







September 7, 2018

The Honorable Seema Verma Administrator Centers for Medicare & Medicaid Services Department of Health and Human Services Attention: **CMS-1693-P** Mail Stop C4-26-05 7500 Security Boulevard Baltimore, MD 21244-1850

Re: Revisions to Payment Policies under the Physician Payment Schedule and Other Revisions to Part B for CY 2019; File Code CMS-1693-P.

Dear Administrator Verma:

The Advocacy Council of the American College of Allergy, Asthma and Immunology (ACAAI) together with its sponsoring organization, the ACAAI, the American Academy of Allergy, Asthma and Immunology (AAAAI), and the American Academy of Otolaryngic Allergy (AAOA) appreciate this opportunity to submit comments on the proposed changes to the physician fee schedule rule for 2019 as published in the July 27, 2018 Federal Register.

The Advocacy Council and the ACAAI represent the interests of over 6,000 allergistsimmunologists and allied health professionals. Its members provide patient services across a variety of settings ranging from small or solo physician offices to large academic medical centers. Established in 1943, the American Academy of Allergy, Asthma & Immunology (Academy) is a professional association with nearly 7,000 members in the United States, Canada and 72 other countries. This membership includes allergist/immunologists (A/I), other medical specialists, allied health and related healthcare professionals—all with a special interest in the research and treatment of patients with allergic and immunologic diseases. The AAOA represents approximately 2500 board-certified otolaryngologists who specialize in treatment of allergy and allergic diseases.

Our comments focus on four issues: (1) the cost of venom antigens used in treating allergies to stinging insects (CPT Codes 95145-95149); (2) the proposal to reduce the supply cost for inhalant antigens used in allergen immunotherapy (CPT Codes 95144 and 95165); (3) the proposed change in the allergy/immunology indirect practice cost index (IPCI) resulting from the consolidation of evaluation and management (E&M) office visit codes and the creation of a

separate "specialty" for E&M office visits; and (4) the multiple procedure payment reduction (MPPR) policy.

1. Venom Immunotherapy Costs

A. Background

Venom immunotherapy is used to prevent allergic reactions, including potentially fatal anaphylaxis, in individuals with allergies to stinging insects. Approximately 40 Americans die of allergic reactions to stinging insects every year and it is estimated that potentially life-threatening systemic reactions to insect stings occur in 0.4% to 0.8% of children and 3% of adults.¹ Venom immunotherapy, the only curative treatment, involves injecting small amounts of stinging insect venom over a period of at least 3-5 years, and sometimes longer, to lessen their sensitivity.² Individuals receiving injections are very unlikely to have an anaphylactic reaction if stung; however, they are at risk if venom immunotherapy is discontinued.³ If reimbursement does not respond to these recent documented increases in the cost of venoms used for therapy, their access to care will be in jeopardy.

B. Venom Antigen Costs (SH009 and SH010)

In late 2017, one of the two manufacturers of venom antigens, ALK, Inc., decided to stop manufacturing venoms for sale in the United States. This left one other company (Hollister Stier) with a monopoly resulting in a sharp increase in its prices for venom allergens. Some allergists are paying double or even triple what they paid in the past. Without another source for venoms, allergists have been forced to pay these inflated prices in order to continue to treat their patients despite the fact that the cost of the venom alone is currently more than Medicare reimbursement for the entire service. They incur an out of pocket loss with each administration. With the cost of the venom alone substantially exceeding reimbursement, a number of allergists have decided to stop providing venom immunotherapy and we expect those numbers to increase.

There are two supply items for venom immunotherapy: SH009 (single antigen) and SH010 (3-vespid mix). Current 2018 direct cost inputs for these items are \$20.140 and \$44.050, respectively. As a result of the study done by its contractor, StrategyGen, CMS is proposing to increase the direct cost inputs to \$27.360 and \$51.320, respectively, to be phased in over 4 years. While we appreciate that CMS is proposing to use higher direct costs in calculating reimbursement for these codes (95145-95149) the proposed costs are still significantly below current 2018 costs. For example, the venom antigen cost for the 3-vespid mix (CPT Code 95147) is currently \$63.09 while total reimbursement for the service is \$51.48.

¹ Golden BK, et al. Stinging insect hypersensitivity; a practice parameter update 2016. Ann Allergy Asthma Immunol 118 (2017) 28e54;

https://www.aaaai.org/Aaaai/media/MediaLibrary/PDF%20Documents/Practice%20and%20Parameters/Stinginginsect-hypersensitivity-2016.pdf.

² Ibid.

³ Ibid.

According to its report, StrategyGen collected prices from a data base where large health systems submit negotiated purchase orders. It does not appear that they solicited data from small allergy practices or solo practitioners. Therefore, it is unlikely that these prices reflect venom allergen costs paid by the majority of allergists who do not have the negotiating power of large health systems.⁴ In addition, that data may not reflect the total 2018 increase in venom prices.

According to invoices collected from allergists around the country and included with our comments, the <u>current per cc(ml) cost of SH009 (single venom antigen) is \$30.93.</u> This represents an average of the per cc(ml) cost of honey bee (\$25.38) and wasp (\$36.38) which are the two most commonly used single venom antigens. ⁵ <u>The cost of SH010 (3-vespid mix) is</u> <u>\$63.09 per cc(ml).</u>⁶

C. Effective Date

In the proposed rule CMS asks for comments on whether it should phase-in new supply and equipment costs over four years. While we understand CMS' interest in a smooth transition, we believe the spike in venom antigen costs requires immediate full implementation of these prices in 2019. Therefore, we ask that the direct cost inputs requested above and supported by invoices, be implemented in their entirety for the 2019 fee schedule year. If the new cost inputs are delayed, this will exacerbate the growing patient access problem as more and more allergists will stop providing this treatment.⁷

<u>Request:</u> Based on the invoices in **Attachment A** and **Attachment B** to these comments we ask:

- a) That the cost input for 1cc (1ml) of SH009 (single venom antigen) be increased to \$30.93 to take effect January 1, 2019.
- b) That the cost input for 1cc (1ml) of SH010 (3-vespid mix) be increased to \$63.09 to take effect January 1, 2019.

2. Inhalant Allergen Immunotherapy Costs

A. Background

⁴ A 2010 survey by the ACAAI of allergist distribution by practice type shows 28% in solo practice and 22% in groups of 2 or 3. In contrast only 14% are in large academic practices.

⁵ 3-Vespid mix can be purchased in vials of 5ccs and 12 ccs. The price of the 12ccs is slightly less. Our recommendation reflects the average.

⁶ The invoices were collected from allergists around the country. The cost of the vials were divided by the number of ccs to get the per cc cost. The number of ccs in each vial is indicated on the invoice, with the exception of the mixed-wasp venom which was not specified by the manufacturer. To fill in this gap, we obtained the item numbers from the manufacturer's website (Attachment B) and matched them to the invoices to calculate the cost per cc.

⁷ We also point out that as a result of the proposed IPCI change, reimbursement for venom immunotherapy would go down in 2019 despite the proposed more modest increase in venom costs. This is addressed elsewhere in our comments.

Allergen specific immunotherapy is the only treatment known to provide long-term benefit and alter the course of allergic disease.⁸ Allergen immunotherapy also reduces health care costs. In a groundbreaking study involving an analysis of 10-years of Medicaid claims (1997-2007) in Florida, evidence showed that over an 18-month period, children with allergic rhinitis who received allergen-specific immunotherapy incurred 42 percent lower per-patient health care costs compared with those who did not receive allergen-specific immunotherapy that translated into a savings of \$3,865 per patient.⁹ A similar analysis involving claims data for adult patients was equally compelling. Over 18 months, health care costs for adults with allergic rhinitis who received allergen-specific immunotherapy were 30 percent lower than those who did not – a savings of \$4,397 per patient.¹⁰

B. Antigen Costs

CMS is recommending, in the proposed rule, a decrease in the cost of 1cc (1ml) of inhalant antigens (SH007) used in CPT codes 95144 and 95165 from the current \$6.72 to \$4.78. We strongly disagree with this proposal. The proposed 29 percent decrease in the antigen costs would have a major negative impact on reimbursement for CPT Code 95165 that does not reflect the current reality of antigen costs. Antigens account for 92 percent of the direct costs of this service and PE RVUs are 81% of total RVUs. As such, we would anticipate that reimbursement would decline by over 25 percent as a result of this change alone. This proposed decrease is particularly confounding given that the AMA RUC reviewed the PE inputs for these codes in 2016 and determined that they were accurate at that time.

Since the publication of the proposed rule, CMS staff has informed us that StrategyGen has done additional analysis and is now recommending a cost input that is higher than the current \$6.70. We understand that the new recommended price, which CMS has not disclosed to us, was based on the original "typical" vials used to establish the 2001 cost input updated to reflect current antigen costs. Although we do not know the amount currently being recommended, we are not surprised that it is more than the \$6.70 given the increases in costs in the last few years.

We are concerned however, that even the new higher recommended price may not reflect the true amounts paid by the majority of providers. This is because StrategyGen appears to have relied largely on prices collected from a data base where large health systems submit negotiated purchase orders and not the prices paid by actual allergy practices - most of which are small practices consisting of 1 to 3 physicians. Therefore, it is unlikely that these prices reflect amounts paid by the majority of allergists who, unlike large health systems, do not have the power to negotiate significant discounts.¹¹

⁸ Cox L, Atwater S. *Allergen immunotherapy for allergic rhinitis and asthma*. Drug Benefit Trends 2008;20:1-6. 9 Hankin CS, Cox L, Wang Z, Bronstone A. Allergy immunotherapy: reduced health care costs in adults and children with allergic rhinitis. J Allergy Clin Immunol 2013; 131:1084–1091 (Tab 10). 10 Id.

¹¹ A 2010 survey by the ACAAI of allergist distribution by practice type shows 28% in solo practice and 22% in groups of 2 or 3. In contrast only 14% are in large academic practices.

The process of determining the cost for 1cc (1ml) of mixed antigens is complex, especially when compared to costs of other supply items. When allergists prepare allergen immunotherapy, they typically prepare either 5cc or 10cc vials that are made up of several different antigens.¹² The antigens used depend on the patient's sensitivities and the quantities vary based on the therapeutic dose. The current cost input of \$6.70 was developed in 2001 based on the average of two "typical" 10cc vials. Most patients on allergen immunotherapy receive injections from at least two vials because certain antigens (e.g., molds) cannot be mixed with others.

Our specialty societies intend to undertake a review and analysis of antigen costs used for allergen immunotherapy (CPT Codes 95144 and 95165) in light of changes in allergen immunotherapy that have taken place since 2001. We will be looking at recent clinical guidelines on therapeutic doses and considering whether the mix of antigens used in 2001 to price a typical 1cc of antigen are still appropriate and will provide CMS with recommendations in the near future. (Given the complexity of this task, it was simply not possible to accomplish this before the end of this comment period.) In the meantime, it is clear that some increase in the direct cost of antigens is needed based on recent price increases.

Request: We ask that CMS implement the higher direct cost input determined by StrategyGen. In the alternative, CMS should maintain the current input.

CMS also requested comments on supply and equipment pricing for percutaneous tests (CPT Code 95004). This code was reviewed by the RUC in October of 2016 and it appears that while the direct practice expense costs for the code will decrease by \$0.01 from \$3.03 in 2018 to \$3.02 in 2019, if the proposed rule is implemented, the costs for diagnostic allergens (SH092) used in furnishing this service would not change.

3. Reduction in the Allergy/Immunology IPCI

As a result of CMS' proposal to consolidate certain evaluation and management (E&M) codes and the creation of a new E&M "specialty," the indirect practice cost index for allergy/immunology would be reduced by 36 percent resulting in drastic decreases in reimbursement for all allergy and immunology CPT codes. Other specialties also experience major cuts in their IPCI, while others would receive major increases. None of these changes in specialty IPCIs are related to any actual changes in specialty indirect practice expense. They also undo much of what CMS hopes to accomplish through its updating of supply and equipment costs. For example, although the venom antigen supply costs used in CPT Codes 95145-95149 are proposed to increase, reimbursement for those codes would actually go down significantly. Other services such as allergy skin testing (CPT Code 95004) would decline by 20% in 2019 despite the fact that this code was reviewed by the RUC in 2016 and underwent a 20 percent decrease in RVUs due to changes in supply costs. The decreases in the propose

¹² Contrary to StrategyGen's understanding, as set forth in an email from CMS Staff to Rebecca Burke dated, August 21, 2018, allergists rarely prepare 1ml of allergen immunotherapy.

rule would be on top of the over 20 percent reduction resulting from the RUC's revaluation of the PE inputs for this code in 2016.¹³

A redistribution of this magnitude not only creates enormous financial instability, it also ignores statutory requirements that payments under the physician fee schedule be resource based. Under Section 1848 of the Social Security Act, the Secretary must "establish, by regulation, fee schedules that establish payment amounts for all physicians' services". 42 U.S.C. § 1395w-4(b)(1). The payment amount for each service is generally based on the product of the relative value for the service, the conversion factor for the year, and the geographic adjustment factor for the fee schedule area. *Id.* The relative value is determined by combining the work, practice expense, and malpractice components for each service to produce a single relative value. *Id.* § 1395w-4(c)(2)(A)(i). The statute directs that the practice expense component must be resource-based—i.e., based on "the portion of the resources used in furnishing the service." *Id.* § 1395w-4(c)(1)(B). The reductions in the specialty IPCIs resulting from the E&M consolidation proposal violate the requirement that the practice expense RVUs for a service be "determined based entirely on such relative practice expense resources." *Id.* § 1395w-4(c)(2)(C)(ii).

The Secretary's proposal also fails to meet the transparency requirements of the Protecting Access to Medicare Act of 2014 (PAMA). The Secretary must "disclose the information source and discuss the use of such information in such determination of relative values through notice and comment rulemaking." *Id.* § 1395w-4(c)(2)(M)(v)(I). In the Proposed Rule, CMS fails to explain the reason for these major shifts and does not address them in its impact analysis.

Specifically, CMS at no point explains the basis for the change in specialty IPCIs. In fact, the term" IPCI" appears not once in the 1473 pages of text that makes up the proposed rule. By omitting such an explanation entirely from the Proposed Rule, CMS has failed to meet the Secretary's obligation under the transparency provisions of the statute. In addition, by failing to provide or discuss the IPCI changes CMS has failed to meet its obligation to provide interested stakeholders an opportunity for meaningful comment under the Administrative Procedure Act (APA). See 5 U.S.C. § 553(c); *Connecticut Light & Power Co. v. Nuclear Regulatory Comm'n*, 673 F.3d 525, 530-31 (D.C. Cir. 1982); *Shands Jacksonville Med. Ctr. v. Burwell*, 139 F.Supp.3d 240, 260-62 (D.D.C. 2015).

4. Multiple Procedure Payment Reduction

For many of the same reasons as discussed above, with respect to the IPCIs, we do not support the multiple procedure payment reduction proposal (MPPR). However, the MPPR is also flawed because it would reduce payment for services that have already been reduced through the RUC process and accepted by CMS. Wherever E&M services are typically reported with procedures, the RUC's Relativity Assessment Workgroup has made sure that work and direct costs assigned to the procedure are not duplicative of resources included in the E&M service. The

¹³ It is unclear whether the RVUs in the proposed rule take into account the 2-year phase-in required by Section 1848(c)(7) of the Act whenever RVUs are decreased by 20 percent or more.

proposed MPPR policy ignores this process and the agency's history of working with the RUC to eliminate duplication.

While we appreciate CMS' effort to simplify the E&M codes and documentation, it should not do so by abandoning basic principles of relativity that underlie the Medicare physician fee schedule. The proposed E&M proposal is not workable and we ask that CMS delay its implementation and work with the AMA and medical specialty societies to develop a better and less destabilizing approach. As the agency knows, the AMA CPT Editorial Panel and the RUC have already created a workgroup to develop a coding proposal to simplify documentation of E&M office visits. We strongly urge that the current proposal be deferred while this process moves forward. We also urge that CMS abandon the proposed MPPR policy.

We thank you for your careful consideration of these comments. If you have any questions, please do not hesitate to contact us.

Sincerely,

Stephen A. Imbeau, MD Chair, Advocacy Council of the ACAAI

Bradley E. Chipps, MD President, American College of Allergy, Asthma and Immunology

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Robert Wood, MD President, American Academy of Allergy, Asthma and Immunology

Douglas Dawson, MD Socioeconomic Chair, American Academy of Otolaryngic Allergy

Cc: Marge Watchorn Michael Soracoe Isadora Gill Edith Hambrick, MD ATTACHMENT A: SINGLE VENOM INVOICES (HONEY BEE AND WASP) ATTACHMENT B: 3-VESPID MIX INVOICES ATTACHMENT C: HOLLISTER-STIER CATALOG LISTING



ATTACHMENT A

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6786UY	MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM A1700080	EA	2	722.90	1,445.80
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Jubilant HollisterStier LLC

PO Box 3145

Spokane WA 99220 800-992-1120



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6784UX3	3 Species Wasp MD FG WASP VENOM A1800018	EA	1	437.80	437.80
3786UY	MULTIDOSE VENOM 3900MCG 12DOSE	EA	1	722.90	722.90

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Jubilant HollisterStier LLC

PO Box 3145 Spokane WA 99220 800-992-1120

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Wasp venom \$205.81 on 2/13/18 honey bee venom \$143.17 on 2/13/18

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5781UX	MULTIDOSE VENOM 1300MCG 12DOSE HONEY BEE VENOM A1800016	EA	1	304.60	304.60
3784UX3	3 Species Wasp MD FG	EA	1	437.80	437.80



Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

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Jubilant HollisterStier LLC

PO Box 3145 Spokane WA 99220 800-992-1120

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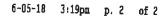
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Order Acknowledgement

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Page 1 of 1

Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

Sold To

Omaha, NE US 68124

Ship To



Omaha, NE US 68124

Sales Order Number 342551 Date 06/05/2018 Purchase Order Number N/A Customer No. 32809000 Currency USD Inco Terms FOB Spokane Payment Terms Net 30 days from invoice date

Product	Description	Quantity Ordered	Unit Price	Amount
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6784UX3	3 Species Wasp MD FG A1800018 WASP VENOM	1.000 EA 4		437.80
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Excluding Freight Charges Actual Freight Charges Will Apply

Taxes	Amount	
State	0.00	
County	0.00	
City	0.00	
Local	0.00	



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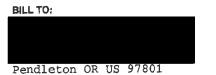
Finance - AR

Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

INVOICE DATE	PAGE	OF	INVOICE NO
06/05/2018	1	2	90815542
DATE ORDER RECEIVED		PURCHA	SE ORDER NO.
05/22/2018	PO516924		

REMITTANCE INFORMATION BELOW

509.482.3074 SHIP TO:



Eugene OR US 97401

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
32925000	341296	90815542	Net 30 days from involce date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**				
	Pick List# 0080584653 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
6781UX	MULTIDOSE VENOM 1300MCG 12DOSE HONEY BEE VENOM A1800016	EA	1	304.60	304.60
6786UY	MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM A1800006	EA	2	722.90	1,445.80
6784UX3	3 Species Wasp MD FG	EA	1	437.80	437.80

2



Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

Finance - AR 509.482.3074

INVOICE DATE	PAGE	OF	INVOICE NO.
05/29/2018	1	2	90813076
DATE ORDER RECEIVED		PURCHA	SE ORDER NO.
05/23/2018	N/A		

REMITTANCE INFORMATION BELOW

BILL TO:

SHIP TO:

Cumberland RI US 02864

Cumberland R	LUS 02864
--------------	-----------

 CUSTOMER NUMBER
 JHS ORDER NO.
 INVOICE NO.
 TERMS

 60190700
 341334
 90813076
 Net 30 days from invoice date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED		AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**				
	Pick List# 0080581722 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
6784UX3	3 Species Wasp MD FG WASP VENOM	EA	1	437.80	/ 437.80
6786UY	A1800018 MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM A1800008 TAXES	EA	1	722.90	722.90



Jubilant HollisterStier LLC PO Bbx 3145 Spokane WA 99220 800-592-1120

INVOICE DATE	PAGE	OF	INVOICE NO
06/14/2018	1	2	90818706
DATE ORDER RECEIVED		PURCHA	SE ORDER NO.
06/14/2018	N/A		

Finance - AR 005.332 3074

BILL TO:

Dover DE US 19904

SHIP TO:



 CUSTOMER NUMBER
 JHS OR DER NO.
 INVOICE NO.
 TERMS

 73504000
 343 536
 90818706
 Net 30 days from invoice date

 ITEM NO.

 DESCRIPTION
 U/M
 QTY SHIPPED
 UNIT PRICE
 AMOUNT

 ITEM NO.

	TO ORDER CALL 800-992-1120 Pick List# 0080586736 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE		
6784UX3	3 Species Wasp MD FG WASP VENDM A1800018	EA	1 437.80 437.80
6786UY	MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM A1800006 TAXES	EA	1 722.90 722.90
		<u>k</u> -	1

Return to Comments



Battle Creek MI US 49017

INVOICE

ATTACHMENT B

Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120 Phochage - AR

INVOICE DATE	PAGE	OF	INVOICE NO
05/03/2018	1	2	90803800
DATE ORDER RECEIVED		PURCHA	SE ORDER NO.
05/02/2018	N/A		

BILL TO:

860.482.5074

SHIP TO:

HIP TO:

Battle Creek MI US 49017

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
30499000	339301	90803800	Net 30 days from invoice date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**				
	Pick List# 0080576763 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
2678JW	Bulk Gly 1:20 w/v 50mL WILLOW, BLACK U1700684	EA	1	283.40	283.40
6786UY	MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM A1800006	EA	10	722.90	7,229.00
	TAXES				452.48



Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

The mast of The sale with which we

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	PAGE	OF .	INVOICE NO
05/22/2018	1	2	90810568
DATE ORDER RECEIVED		PURCH	ASE ORDER NO.
05/21/2018	Melissa		

Finance - AR 509.482.3074

BILL TO:

Brighton MI US 48116

SHIP TO:

Brighton MI US 48116

CUSTOMER	NUMBER JHS ORDER N	NO. INVOICE NO.	TERMS
900012	271 341085	90810568	Pay immediately w/o deduction

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**				
	Pick List# 0080580937 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
6781UX	MULTIDOSE VENOM 1300MCG 12DOSE HONEY BEE VENOM A1800016	EA	1	304.60	304.60
6784UX3	3 Species Wasp MD FG WASP VENOM A1800018	EA	1	437.80	437.80
6786UY	MULTIDOSE VENOM 3900MCG 12DOSE	EA	1	722.90	722.90

BILL TO:



INVOICE

Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

INVOICE DATE	PAGE	OF	INVOICE NO
05/09/2018	2	2	90805921
DATE ORDER RECEIVED	PURCHASE ORDER NO.		
05/09/2018	5918		

REMITTANCE INFORMATION BELO

SHIP TO:

Greenwood IN US 46143

Greenwood IN US 46143

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
72419100	339985	90805921	Net 30 days from Invoice date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	HONEY BEE VENOM A1800016				
6786UY	MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM	EA	3	722.90	2,168.70
	A1800006				
	TAXES	1			
	FREIGHT				29.02

MVV

\$ 339.85 m 2/13/18

SHIPPING ERRORS MUST BE REPORTED WITHIN 7 DAYS AFTER RECEIPT OF MERCHANDISE. ITEMS MAY NOT BE RETURNED FOR CREDIT OR EXCHANGE WITHOUT PRIOR WRITTEN AUTHORIZATION, WHICH MUST ACCOMPANY ALL RETURNED GOODS.

NET SALES AMOUNT	MISCELLANEOUS CHARGES	IN TA)	(ES	TERMS DISCOUNT	AMOUNT DUE	
3,687.24	29.02	State County City Local	0.00 0.00 0.00 0.00	0.00	3,716.26	Please remit to: Jubilant HollisterStier LLC 14110 Collections Center Drive Chicago, IL 60693-0141

PLEASE RETURN THIS STUB WITH REMITTANCE

BILL TO	TELEPHONE
	317-865-0055
PURCHASE ORDER NUMBER	JHS ORDER NO
	339985

Please remit to: Jubilant HollisterStier LLC 14110 Collections Center Drive Chicago, IL 60693-0141

CUSTOMER	INVOICE NO.	INVOICE DATE	TERMS DISCOUNT	TERMS	AMOUNT DUE
72419100	90805921	05/09/2018	0.00	Net 30 days from invoice date	3,716.26

800350-H09 Rev. 1/13



Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

Finance - AR 509.482.3074

INVOICE DATE	PAGE	OF	INVOICE NO.
05/29/2018	1	2	90813076
DATE ORDER RECEIVED	PURCHASE ORDER NO.		
05/23/2018			N/A

ų - 4

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REMITTANCE INFORMATION BELOW

BILL TO:

SHIP TO:

Cumberland RI US 02864

Cumberland RI US 02864

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
60190700	341334	90813076	Net 30 days from involce date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED		AMOUNT
	FOR CUSTOMER SERVICE OR "TO ORDER CALL 800-992-1120"				
	Pick List# 0080581722 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
6784UX3	3 Species Wasp MD FG WASP VENOM A1800018	ËA	1	437.80	/ 437.8
6786UY	MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM A1800006	EA	1	722.90	722.9
	TAXES		1		

06/04/2018 14:18 2032



Jubi ant HollisterStier LLC PO Hox 3145 Spol ane WA 99220 800- 992-1,120

INVOICE DATE PAGE OF INVOICE NO. 05/08/2018 1 2 90805538 DATE-OBDER RECEIVED PURCHASE ORDER NO. 05/08/2018 N/A

Finance - AR 509.482.074

BILL TO:			

Fairfield CT US 06824



Fairfield CT US 06824

USTOMER NUMBER	INS C RDER NO.	INVOICE NO.	TERMS
and the second second		90805538	Net 30 days from invoice date
60193900	39846	90805538	Net 30 days from invoice date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	FOR C ISTOMER SERVICE OR" **TO OR DER CALL 800-992-1120		10 1		
	Pick List : 0080578213 EACH IT EM CONFIRMED				
6784PG3	ALL ITE IS NON RETURNABLE 3 Specie :: Wasp Bulk PG WASP VIENOM	I:A	4	204.50	818.00
6798PK	A17000' S 5-DOSE BOLK 1650MCG 5%MANNITCL MIXED ' ESPID VENOM	IEA	4	329.70	1,318.80
	A17000:12 TAXES				



6/15/10

Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

Finance - AR

509.482.3074

BILL TO:					
Rogers	AR	US	72758		

INVOICE DATE	PAGE	OF	INVOICE NO.
06/04/2018	1	1	90815280
DATE ORDER RECEIVED		PURCHA	ASE ORDER NO.
05/31/2018>			N/A

REMITTANCE INFORMATION BELOW

SHIP TO:

Rogers AR US 72758

CUSTOMER	NUMBER	JHS ORDER NO.		CE NO.		<u> </u>	T	ERMS	
900047	734	342101	9081	5280			Net 30 days	from involce	e date
ITEM NO	D.	DESCRIP	NOIT	U/	/м	QTY SHIPPI	ED L	JNIT PRICE	AMOUNT
	F	OR CUSTOMER SE	RVICE OR						
	T	O ORDER CALL 80	0-992-1120						
	Pic	k List# 0080583643							
	EA	CH ITEM CONFIRM	ED						
	AL	LITEMS NON RETU	JRNABLE	1					
6786UY	ML	ILTIDOSE VENOM 3	3900MCG 12D	OSE EA	2			722.90	1,445.8
	MD	KED VESPID VENO	М		- 1				
	A1	800006				1	/haga	/FD TO	VAN
	ТА	XES				Date	Dall	17201	D
	FR	EIGHT					UT	5020-	400 29.9
						Acco	ut 11, 17	AH	
		ED WITHIN 7 DAYS AFTE CREDIT OR EXCHANGE W		T			CCOMPANY AL	L RETURNED G	dobs.
	MUST BE REPORT RETURNED FOR MISCELLANE CHARGES	OUS AR 1	R RECEIPT OF ME	RCHANDISE. RITTEN AUTHO TERMS DISCOU	S A	N, WHICH MUST A	CCOMPANY ALI	L RETURNED G	dods.
NET SALES	MISCELLANE	OUS AR 1		TERM	S A		CCOMPANY ALI		dods.
NET SALES	MISCELLANE	OUS AR 1	TAXES	DISCOU	S A	MOUNT DUE	Please re Jubilant	emit to: Hollister:	Stier
NET SALES AMOUNT	MISCELLANE	OUS AR 1 9.90 State	0.00	TERMS DISCOU	S A	MOUNT DUE	Please ro Jubilant 14110 Co	emit to: Hollisters ollections	Stier LLC
NET SALES AMOUNT	MISCELLANE	9.90 State County	0.00 0.00		S A	MOUNT DUE	Please ro Jubilant 14110 Co	emit to: Hollister:	Stier LLC
NET SALES AMOUNT	MISCELLANE	9.90 State County City	0.00 0.00 0.00		S A	MOUNT DUE	Please ro Jubilant 14110 Co	emit to: Hollisters ollections	Stier LLC
NET SALES AMOUNT	MISCELLANE	9.90 State County City	0.00 0.00 0.00 0.00		S A JNT 0.00	MOUNT DUE 1,475.70	Please ro Jubilant 14110 Co	emit to: Hollisters ollections	Stier LLC
NET SALES AMOUNT	MISCELLANE CHARGES 2	PLEASE RETUR	0.00 0.00 0.00 0.00 0.00 0.00 0.00	TERMS DISCOU	S A JNT 0.00 H REM	MOUNT DUE 1,475.70	Please ro Jubilant 14110 Co	emit to: Hollister ollections , IL 60693	Stier LLC
NET SALES AMOUNT	MISCELLANE	PLEASE RETUR	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0		S A JNT 0.00 H REM	MOUNT DUE 1,475.70	Please ro Jubilant 14110 Co Chicago Please re	emit to: Hollister ollections , IL 60693	Stier LLC Center Drive 3-0141
NET SALES AMOUNT	MISCELLANE CHARGES 2	PLEASE RETUR	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	TERMS DISCOU	S A JNT 0.00 H REM	MOUNT DUE 1,475.70	Please re Jubilant 14110 Co Chicago Please re Jubilant	emit to: Hollisters ollections , IL 60693 	Stier LLC Center Drive 3-0141
NET SALES AMOUNT	MISCELLANE CHARGES 2	PLEASE RETUR	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	TERMS DISCOU	S A JNT 0.00 H REM	MOUNT DUE 1,475.70	Please re Jubilant 14110 Co Chicago Please re Jubilant 14110 Co	emit to: Hollisters ollections , IL 60693 	Stier LLC Center Drive -0141 Stier LLC Center Drive
NET SALES AMOUNT 1,445.80	MISCELLANE CHARGES 2 2 BILL	OUS AR 1 9.90 State County City Local PLEASE RETUR	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	TERMS DISCOU	S A INT 0.00 H REM	MOUNT DUE 1,475.70	Please re Jubilant 14110 Co Chicago Please re Jubilant 14110 Co	emit to: Hollisters ollections , IL 60693 	Stier LLC Center Drive -0141 Stier LLC Center Drive
NET SALES AMOUNT 1,445.80	MISCELLANE CHARGES 2 2 BILL	PLEASE RETUR	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	TERMS DISCOU	S A INT 0.00 H REM	MOUNT DUE 1,475.70	Please re Jubilant 14110 Co Chicago Please re Jubilant 14110 Co	emit to: Hollisters ollections , IL 60693 	Stier LLC Center Drive -0141 Stier LLC Center Drive
NET SALES AMOUNT 1,445.80 P N/A	MISCELLANE CHARGES 2 2 BILL	OUS AR 1 9.90 State County City Local PLEASE RETUR	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	TERMS DISCOU	S A INT 0.00 H REM	MOUNT DUE 1,475.70	Please re Jubilant 14110 Co Chicago Please re Jubilant 14110 Co	emit to: Hollisters ollections , IL 60693 	Stier LLC Center Drive -0141 Stier LLC Center Drive
NET SALES AMOUNT 1,445.80 P N/A CUSTOMER	MISCELLANE CHARGES 2 2 BILL BILL	OUS AR 1 9.90 State County City Local PLEASE RETUR TO DER NUMBER	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	TERMS DISCOU	S A INT 0.00 H REM E	MOUNT DUE 1,475.70	Please re Jubilant 14110 Co Chicago Please re Jubilant 14110 Co Chicago,	emit to: Hollisters ollections , IL 60693 	Stier LLC Center Drive 3-0141 Stier LLC Center Drive -0141

JUN-12-2018 TUE 01:48 PM

FAX:906 225 4784

P.003



Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

INVOICE

INVOICE DATE	PAGE	QF	INVOICE NO.
05/29/2018	1	2	90813059
DATE ORDER RECEIVED		PURCHA	SE ORDER NO.
05/21/2018		CRE	DIT CARD

Finance - AR 509.482.3074

BILL TO:

Marquette MI US 49855

SHIP TO:

Marquette MI US 49855

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
50076200	341102	90813059	Net 30 days from invoice date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**				
	Pick List# 0060581689 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
6781UX	MULTIDOSE VENOM 1300MCG 12DOSE HONEY BEE VENOM A1800016	EA	3	304.50	913.80
3786UY	MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM A1500006	EA	3	722.90	2,168.70
	TAXES				186.63

P.A.L.D



Studio City CA US 91607

INVOICE

Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

INVOICE DATE	PAGE	OF	INVOICE NO.
05/14/2018	1	1	90807709
DATE ORDER RECEIVED	PURCHASE ORDER NO.		
05/14/2018			N.H.

Finance - AR REMITTANCE (NFORMATION BELOW 509,482.3074

BILL TO:

SHIP TO:

Studio City CA US 91607

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMÓ
90001394	340442	90807709	Net 30 days from invoice date

ITEM NO.	DESORIFTION	UA	OTY SHIPPED	UNIT PRICE	AMOUNT
	"FOR CUSTOMER SERVICE OR" "TO ORDER CALL 800-992-1120"				
	Pick List# 0080579519 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
3786UY	MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM A18000005	EA 1		722.90	722.9
	TAXES FREIGHT				27.5

SHIPPING ERRORS SUST DE REPORTED WITHIN 7 DAYS AFTER REGISIPT OF MERCHANDISE. ITEMS MAY NOT BE RETURNED FOR CREDIT OF EXCHANGE WITHOUY PRIOR WRITTEN AUTHORIZATION, WHICH MUST ACCOMPANY ALL RETURNED GOODS.

NET GALES	MISCELLANEOUS CHARGES	CA .	AXE9	TERMS DISCOUNT	AMOUNT DUE	
722.90		State County City Local	0,00 0,00 0,00 0,00	0.00	750.45	Please remit to: Jubilant HollisterStier LLC 14110 Collections Center Driv Chicago, IL 60693-0141

PLEASE RETURN THIS STUB WITH REMITTANCE

BILL TO	TELEPHONE
	010-769-5998
PURCHASE ORDER NUMBER	JHS ORDER NO.
	340442

Please remit to: Jubilant HollisterStjer LLC 14110 Collections Center Drive Chicago, IL 60693-0141

CUSTOMER	INVOICE NO.	INVOICE DATE	TERMS DISCOUNT	TERMS	AMOUNT DUE
90001394	90807709	05/14/2018	0.00	Net 30 days from invoice date	750.45

800380-H09 Rev. 1/13

00/04/2018 3:16 PM FAX 8187695004



Norwalk CT US 06851

BILL TO:

Received.

INVOICE

Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120 **Finance - AR**

INVOICE DATE	PAGE	OF	INVOICE NO
05/03/2018	1	2	90803740
DATE ORDER RECEIVED		PURCHA	SE ORDER NO.
05/01/2018			N/A

509.482.3074

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	- E -	- 10	Ξ.

17 Am			
scampord	CTP HS	06902	

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
13874000	339149	90803740	Net 30 days from invoice date
			Her so days from invoice date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**			ONTINCE	AMOUNT
	Pick List# 0080576499 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
6781UX	MULTIDOSE VENOM 1300MCG 12DOSE HONEY BEE VENOM A1800016	EA	2	304.60	609.20
6784UX3	3 Species Wasp MD FG WASP VENOM A1800009	EA	3	437.80	1,313.40
5786UY	MULTIDOSE VENOM 3900MCG 12DOSE	EA	1	722.90	722.90





Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

INVOICE DATE	PAGE	OF	INVOICE NO.
04/04/2018	1	2	90793571
DATE ORDER RECEIVED		PURCHA	SE ORDER NO.
04/04/2018			N/A

REMITTANCE INFORMATION BELOW

BILL TO:

· · · · ·

Rockville MD US 20850

SHIP TO:

Rockville	MD	US	20850	

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
90003975	336400	90793571	Net 30 days from invoice date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**				
1	Pick List# 0080570475 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
6784UX3	3 Species Wasp MD FG WASP VENOM A1800009	EA	2	437.80	875.60
6786UY	MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM A1700080	EA	2	722.90	1,445.80
	TAXES				



Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

Finance - AR 509.482.3074

BILL TO:



Santa Barbara CA US 93105-4344

PAGE	OF	INVOICE NO.
1	2	90800438
	PURCHA	SE ORDER NO.
		N/A
	1	1 2

FORMATION BELOW

SHIP TO:



Santa Barbara CA US 93105-4344

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
27644100	338149	90800438	Net 30 days from invoice date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**				AMOUNT
	Pick List# 0080574285 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
6781UX	MULTIDOSE VENOM 1300MCG 12DOSE HONEY BEE VENOM A1800016	EA	4	304.60	1,218.40
3785UX	MULTIDOSE VENOM 1300MCG 12DOSE YELLOW JACKET VENOM A1700066	EA	1	364.20	364.20
786PK	5-DOSE BULK 1650MCG 5%MANNITOL	EA	1	329.70	329.70

p.2



Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

Finance - AR 509.482.3074

BILL TO:

Santa Barbara CA US 93105-4344

INVOICE DATE	PAGE	OF	INVOICE NO
04/25/2018	2	2	90800438
DATE ORDER RECEIVED		PURCHA	SE ORDER NO.
04/20/2018			N/A

REMITTANCE INFORMATION BELOW

SHIP TO:



Santa Barbara CA US 93105-4344

STOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
27644100	338149	90800438	Net 30 days from invoice date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	AMOUNT
	MIXED VESPID VENOM			
	A1700092			
	TAXES			
	FREIGHT			27.4

SHIPPING ERRORS MUST BE REPORTED WITHIN 7 DAYS AFTER RECEIPT OF MERCHANDISE. ITEMS MAY NOT BE RETURNED FOR CREDIT OR EXCHANGE WITHOUT PRIOR WRITTEN AUTHORIZATION, WHICH MUST ACCOMPANY ALL RETURNED GOODS.

NET SALES AMOUNT	MISCELLANEOUS CHARGES		CA TAXES	TERMS DISCOUNT	AMOUNT DUE	
1,912.30	27.42	State County City Local	0.00 0.00 0.00 0.00	0.00	1,939.72	Please remit to: Jubilant HollisterStier LLC 14110 Collections Center Drive Chicago, IL 60693-0141

PLEASE RETURN THIS STUB WITH REMITTANCE

BILL TO	TELEPHONE
	805-682-7385
PURCHASE ORDER NUMBER	JHS ORDER NO
N/A	338149

Please remit to: Jubilant HollisterStier LLC 14110 Collections Center Drive Chicago, IL 60693-0141

CUSTOMER	INVOICE NO.	INVOICE DATE	TERMS DISCOUNT	TERMS	AMOUNT DUE
27644100	90800438	04/25/2018	0.00	Net 30 days from involce date	1,939.72

800350-H09 Rev. 1/13

Jun. 12. 2018	1:34PM	E	No.	9919 P. 2
JUBILANT HOLLISTERSTIER	Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120 Finance - AR 509.482.3074	INVOICE DATE 05/21/2018 DATE ORDER RECEIVED 05/17/2018 REMINANCE INFORMATION BELOW	 	INVOICE NO. 90810157 IASE ORDER NO. Inderine Woolzle
BILL TO:	-	SHIP TO:		*

Oregon OH US 43616

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Oregon OH US 43616

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TEAMS	
63367300	340856	90810157	Net 30 days from invoice date	

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**				
24	Pick Lisi# 0080580484 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE		ν.		
6786PK	5-DOSE BULK 1650MCG 5%MANNITOL MIXED VESPID VENOM A1700092	EA	1	329.70	329.70
67 04 PG3	3 Species Wasp Bulk FG WASP VENOM A1700078	EA	(1) (1)	204.50	204.50
3786UY	MULTIDOSE VENOM 3900MCG 12DOSE	EA	2	722.90	1,445.80

Jun. 12. 2018	1:34PM		No	.9919 P. 3
SPA	INVOIC	E		
<u> </u>	Jubilant HollisterStier LLC	INVOICE DATE	PAGE OF	INVOICE NO.
[UBILANT	PO Box 3145 Spokane WA 99220	05/21/2018 DATE ORDER RECEIVED	2 2 PURC	90810157 HASE ORDER NO.
HOLLISTERSTIER	800-992-1120	05/17/2018	~	anderine Woolzle
	Finance - AR 509.482.3074	REDUTTANCE INFORMATION BELOW		a
BILL TO:		SHIP TOL		
Oregon OH US 43616		Oregon OH US 43616		<u>a</u>
	20 20			

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
63367300	340856	90810167	Net 30 days from involce date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	MIXED VESPID VENOM				
	A1800006				
	TAXES				/
	FREIGHT				\$1.0
X (1 1	(***

SHIPPING ERRORS MUST BE REPORTED WITHIN 7 DAYS AFTER RECEIPT OF MERCHANDISE. ITEMS MAY NOT BE RETURNED FOR CREDIT OR EXCHANGE WITHOUT PRIOR WRITTEN AUTHORIZATION, WHICH MUST ACCOMPANY ALL RETURNED GOODS.

NET SALES AMOUNT	MISCELLANEOUS CHARGES	OH TAXES		TERMS DISCOUNT	AMOUNT DUE	
1,980.00		State County Clly Local	0.00 0.00 0.00 0.00	0.00	2,011.08	Please remit to: Jubilant HollisterStler LLC 14110 Collections Center Drive Chicago, IL 60693-0141

PLEASE RETURN THIS STUB WITH REMITTANCE

BILL TO	TELEPHONE
ş.	419-693-2230
15	
PURCHASE ORDER NUMBER	JHS ORDER NO.
	340856

Please remit to: Jubliant HollisterStier LLC 14110 Collections Center Drive Chicago, IL 60693-0141

CUSTOMER	INVOICE NO,	INVOICE DATE	TERMS DISCOUNT	TERMS	AMOUNT DUE
63367300	90810157	05/21/2018	0.00	Net 30 days from Involce date	2,011.08

800350-H09 Rev. 1/13

3607331859

INVOICE



BILL TO:

Jubilant HollisterStier LLC PO Box 3145 · Spokane WA 99220 800-992-1120

INVOICE DATE	PAGE	OF	INVOICE NO
05/02/2018	1	2	90803433
DATE ORDER RECEIVED	PURCHASE ORDER NO.		
05/02/2018	N/A		

REMITTANCE INFORMATION BELOW

SHIP TO:

Bellingham WA US 98225

Bellingham WA US 98225

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
11169200	339371	90803433	Net 30 days from involce date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**				
	Pick List# 0080576840 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
6781PG	5-DOSE BULK 550MCG 5% MANNITOL HONEY BEE VENOM A1700087	EA	2	141.60	283.20
5786РК 🕂	5-DOSE BULK 1650MCG 5%MANNITOL MIXED VESPID VENOM A1700092	EA	2 *	329.70	659.40
2678JG	Bulk Gly 1:20 w/v 10mL	EA	1	81.57	81.57

EN/		INV	/OICE						
0.1		isterStier LLC		INVOICE DA	TE P	AGE	OF	INIVOI	CE NO.
MIRI AND	PO Box 3145			06/14/201		1	2		8706
UBILAN HOLLISTERSTIER	Spokane WA			DATE ORDER RE	CEIVED			ASE ORDER	and the second se
HOLLISTERSTIER	R 800-992-112			06/14/201	8			N/A	1110,
		Finance - Af 565.382 307.	2	REMITTANCE INFORMATIC	ON BELOW				
BILL TO:		Service and the second		SHIP TO:					
				SALE TO:					
Dover DE US 199	04								
	04			Dover DE US 1	9904				
CUSTOMER NUMBER									
CUSTOMER NUMBER		- ATTOIDE NO			TER	MS			
CUSTOMER NUMBER 73504000	JHS ORDER NO. 343536	INVOICE NO 90818706		Ne	TER at 30 days fro		ice date		
	343536	90818706		T	et 30 days fro	m invo			
73504000	343536 DESCR	90818706 11РПОN SERVICE OR**	U/M	Ne QTY SHIPPED	et 30 days fro			AMOL	INT
73504000	343536	90818706 11РПОN SERVICE OR**		T	et 30 days fro	m invo		AMOL	INT
73504000	343536 DESCF **FOR CUS TOMER : **TO ORDER CALL & Pick List# 008058673	90818706 10710N SERVICE OR** 300-992-1120** 16		T	et 30 days fro	m invo		AMOL	INT
73504000	343536 DESCE **FOR CUS TOMER 3 **TO ORDER CALL 4 Pick List# 008058673 EACH ITEM CONFIR	90818706 90818706 NPTION SERVICE OR** 300-992-1120** 36 MED		T	et 30 days fro	m invo		АМОЦ	INT
73504000	343536 DESCE **FOR CUSTOMER **TO ORDER CALL & Pick List# 008058673 EACH ITEM CONFIE ALL ITEMS NON RE	90818706 90818706 SERVICE OR** 300-992-1120** 66 IMED FURNABLE		T	et 30 days fro	m invo		AMOL	JNT
73504000	**FOR CUS TOMER : **TO ORDER CALL & Pick List# 008058673 EACH ITEM CONFIR ALL ITEMS NON RE 3 Species Wasp MD	90818706 90818706 SERVICE OR** 300-992-1120** 66 IMED FURNABLE		T	et 30 days fro	m invo	E	AMOL	
73504000	**TO ORDER CALL & Pick List# 008058673 EACH ITEM CONFIR ALL ITEMS NON RE 3 Species Wasp MD I WASP VENDM	90818706 90818706 SERVICE OR** 300-992-1120** 66 IMED FURNABLE	U/M	T	et 30 days fro	m invo	E	AMOL	
73504000 ITEM NO.	343536 DESCF "FOR CUS TOMER 3 "TO ORDER CALL & Pick List# 008058673 EACH ITEM CONFIR ALL ITEMS NON RE 3 Species Wasp MD I WASP VENDM A1800018	90818706 90818706 SERVICE OR** 300-992-1120** 166 IMED I/URNABLE =G	U/M	T	et 30 days fro	m invo	E	AMOL	
73504000 ITEM NO.	343536 DESCF **FOR CUS TOMER 3 **TO ORDER CALL 4 Pick List# 008058673 EACH ITEM CONFIR ALL ITEMS NON RE 3 Species Wasp MD 1 WASP VENOM A1800018 MULTIDOSE VENOM	90818706 90818706 MPTION SERVICE OR** 300-992-1120** 166 IMED IURNABLE FG 3900MCG 12DOSE	U/M	T	et 30 days fro	m invo	E	AMOL	437.80
73504000 ITEM NO.	343536 DESCF **FOR CUS TOMER : **TO ORDER CALL & Pick List# 008058673 EACH ITEM CONFIR ALL ITEMS NON RE 3 Species Wasp MD I WASP VENOM A1800018 MULTIDOSE VENOM MIXED VESPID VENOM	90818706 90818706 MPTION SERVICE OR** 300-992-1120** 166 IMED IURNABLE FG 3900MCG 12DOSE	U/M EA	T	et 30 days fro	T PRIC	E	AMOL	437.80
73504000	343536 DESCF **FOR CUS TOMER 3 **TO ORDER CALL 4 Pick List# 008058673 EACH ITEM CONFIR ALL ITEMS NON RE 3 Species Wasp MD 1 WASP VENOM A1800018 MULTIDOSE VENOM	90818706 90818706 MPTION SERVICE OR** 300-992-1120** 166 IMED IURNABLE FG 3900MCG 12DOSE	U/M EA	T	et 30 days fro	T PRIC	E	AMOL	<u>JNT</u> 437.80 722.90

2



Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

Finance - AR 509.482.3074

INVOICE DATE	PAGE	OF	INVOICE NO.
05/29/2018	1	2	90813076
DATE ORDER RECEIVED	PURCHASE ORDER NO.		
05/23/2018	N/A		

REMITTANCE INFORMATION BELOW

BILL TO:

SHIP TO:

•

Cumberland RI US 02864

Cumberland RI US 02864

 CUSTOMER NUMBER
 JHS ORDER NO.
 INVOICE NO.
 TERMS

 60190700
 341334
 90813076
 Net 30 days from invoice date

ITEM NO.	DESCRIPTION	U/M	OTY SHIPPED		AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**				
	Pick List# 0080581722 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				1
6784UX3	3 Species Wasp MD FG WASP VENOM	EA	1	437.80	437.80
6786UY	A1800018 MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM A1800008	EA	1	722.90	722.90
	TAXES				

Page 1 of 1



(This is not an Invoice) Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

Sold To

Omaha, NE US 68124

Ship To



Omaha, NE US 68124

Sales Order Number 342551 Date 06/05/2018 Purchase Order Number N/A Customer No. 32809000 Currency USD Inco Terms FOB Spokane Payment Terms Net 30 days from invoice date

Product	Description	Quantity Ordered	Unit Price	Amount
6781UX	MULTIDOSE VENOM 1300MCG 12DOSE A1800016 HONEY BEE VENOM	1.000 EA	/304.60	304.60
6784UX3	3 Species Wasp MD FG A1800018 WASP VENOM	1.000 EA	437.80	437.80
6786UY	MULTIDOSE VENOM 3900MCG 12DOSE A1800006 MIXED VESPID VENOM	1.000 EA	722.90	722.90
			Freight	0.00
			Tax	0.00
		T 1 1	Total Amount	1,465.30

Order Acknowledgement

Excluding Freight Charges Actual Freight Charges Will Apply

Taxes	Amount	
State	0.00	
County	0.00	
City	0.00	
Local	0.00	



Jubilant HollisterStier LLC PO Box 3145 Spokane WA 99220 800-992-1120

INVOICE DATE	PAGE	OF	INVOICE NO.		
06/05/2018	1	2	90815542		
DATE ORDER RECEIVED		PURCHASE ORDER NO.			
05/22/2018	PO516924				

REMITTANCE INFORMATION BELOW

BILL TO:

Finance - AR 509.482.3074

SHIP TO:



Eugene OR US 97401

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
32925000	341296	90815542	Net 30 days from involce date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
	FOR CUSTOMER SERVICE OR **TO ORDER CALL 800-992-1120**				
	Pick List# 0080584653 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE				
6781UX	MULTIDOSE VENOM 1300MCG 12DOSE HONEY BEE VENOM A1800016	EA	1	304.60	304.60
6786UY	MULTIDOSE VENOM 3900MCG 12DOSE MIXED VESPID VENOM A1800006	EA	2	722.90	1,445.80
6784UX3	3 Species Wasp MD FG	EA	1	437.80	437.80

Return to Comments

TESTING EXTRACTS

5 – 15

SCRATCH TEST 5 ML IN 50% GLYCERIN

^{\$}55.00

Non-Standardized Pollen, Epidermals and Inhalants. Refer to our product catalog for antigens and strengths.

AP Cattle Hair and Dander	1:50 (w/v)	^{\$} 212.80
AP Dog Hair and Dander	1:100 (w/v)	^{\$} 116.20
AP Horse Hair and Dander	1:50 (w/v)	^{\$} 116.20
Standardized AP Cat Hair or Pelt	10,000 BAU/mL	^{\$} 143.30
Foods		^{\$} 64.10
Molds		^{\$} 75.70
Insects	1:10 (w/v)	^{\$} 112.00

Premium Antigens		See below
Standardized Mite	30,000 AU/mL	^{\$} 145.60
Standardized Grass Pollen	100,000 BAU/mL	^{\$} 126.20

DIAGNOSTIC CONTROLS

Positive Skin Test Control – Histamine Dihydrochloride

10 mg/mL	(equivalent to 6 mg/mL Histamine base)	
7099ED	Percutaneous (Scratch, Prick or Puncture)	^{\$} 138.10
Negative	Control	
6806ED	Scratch (50% Glycerin)	^{\$} 42.10

ATTACHMENT C

CATALOG PAGE NUMBER

VENOMIL® DIAGNOSTIC SETS

VENOM

For each individual species test set	^s 60.30 per set
Price for Diagnostic Set Rack on page 7	

Venomil® Maintenance Set

6781P6	Honey Bee Venom (Apis mellifera)	^{\$} 179.90
6782P6	White-Faced Hornet Venom Protein	
	(Dolichovespula maculata)	^{\$} 230.90
6783P6	Yellow Hornet Venom Protein (Dolichovespula arenaria)	^{\$} 230.90
6784P63	Wasp Venom Protein (Polistes spp.)	^{\$} 262.00
6785P6	Yellow Jacket Venom Protein (Vespula spp.)	^{\$} 230.90
6786P6	Mixed Vespid Venom Protein	^{\$} 475.00
	(Yellow Jacket, White-Faced Hornet and Yellow Hornet)	

Multidose Hymenoptera Venom Products

	5 Dose: 550	μg/vial
6781PG	Honey Bee Venom (Apis mellifera)	^{\$} 141.60
6782PG	White-Faced Hornet Venom Protein	
	(Dolichovespula maculata)	^{\$} 186.80
6783PG	Yellow Hornet Venom Protein (Dolichovespula arenaria)	^{\$} 177.60
6784PG3	Wasp Venom Protein (Polistes spp.)	^{\$} 204.50
6785PG	Yellow Jacket Venom Protein (Vespula spp.)	^{\$} 177.60
	5 Dose: 1650	μg/vial
6786PK	Mixed Vespid Venom Protein	
	(Yellow Jacket, White-Faced Hornet and Yellow Hornet)	^{\$} 329.70

Multidose Hymenoptera Venom Products

	12 Dose: 130	0 μg/vial
6781UX	Honey Bee Venom (Apis mellifera)	^{\$} 304.60
6784UX3	Wasp Venom Protein (Polistes spp.)	^{\$} 437.80
6785UX	Yellow Jacket Venom Protein (Vespula spp.)	^{\$} 364.20
	12 Dose: 390	0 μg/vial
6786UY	Mixed Vespid Venom Protein	
	(Yellow Jacket, White-Faced Hornet and Yellow Hornet)	\$722.90

PREMIUM ANTIGENS STOCKED

Some extracts are considered premium antigens and are priced based on the additional costs incurred during the collection and processing of raw materials, precipitation and/or other factors. The following antigens are not discounted to allow for future manufacturing and supply.

Antigen	
1007	Acacia, Golden
1082	Bahia Grass
5053	Candida albicans
1406	Cocklebur, Common
5077	Curvularia spicifera
1454	Cypress, Bald
1547	Elm, Chinese
1565	Eucalyptus/Blue Gum
1631	Goldenrod
4402	Guinea Pig Hair and Dander

Antigen	
1661	Gum, Sweet
1802	Linden/Basswood
1832	Maple, Hard/Sugar
1874	Melaleuca
1877	Mesquite
1946	Nettle
2075	Palm, Queen
2252	Privet, Common
2360	Russian Olive

Standardized Venoms

VENOMIL® DIAGNOSTIC SETS

Fully self-contained individual species test sets, economically designed to test one patient at a time or with enough product to test many at the same setting. Easy to follow instructions for reconstitution plus a safe testing protocol help ensure an unequivocal diagnostic result. Each set contains a vial of 120 µg of freeze-dried venom or venom protein contained in a 2 mL vial, seven 2 mL sterile empty vials, and a vial of Sterile Albumin Saline with Phenol for diluting. Refer to package insert for proper diluting instructions on obtaining the 10 µg/mL concentration.

ITEM NO.	ALLERGEN	UNIT
6781P5	Honey Bee Venom (Apis mellifera)	Set
6782P5	White-Faced Hornet Venom Protein (Dolichovespula maculata)	Set
6783P5	Yellow Hornet Venom Protein (Dolichovespula arenaria)	Set
6784P53	Wasp Venom Protein (<i>Polistes spp.</i>)	Set
6785P5	Yellow Jacket Venom Protein (Equal parts V. germanica, V. maculifrons, V. pensylvanica, V. vulgaris, and V. squamosa)	Set

VENOMIL® MAINTENANCE SETS

Convenient unit dose packaging makes this product ideal for individual patient use. Each set contains 6 vials of 120 µg of freeze-dried venom or venom protein contained in a 2mL vial (Mixed Vespid - 360 µg each vial) and a vial of Sterile Albumin Saline with Phenol for diluting. When reconstituted, each vial will contain 100 µg/mL (Mixed Vespid-300 µg/mL).

ITEM NO.	ALLERGEN	UNIT
6781P6	Honey Bee Venom (Apis mellifera)	Set
6782P6	White-Faced Hornet Venom Protein (Dolichovespula maculata)	Set
6783P6	Yellow Hornet Venom Protein (Dolichovespula arenaria)	Set
6784P63	Wasp Venom Protein (<i>Polistes spp</i> .)	Set
6785P6	Yellow Jacket Venom Protein (Equal parts V. germanica, V. maculifrons, V. pensylvanica, V. vulgaris and V. squamosa)	Set
6786P6	Mixed Vespid Venom Protein (Yellow Jacket, White-Faced Hornet and Yellow Hornet)	Set

MULTIDOSE HYMENOPTERA VENOM PRODUCTS

Choose 5-dose or 12-dose vials. Each vial contains the listed quantity of freeze-dried venom or venom protein and, when reconstituted, will result in a solution of 100 μ g/mL (Mixed Vespid - 300 μ g/mL).^{*}

ITEM NO.	ALLERGEN	UNIT
6781PG	Honey Bee Venom (Apis mellifera)	5 dose (550 µg)
6781UX	Honey Bee Venom (Apis mellifera)	12 dose (1300 µg)
6782PG	White-Faced Hornet Venom Protein (Dolichovespula maculata)	5 dose (550 µg)
6783PG	Yellow Hornet Venom Protein (Dolichovespula arenaria)	5 dose (550 µg)
6784PG3	Wasp Venom Protein (Polistes spp.)	5 dose (550 µg)
6784UX3	Wasp Venom Protein (Polistes spp.)	12 dose (1300 µg)
6785PG	Yellow Jacket Venom Protein (Equal parts V. germanica, V. maculifrons, V. pensylvanica, V. vulgaris and V. squamosa)	5 dose (550 µg)
6785UX	Yellow Jacket Venom Protein (Equal parts V. germanica, V. maculifrons, V. pensylvanica, V. vulgaris and V. squamosa)	12 dose (1300 µg)
6786PK	Mixed Vespid Venom Protein (Yellow Jacket, White-Faced Hornet and Yellow Hornet)	5 dose (1650 µg)
6786UY	Mixed Vespid Venom Protein (Yellow Jacket, White-Faced Hornet and Yellow Hornet)	12 dose (3900 µg)

*The 5-dose venom protein is contained in a 10mL vial, and the 12-dose venom protein is contained in a 20mL vial. See page 20 for Sterile Albumin Saline with Phenol (ABS).