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## **VRAYLAR®** (cariprazine)

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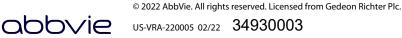
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Your shipment of professio	nal samples may only be se	nt to your office addre	ess.				
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Practitioner/Physician name		Professional designation (check one)					
Phone number			Email add	ress			
Address (Samples will not	be issued or delivered to a	PO Box; please provi	ide your office addre	ss.)			
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8 Boxes	VRAYLAR® (cariprazine)	<b>1.5 mg capsules</b> (ead	ch box contains 7 [sev	/en] 1.5 mg (	capsules)	61874-115	-07
8 Boxes	VRAYLAR® (cariprazine)	<b>3 mg capsules</b> (each	box contains 7 [seve	n] 3 mg caps	ules)	61874-130	-07
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8 Boxes	VRAYLAR® (cariprazine)	) 6 mg capsules (each	box contains 7 [seve	n] 6 mg caps	ules)	61874-160	-07
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requested the Rx items indicated f	or the legitimate medical needs of i	my patients and may not cha	arge my patients or third pa	rty provider, inc	ludina Medica	are or Medicaid,	for these

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