018	\$1,502.00
3.468	WATER ZONE, INC.	1432-B SKEES ROAD, WEST PALM BEACH, FL 33413	SUPPLIERS AND VENDORS	05/08/2018	\$440.00
3.469	WATER ZONE, INC.	1432-B SKEES ROAD, WEST PALM BEACH, FL 33414	SUPPLIERS AND VENDORS	05/16/2018	\$400.00
3.470	WEBSTAURANT STORE		SUPPLIERS AND VENDORS	06/04/2018	\$46.71
		WEST VIRGINIA DEPT OF HEALTH AND HUMAN SVCS.,			
		ATTN: DRUG REBATE PROGRAM, PO BOX 40209,			
3.471	WEST VIRGINIA-MEDICAID (M)	CHARLESTON, WV 25364	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$202.70
0.470	MECTERN INCTITUTIONAL DEVIEW DOADS	DEPT 106091, PO BOX 150434, HARTFORD, CT 06115-	CURRULERO AND VENDORO	05/00/0040	¢507.00
3.472	WESTERN INSTITUTIONAL REVIEW BOARD	0434 ACCT NOS. XXX9412 AND XXX3252, PO BOX 3177, CEDAR	SUPPLIERS AND VENDORS	05/23/2018	\$597.00
2 472	WINDSTREAM COMMUNICATIONS	RAPIDS, IA 52406-3177	SUPPLIERS AND VENDORS	03/26/2018	\$4,642.80
3.473	WINDSTREAM COMMUNICATIONS	ACCT NOS. XXX9412 AND XXX3252, PO BOX 3177, CEDAR	OUT LIERO AND VENDORO	03/20/2016	\$4,042.00
3.474	WINDSTREAM COMMUNICATIONS	RAPIDS, IA 52406-3178	SUPPLIERS AND VENDORS	04/05/2018	\$5,025.70
		ACCT NOS. XXX9412 AND XXX3252, PO BOX 3177, CEDAR			40,0000
3.475	WINDSTREAM COMMUNICATIONS	RAPIDS, IA 52406-3179	SUPPLIERS AND VENDORS	05/07/2018	\$4,940.75
	WINDSTREAM COMMUNICATIONS, INC.(CONGRESS)	PO BOX 9001950, LOUISVILLE, KY 40290-1950	SUPPLIERS AND VENDORS	04/05/2018	\$3,556.63
3.477	WINDSTREAM COMMUNICATIONS, INC.(CONGRESS)	PO BOX 9001950, LOUISVILLE, KY 40290-1951	SUPPLIERS AND VENDORS	05/11/2018	\$3,578.00
		WISCONSIN- CARE WISCONSIN MCO WISCONSIN			
		DEPARTMENT OF HEALTH SERVICES DRUG REBATE			
0.470	WIGOONGIN OARE WIGOONGIN MOO	PROGRAM, ATTN: CASH UNIT, 313 BLETTNER BLVD,	MEDICAID DOLLO DEDATE DOCCDAM DAVMENT	0.4/4.0/004.0	00.44
3.478	WISCONSIN- CARE WISCONSIN MCO	MADISON, WI 53784 WISCONSIN DEPARTMENT OF HEALTH SERVICES DRUG	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$0.11
		REBATE PROGRAM, ATTN: CASH UNIT, 313 BLETTNER			
3 /70	WISCONSIN ICARE-MCOU	BLVD, MADISON, WI 53784	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$0.12
3.473	WISCONSIN ICARE-WISCOS	WISCONSIN DEPARTMENT OF HEALTH SERVICES, ATTN:	INCORAID DROC REDATE I ROCKAMIT ATMENT	04/13/2010	Ψ0.12
		DRUG REBATE CASH UNIT, 313 BLETTNER BLVD,			
3.480	WISCONSIN MEDICAID FFSU	MADISON, WI 53784-0014	MEDICAID DRUG REBATE PROGRAM PAYMENT	04/13/2018	\$957.62
		NO. 99 JINXI ROAD BINHU DISTRICT, ROOM 4109 #4B,			
3.481	WUXI JANGLI MACHINERY CO., LTD	WUXI, JIANGSU PRC, CHINA	SUPPLIERS AND VENDORS	03/12/2018	\$400.00
					\neg
	WAYONING MEDICAID	STATE OF WYOMING CHANGE HEALTHCARE REBATE	MEDICAID DOUG DEDATE COCCO	00/22/22	
3.482	3.482 WYOMING MEDICAID SVCS., PO BOX 21719, CHEYENNE, WY 82003 MEDICAID DRUG REBATE PROGRAM PAYMENT		03/26/2018	\$83.72	
		DEVELOPMENT 3RD ROAD ECONOMIC DEVELOPMENT			
3 /122	ZHEJIANG FUCHANG MACHINERY CO. LTD	ZONE RUIAN, ZHEJIANG 325200, CHINA	SUPPLIERS AND VENDORS	03/12/2018	\$7,260.00
J.+03		LOTTE TOWNS, ALTEONORY OF OLOZOO, OTHER	00 L.L.(0 / 1/4D VL/4DO((0	03/12/2010	ψι,∠υυ.υ∪

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SANCILIO & COMPANY, INC.

SOFA 4: PAYMENTS OR OTHER TRANSFERS OF PROPERTY MADE WITHIN 1 YEAR BEFORE FILING THIS CASE THAT BENEFITED ANY INSIDER

Number						
<u> </u>						
9						Total Amount of
<u> </u>	Insider Name	Insider Address	Relationship to Debtor	Reason for payment or transfer	Dates	Value
4.1	ALBERT CAVAGNARO	N. 1102 ESSEX DRIVE, WILMINGTON, NC 28403	CHIEF LEGAL OFFICER	SALARY	6/6/2017 - 6/5/2018	\$221,168.49
4.2	ALBERT CAVAGNARO	N. 1102 ESSEX DRIVE, WILMINGTON, NC 28403	CHIEF LEGAL OFFICER	BONUS	6/6/2017 - 6/5/2018	\$22,058.85
4.3	ALBERT CAVAGNARO	N. 1102 ESSEX DRIVE, WILMINGTON, NC 28403	CHIEF LEGAL OFFICER	REIMBURSMENTS	6/6/2017 - 6/5/2018	\$58,674.13
		63 ST. GEORGE PLACE, PALM BEACH GARDENS, FL				
4.4	CAROLYN SANCILIO	33418	VP - SALES - RELATIVE	SALARY	6/6/2017 - 6/5/2018	\$81,316.07
		63 ST. GEORGE PLACE, PALM BEACH GARDENS, FL				
4.5	CAROLYN SANCILIO	33418	VP - SALES - RELATIVE	BONUS	6/6/2017 - 6/5/2018	\$17,647.05
		63 ST. GEORGE PLACE, PALM BEACH GARDENS, FL				
4.6	CAROLYN SANCILIO	33418	VP - SALES - RELATIVE	REIMBURSMENTS	6/6/2017 - 6/5/2018	\$48,594.91
		378 NORTHLAKE BLVD, #198, NORTH PALM BEACH,				
4.7	CHARLENE MARINER-SANCILIO	FL 33408	THIRD PARTY SALES - RELATIVE	COMMISSIONS	6/6/2017 - 6/5/2018	\$111,653.11
		170 CHANGEBRIDGE RD, BLDG A7, MONTVILLE, NJ				
4.8	CRESCENT SANCILIO	07045	PRODUCT MANAGER - RELATIVE	SALARY	6/6/2017 - 6/5/2018	\$55,000.14
		170 CHANGEBRIDGE RD, BLDG A7, MONTVILLE, NJ				
4.9	CRESCENT SANCILIO	07045	PRODUCT MANAGER - RELATIVE	REIMBURSMENTS	6/6/2017 - 6/5/2018	\$7,089.71
	DENNIS LANGER	2129 N CONGRESS, RIVERIA BEACH, FL 33404	BOARD OF DIRECTORS	REIMBURSMENTS	6/6/2017 - 6/5/2018	\$1,229.45
4.11	EDWARD MASCIOLI	44 TISDALE DRIVE, DOVER, MA 02030	BOARD OF DIRECTORS	REIMBURSMENTS	6/6/2017 - 6/5/2018	\$16,296.85
		63 ST. GEORGE PLACE, PALM BEACH GARDENS, FL				
4.12	FRED SANCILIO	33418	FORMER CHIEF EXECUTIVE OFFICER	SALARY	6/6/2017 - 6/5/2018	\$438,769.88
		63 ST. GEORGE PLACE, PALM BEACH GARDENS, FL				
	FRED SANCILIO	33418	FORMER CHIEF EXECUTIVE OFFICER	BONUS	6/6/2017 - 6/5/2018	\$66,176.40
4.14	GEOFFERY GLASS	3032 GRANVILLE DRIVE, RALEIGH, NC 27603	CHIEF EXECUTIVE OFFICER	SALARY	6/6/2017 - 6/5/2018	\$131,538.43
	GEOFFERY GLASS	3032 GRANVILLE DRIVE, RALEIGH, NC 27603	CHIEF EXECUTIVE OFFICER	REIMBURSMENTS	6/6/2017 - 6/5/2018	\$49,621.09
4.16	JAMES GALE	2129 N CONGRESS, RIVERIA BEACH, FL 33404	BOARD OF DIRECTORS	REIMBURSMENTS	6/6/2017 - 6/5/2018	\$1,256.70
		3122 SAN MICHELE DRIVE, PALM BEACH GARDENS,				
4.17	MARC WOLFF	FL 33418	FORMER CHIEF FINANCIAL OFFICER	SALARY	6/6/2017 - 6/5/2018	\$429,666.42
		3122 SAN MICHELE DRIVE, PALM BEACH GARDENS,				
4.18	MARC WOLFF	FL 33418	FORMER CHIEF FINANCIAL OFFICER	BONUS	6/6/2017 - 6/5/2018	\$88,235.25
		3122 SAN MICHELE DRIVE, PALM BEACH GARDENS,				
	MARC WOLFF	FL 33418	FORMER CHIEF FINANCIAL OFFICER	REIMBURSMENTS	6/6/2017 - 6/5/2018	\$2,051.52
4.20	PAT GRAY	2129 N CONGRESS, RIVERIA BEACH, FL 33404	BOARD OF DIRECTORS	REIMBURSMENTS	6/6/2017 - 6/5/2018	\$979.85
				INTERCOMPANY TRANSFER-		
	SANCILIO MEDICAL TECHNOLOGY			SHANGHAI FOREIGN SERVICES CO.		
4.21	(SHANGAI) CO., LTD		WHOLLY-OWNED SUBSIDIARY	LTD	6/6/2017 - 6/5/2018	\$11,307.40
	SANCILIO MEDICAL TECHNOLOGY					
4.22	(SHANGAI) CO., LTD		WHOLLY-OWNED SUBSIDIARY	INTERCOMPANY TRANSFER- NEIL XU	6/6/2017 - 6/5/2018	\$9,200.89
		301, ARCADIA, HIRANANDANI ESTATE, PATLIPADA,				
4.23	LIMITED	THANE, 400 607, INDIA	WHOLLY-OWNED SUBSIDIARY	INTERCOMPANY TRANSFERS	6/6/2017 - 6/5/2018	\$218,702.36

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SANCILIO & COMPANY, INC.

SOFA 7: LEGAL ACTIONS, ADMINISTRATIVE PROCEEDINGS, COURT ACTIONS, EXECUTIONS, OR ATTACHMENTS, OR GOVERNMENTAL AUDITS

ine Number					
ine	Case Title	Case Number	Nature of Case	Court or Agency's Name and Address	Status of Case
	5333 7333			UNITED STATES DISTRICT COURT FOR THE	
				NORTHERN DISTRICT OF GEORGIA	
				75 TED TURNER DR NW SUITE 2211	
7.1	ACELLA PHARMACEUTICALS, LLC	1:15-CV-00629-LMM	BREACH OF CONTRACT	ATLANTA, GA 30303	CONCLUDED
				STATE COURT OF FULTON COUNTY, GEORGIA	
				185 CENTRAL AVE SW	
7.2	ACELLA PHARMACEUTICALS, LLC	CIVIL ACTION 15-VS-000729E	BREACH OF CONTRACT	ATLANTA, GA 30303	PENDING
				U.S. EQUAL EMPLOYMENT OPPORTUNITY	
				COMMISSION, MIAMI DISTRICT OFFICE	
7.0	DEANINA ANDRESONA	FF00 0114 D 0F 540 0047 04000	WDONOELII TEDMINATIONI	100 SE 2ND ST #1500	DENIDINO
7.3	DEANNA ANDREESCU	EEOC CHARGE 510-2017-01063	WRONGFUL TERMINATION	MIAMI, FL 33131	PENDING
			IN JANUARY AND SEPTEMBER 2017. SPI RECEIVED A		
	DEPARTMENT OF HEALTH AND HUMAN		FORM FD 483 FOR INSPECTIONS CONDUCTED BY THE		
7.4	RESOURCES	N/A		N/A	PENDING
7.4	REGORNOLO	1477	ALLEGED POTENTIAL LATE SUBMISSIONS BY DEBTOR	1077	LINDING
			OF THE AVERAGE MANUFACTURER'S PRICE DATA TO		
			THE CENTER FOR MEDICARE AND MEDICAID		
	DEPARTMENT OF HEALTH AND HUMAN		SERVICES IN THE PERIOD JANUARY 1, 2012 THROUGH		
7.5	SERVICES, OFFICE OF INSPECTOR GENERAL	N/A	NOVEMBER 30, 2016	N/A	PENDING
			ALLEGED POTENTIAL LATE SUBMISSIONS BY SPI OF		
			THE AVERAGE MANUFACTURER'S PRICE DATA TO		
			THE CENTER FOR MEDICARE AND MEDICAID		
	DEPARTMENT OF HEALTH AND HUMAN		SERVICES IN THE PERIOD JANUARY 1, 2012 THROUGH		
	SERVICES, OFFICE OF INSPECTOR GENERAL	N/A	NOVEMBER 30, 2016	N/A	PENDING
7.7	MARINER WELLNESS & CO. LLC	N/A	DEMAND LETTER RE: BREACH OF CONTRACT	N/A	PENDING
				FIFTEENTH JUDICIAL CIRCUIT OF FLORIDA	
7.0	SKYLINE BIOPHARMA LLC	CIVIL CASE NO E02049 CC 6402MB		205 N DIXIE HWY WEST PALM BEACH. FL 33401	PENDING
7.8	ONTLINE DIOPHARINA LLC	CIVIL CASE NO. 502018-CC-6102MB	BREACH OF CONTRACT	WEST PALIVI DEACH, FL 33401	PENDING
			SPC RECEIVED A NOTICE FROM THE U.S.		
			DEPARTMENT OF LABOR DATED DECEMBER 4, 2017,		
			THAT SPC FAILED TO TIMELY REMIT PARTICIPANT		
7.9	U.S. DEPARTMENT OF LABOR	N/A	CONTRIBUTIONS INTO SPC'S 401(K) PLAN IN 2016.	N/A	PENDING
<u> </u>			DEBTOR RECEIVED NOTICE ON MARCH 15, 2017 OF		
			THREE VIOLATIONS OF DEBTOR'S INDUSTRIAL		
7.10	WEST PALM BEACH DEPARTMENT OF UTILITIES	N/A	WASTEWATER DISCHARGE PERMIT #C10152012	N/A	CONCLUDED

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SANCILIO & COMPANY, INC.

SOFA 11: PAYMENTS RELATED TO BANKRUPTCY

ber						
Number						
ine						
Ē	Name	Address	Email or Website Address	Who Made the Payment, If Not Debtor?	Dates	Total Amount
		801 BRICKELL AVE #1900		MIDCAP FINANCIAL TRUST		
11.1	CASSEL SALPETER & CO	MIAMI, FL 33131	HTTP://WWW.CASSELSALPETER.COM	875 THIRD AVENUE, NEW YORK, NY 10022	6/4/2018	\$150,000.00
		401 EAST LAS OLAS BLVD, STE 2000		MIDCAP FINANCIAL TRUST		
11.2	GREENBURG TRAURIG, P.A.	FORT LAUDERDALE, FL 33301	HTTPS://WWW.GTLAW.COM/EN	875 THIRD AVENUE, NEW YORK, NY 10022	5/18/2018	\$225,000.00
		401 EAST LAS OLAS BLVD, STE 2000		MIDCAP FINANCIAL TRUST		
11.3	GREENBURG TRAURIG, P.A.	FORT LAUDERDALE, FL 33301	HTTPS://WWW.GTLAW.COM/EN	875 THIRD AVENUE, NEW YORK, NY 10022	6/4/2018	\$165,000.00
		401 EAST LAS OLAS BLVD, STE 2000		MIDCAP FINANCIAL TRUST		_
11.4	GREENBURG TRAURIG, P.A.	FORT LAUDERDALE, FL 33301	HTTPS://WWW.GTLAW.COM/EN	875 THIRD AVENUE, NEW YORK, NY 10022	6/4/2018	\$75,000.00
		8269 E. 23RD AVENUE, SUITE 275		MIDCAP FINANCIAL TRUST		
11.5	JND CORPORATE RESTRUCTURING	DENVER, CO 80238	HTTP://WWW.JNDLA.COM	875 THIRD AVENUE, NEW YORK, NY 10022	6/4/2018	\$10,000.00
44.0	=	4909 N 44TH ST			4/47/0040	*** *** ***
11.6	MCA FINANCIAL GROUP, LTD	PHOENIX, AZ 85018	HTTP://WWW.MCA-FINACIAL.COM		4/17/2018	\$10,000.00
44.7	=	4909 N 44TH ST			4/05/0040	A40.000.50
11.7	MCA FINANCIAL GROUP, LTD	PHOENIX, AZ 85018	HTTP://WWW.MCA-FINACIAL.COM		4/25/2018	\$19,062.58
44.0	=	4909 N 44TH ST			= (0 (0 0 4 0	040.007.07
11.8	MCA FINANCIAL GROUP, LTD	PHOENIX, AZ 85018	HTTP://WWW.MCA-FINACIAL.COM		5/2/2018	\$18,337.87
11.0	=	4909 N 44TH ST PHOENIX, AZ 85018			= (0 (0 0 4 0	*** *** ***
11.9	MCA FINANCIAL GROUP, LTD		HTTP://WWW.MCA-FINACIAL.COM		5/9/2018	\$16,309.66
11 10	MOA FINANIOIAL ODOLID LED	4909 N 44TH ST PHOENIX, AZ 85018	LITTO / /AAAAAA AAGA FINIAGIAL GOMA		E/47/0040	647 700 54
11.10	MCA FINANCIAL GROUP, LTD	PHOENIX, AZ 85018 14909 N 44TH ST	HTTP://WWW.MCA-FINACIAL.COM	MIDCAP FINANCIAL TRUST	5/17/2018	\$17,760.51
11 11	MCA FINANCIAL GROUP, LTD	PHOENIX. AZ 85018	LITTE //A/A/A/A/A/A/A/A/A/A/A/A/A/A/A/A/A/A/	875 THIRD AVENUE, NEW YORK, NY 10022	E/40/2040	£4.4.4 E00.00
11.11	INICA FINANCIAL GROUP, LTD	14909 N 44TH ST	HTTP://WWW.MCA-FINACIAL.COM	MIDCAP FINANCIAL TRUST	5/18/2018	\$144,500.00
11 12	MCA FINANCIAL GROUP, LTD	PHOENIX, AZ 85018	HTTP://WWW.MCA-FINACIAL.COM	875 THIRD AVENUE, NEW YORK, NY 10022	6/4/2018	¢50,000,00
11.12	INICA FINANCIAL GROUP, LTD	111021117, 72 00010	HTTP://WWW.WIVICA-FINACIAL.COM	O/O ITHIND / WEIGH, NEW TORK, NT 10022		,
1			1	1	TOTAL:	\$900.970.62