ORDERFORM 'UNLICENSED MEDICINE'

Malacef® 60 (Artesunate 60 mg, pfi)

Please complete this form and send to ARTECEF BV

F *+31 36 536 82 07 (**T** +31 36 536 82 30* for information)

Date: ..... / ..... / 2012 (dd/mm/yyyy)	Your reference:
Name Hospital Pharmacy	
Name pharmacist	
Address / Stamp:	Delivery address:
Invoice address:	Telephone:
	Telefax:
	VAT no.:
	COC reg.:

Malacef® 60, powder for injection 1 vial Artesunate 60 mg PFI and 1 ampoule 1 ml Sodiumbicarbonate solution 5%	
Indication:	
Prescription present □ yes □ no Medical statement present □ yes □ no Import license _____	

Requested quantity First order minimum quantity 24 vials (=4 x 6) _____ Consecutive orders a multiple of 12 (=2 x 6) vials	€ 75,00 (ex.VAT) per vial	Handling cost per order € 36,50 □ COA/AC requested
Pharmacist's signature		

Version 03012012.04

THIS UNLICENSED MEDICINE IS DELIVERED FROM PHARMACY-TO-PHARMACY WITHIN THE EER

ARTECEF BV

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