

NAME OF WHOLESALE DRUG DISTRIBUTOR/ANUFACTURER

Midwestern Health Services

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/ANUFACTURER

922 5th Ave Worthington, MN 56187

MIN BOARD OF PHARMACY LICENSE NUMBER

459883-5

MINNESOTA PRACTICES REQUIRE WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.461, CLAUSES (9) TO (5), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE, TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER
Please include designation (i.e., MD, etc.)

Jeanne Cochran LPN

ADDRESS OF PRACTITIONER

2542 28th St
Stayton, MN 56172

VALUE OF PAYMENTS

33571.20

TYPE OF PAYMENTS

Salary

RECEIVED AT

DEC 07 1998

MINNESOTA BOARD OF PHARMACY

MINNESOTA BOARD OF PHARMACY
2829 University Ave. SE, #530
Minneapolis, MN 55414-3251

NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

JONES Medical Industries
 MN BOARD OF PHARMACY LICENSE NUMBER

1915 Craig Rd St Louis MO 63116
 MINNESOTA STATUTES REQUIRE WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.461, CLAUSES (3) TO (6), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE, TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

310735-8

NAME OF PRACTITIONER
 Please include designation (i.e., MD, etc.)

ADDRESS OF PRACTITIONER

VALUE OF PAYMENTS

TYPE OF PAYMENTS

Dr. Mary M. de Mayo Clinic

Mayo Clinic
 200 First Street Rochester MN 55905

\$2000

Payment to operating on behalf of our products - payment was a check

MINNESOTA BOARD OF PHARMACY
 2829 University Ave. SE, #530
 Minneapolis, MN 55414-3251

NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

Sweet Drug Company

217 Railroad Ave, Box 1240 Aberdeen SD 57401

MINNESOTA BOARD OF PHARMACY LICENSE NUMBER

1407106001

MINNESOTA PRACTICES REQUIRE WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.441, CLAUSES (3) TO (5), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE, TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Belgrade Drug	336 Washburn Ave, Belgrade MD	301.62	purchase rebate
Herman Drug	502 Atlantic Ave, Herman MD	176.04	" "
Larry's Retail Drug	205 St Olaf Ave N, Gandy MD	3470.36	" "
Medicine Shoppe	418 3rd Ave East, Alexandria MD	279.24	" " credit memo
Medicine Shoppe	411 N. main, Crookston MN	37.34	" " checks
Samuelson Drug	Main Street, Starbuck MD	1135.55	" " "
Medicine Shoppe	410 W Lincoln Ave, Fergus Falls MD	417.96	" " credit memo

NAME OF WHOLESAL DRUG DISTRIBUTOR/MANUFACTURER

ADDRESS OF WHOLESAL DRUG DISTRIBUTOR/MANUFACTURER

Northwest Home Care

6585 Edvale Blvd., #130 Eden Prairie, MN 55346

MN BOARD OF PHARMACY LICENSE NUMBER

459872-5

MINNESOTA STATUTES REQUIRE WHOLESAL DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.461, CLAUSES (3) TO (5), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE, TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER
Please include designation (i.e., MD, etc.)

Ted Berman, MD

ADDRESS OF PRACTITIONER

8519 Crane Dance Trail, Eden Prairie, MN 55344

VALUE OF PAYMENTS

\$3000.00

↑
yr to date
12-8-95

TYPE OF PAYMENTS

Cash

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Ted Berman, MD	8519 Crane Dance Trail, Eden Prairie, MN 55344	\$3000.00 ↑ yr to date 12-8-95	Cash

NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

FOREST PHARMACEUTICALS

13622 LAKEFRONT DRIVE ST. LOUIS, MO 63045

MIN BOARD OF PHARMACY LICENSE NUMBER
459724-70

MINNESOTA STATUTES REQUIRE WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.49, CLAUSES (1) TO (5), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE, TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
LASZLO TEKLER	1000 East 1st Street Duluth, MN 55805	600.00	PRECEPTORSHIP
Stephen Bernard	1000 East 1st Street Duluth, MN 55805	300.00	PRECEPTORSHIP
Jay Parker	400 East 3RD Street Duluth, MN 55805	500.00	Honoraria
Housam E. Soukieh	300 South Bruce Street Marshall, MN 56258	500.00	grant
EDWARD LUFKIN	200 1st St SW Cntr #9 Rochester MN 55905	3,889.39	Honoraria and expenses
Kassama'i Jama'l	501 Grant Ave Eveleth, MN 55734	600.00	Preceptorship
Paula Clayton	Univ of MN Mayo Bldg Box 393 Minneapolis, MN 55455	1,500.00	Honoraria

MINNESOTA BOARD OF PHARMACY
2829 University Ave. SE, #530
Minneapolis, MN 55414-3251

NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

Lake Superior X-Ray, Inc.

218 E. Superior St. Lower Level, Duluth, MN 55802

MIN BOARD OF PHARMACY LICENSE NUMBER

360543-1

MINNESOTA STATUTES REQUIRE WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.461, CLAUSES (3) TO (5), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE, TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER
Please include designation (i.e., MD, etc.)

ADDRESS OF PRACTITIONER

VALUE OF PAYMENTS

TYPE OF PAYMENTS

Ely-Bloemensen Hospital
Radiographic Technologies
(Resales)

328 Conan St. Ely, MN 55731
208 14th St. N Fargo, ND 58102

\$2,497.66
\$1,645.90

Check
Check

RECEIVED AT
JAN 25 1999

MINNESOTA BOARD
OF PHARMACY

MINNESOTA BOARD OF PHARMACY
2829 University Ave. SE, #530
Minneapolis, MN 55414-3251

NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

FAR-VET Supply Co.

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER
635 Prior Ave N, ST Paul, MN 55104-1786

MN BOARD OF PHARMACY LICENSE NUMBER

300373-2

MINNESOTA STATUTES REQUIRE WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.46, CLAUSES (3) TO (5), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE, TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER <small>Please include designation (i.e., MD, etc.)</small>	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
ARCADIE Animal Hospital	1144 Arcade St ST Paul MN 55106	2762.83	Refund of credit balance
JA STRACHE, DVM	10 th & Reno, Hawley, MN 56549	497.08	" " " "
"	"	572.33	" " " "
William H Sweeny, DVM	6118 Arctic Way Edina MN 55436	144.50	" " " "
KURT W HANSON, DVM	14390 S Robert Trail, Rosemount MN 55668	2455.82	" " " "
Dr Bengfort Townsbody VET	479 MAUKTO AVE, WINONA MN 55987	918.92	" " " "
Cardiac Pacemakers	4100 N. Hamline Ave ST Paul MN 55112	1766.84	" " " "
Sharon Killison, DVM	Route 1 Box 50 A, Sherburne, MN 56171	3045.56	" " " "

Abbott Laboratories
 2000 Abbott Park Rd, Abbott Park, IL
 1998

NAME OF PRACTITIONER <small>Please include designation (Dr., MD, etc.)</small>	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Bruce Center, PhD	1423 Durbort Ave D, Mpls MN 55411	1593.75	Grant
David R.P. Gung, Pharm D	13174 Ingelwood Ave, Savage MN 55378	11000.00	Bibliography
John Gates, MD	310 N. Smith Ave, Suite 300, St. Paul 55103	750.00	grant
David R.P. Gung, Pharm D	13174 Ingelwood Ave, Savage, MN 55378	1437.50	project
"	"	625.00	manuscript
Raymond A. Hackett, MD	Robbysdale Md 35142 502 Oakdale Med Bldg 336 Oakdale Ave Mpls MN 55455-9393 1411 of Mall, Box 593, 420 SE MPLS Box 294, 420 Debuire St Pediatrics Univ of MD, Dept of Pediatrics	250.00	preceptorship
James Hallikas, MD	1372 B 8th Ave NW, Andover	4500.00	speaker
Edmund L. Kaplan, MD	1372 B 8th Ave NW, Andover	28.22	expense
Thomas E. Lackner	1410 Jackson St St. Paul MN 55116	5000.00	honorarium
Elizabeth Reene, MD	Ramsey Clinic Behavioral Health Box 390 Mpls MN 55455	400.00	support
Suzanne Celano-Zanudis	Univ Hosp, 420 Debuire St		

July 13, 1999

Alcon
LABORATORIES

ALCON LABORATORIES, INC.
6201 SOUTH FREEWAY
FORT WORTH, TEXAS 76134-2099
(817) 293-0450

Minnesota Board of Pharmacy
2829 University Ave. SE, #530
Minneapolis, MN 55414-3251

RECEIVED AT
JUL 16 1999
MINNESOTA BOARD
OF PHARMACY

Re: Gifts to Practitioners

To Whom It May Concern:

Attached is the 1998 list of "Gifts to Practitioners" for Alcon Laboratories, Inc. wholesale drug distributor facilities that ship product into the State of Minnesota.

The facility registration numbers are 360476-2 and 360478-8.

Should you have any questions, you may contact me at (817) 551-8317.

Sincerely,



Charles T. Dolbee
Manager, Regulatory Compliance

Attachment

NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER
Alcon Laboratories, Inc.

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER
6201 South Freeway, Fort Worth, TX 76134

MINNESOTA STATUTES REQUIRE WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.44, CLAUSES (9) TO (5), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE, TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER
 Please include designation (i.e., MD, etc.)

ADDRESS OF PRACTITIONER

VALUE OF PAYMENTS

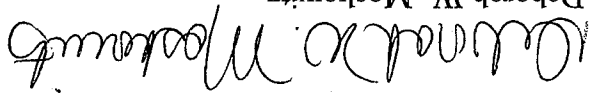
TYPE OF PAYMENTS

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Stephen S. Lane, M.D.	232 N. Main, Stillwater, MN		Honoraria or expenses paid for participation as a faculty member at various educational/professional symposiums:
		\$ 431.74	(Expense) Baltimore, MD on June 5-6, 1998
		\$ 1307.00	(Expense) Park City, UT on January 22-24, 1998
		\$ 2894.27	(\$2000.00 - Honoraria/\$894.27 - Expense) Tucson, AZ on October 17-18, 1998
		\$495.58	(Expense) Chicago, IL on December 4-5, 1998
		\$1000.00	(Honoraria) on September 24-26, 1998
		\$15,446.36	Compensation for professional/consulting services in connection with a clinical study/research project

/dwm
Attachment

Paralegal

Deborah W. Moskowitz



Sincerely yours,

Gentlemen:
Attached hereto please find our 1998 Annual Report identifying compensation paid to licensed practitioners in Minnesota. Please do not hesitate to contact me if you have any questions or require further information.

RE: Gifts to Practitioners

MINNESOTA BOARD OF PHARMACY
2829 University Avenue, S.E., #530
Minneapolis, MN 55414-3251

March 10, 1999

RECEIVED AT
MAR 15 1999
MINNESOTA BOARD
OF PHARMACY



Hoechst Marion Roussel

Hoechst Marion Roussel, Inc.

10236 Marion Park Drive
Mail: P.O. Box 9627
Kansas City, MO 64134-0627
Telephone (816) 966-5000
U.S. Web site: www.hmri.com

RECEIVED AT
FEB 08 1999
MINNESOTA BOARD
OF PHARMACY

February 1, 1999

Mr. David Holmstrom

Executive Director

Minnesota Board of Pharmacy

2829 University Avenue SE, Suite 530

Minneapolis, Minnesota 55414-3251

Re: Wholesale Drug Distributor Licensing Requirements
Annual Report YR: 1998 - Gifts to Practitioners \$151,47

Dear Mr. Holmstrom:

Enclosed is the completed report regarding the above captioned, on behalf of Hoechst
Marion Roussel, Inc.

Please contact me at the above address if you have any questions.

Sincerely,

HOECHST MARION ROUSSEL, INC.



Katherine M. Marquart

Senior Paralegal

Enclosure

Cc: Ed Stratemeyer

Sharon Kasel D'Agostino

These documents are confidential and intended only for the use of the recipient.

If you have any questions, please contact the sender of this e-mail at the address listed below.

Hoechst

Hoechst Marion Roussel
The Pharmaceutical Company of Hoechst

\\kmm\report\ltr to MN Board of Pharmacy for 1998

MINNESOTA ANNUAL REPORT - 1998
WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY

Hoechst Marion Roussel, Inc.		P.O. Box 9627, Kansas City, MO 64134-0627	
MN Board of Pharmacy License Number 360568-0		10236 Marion Park Dr., Kansas City, MO 64137-1405	
Name of Practitioner	Address of Practitioner	Value of Payments	Type of Payments
Graft, David (M.D.)	5813 Dale Avenue, Edina, MN	6,350.00	Honoraria
Becker, L. (M.D.)	616 Sunset Lane, Cambridge, MN	1,200.00	Honoraria
Chehinie, Sohiel (M.D.)	640 Jackson Street, St. Paul, MN	100.00	Honoraria
Engman, Hans (M.D.)	1624 Calvary Hill Lane, St. Cloud, MN	300.00	Honoraria
Erickson, Carlton (M.D.)	P.O. Box 729, Lindstrom, MN	800.00	Honoraria
Goldsmith, Steven (M.D.)	701 Park Avenue, Minneapolis, MN	1,630.00	Honoraria
Graham, Kevin (Dr.)	920 East 28 th Street, Minneapolis, MN	250.00	Honoraria
Kaiser, Harold (M.D.)	1149 Medical Arts Bldg., Minneapolis, MN	4,700.00	Honoraria
Katz, Harold (Dr.)	3990 Trotters Court, Eagan, MN	1,000.00	Honoraria
Keane, William (Dr.)	701 Park Avenue South, Minneapolis, MN	1,500.00	Honoraria
McCaffrey, Thomas (M.D.)	3824 Hidden Way, Rochester, MN	2,500.00	Honoraria
O'Connell, Edward J. (M.D.)	200 First Street, S.W., Rochester, MN	3,500.00	Honoraria
Sampson, Bruce (M.D.)	750 315 th Avenue, Cambridge, MN	700.00	Honoraria
Schoenwetter, William (M.D.)	5000 West 39 th Street, Minneapolis, MN	4,250.00	Honoraria
Shapiro, Randall T. (M.D.)	701 25 th Avenue S., Minneapolis, MN	1,000.00	Honoraria
Tekler, Laszlo (Dr.)	1000 East First Street, Suite 105, Duluth, MN	500.00	Honoraria
Wilson, Daniel J. (Dr.)	2327 Viking Drive, N.W., Rochester, MN	5,350.00	Honoraria
Zweiman, Burton (M.D.)	1208 Andover Road, Wymewood, MN	2,000.00	Honoraria

MURO
an ASTA Medica company

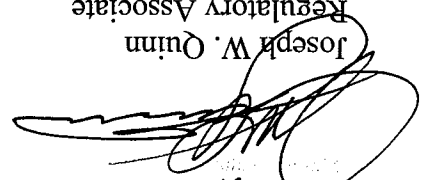
February 3, 1999

David Holmstrom
Executive Director
Minnesota Board of Pharmacy
2829 University Ave. SE #530
Minneapolis, MN 55414-3251

Dear Mr. Holmstrom:

Enclosed you will find your state form indicating those Minnesota practitioners who have received payments from Muro Pharmaceutical during 1998. If you have any questions you may call me at (978) 851-5981.

Sincerely,



Joseph W. Quinn
Regulatory Associate

JWQ/ln

Mn-pharm.doc

Muro Pharmaceutical, Inc.
890 East Street • Tewksbury, Massachusetts • 01876-1496
Phone (978) 851-5981 • Fax (978) 851-7346



MGI PHARMA, INC.
Suite 300 E, Opus Center
9900 Bren Road East
Minnetonka, Minnesota 55343-9667
(Telephone) 612-935-7335
(Facsimile) 612-935-0468

January 27, 1999

Jo H. Gustafson, Ph.D.
Director, Regulatory Affairs
Direct: 612-939-4665

David E. Holmstrom
Executive Director
Minnesota Board of Pharmacy
2829 University Avenue SE
Suite 530
Minneapolis, MN 55414-3251

Dear Mr. Holmstrom:

In response to your memorandum of November 5, 1998 regarding reporting payments totaling \$100 or more to a particular Minnesota practitioner during 1998, enclosed please find a completed copy of the form which was attached to your memo.

Please contact me if you have any questions regarding this information.

Cordially,

Jo H. Gustafson, Ph.D.

/jmg

Enclosure

NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

ADDRESS OF WHOLESALE DRUG DISTRIBUTER/MANUFACTURER

MGI PHARMA, INC.
MIN BOARD OF PHARMACY LICENSE NUMBER
360244-7

Suite 300E, Opus Center, 9900 Bren Road East, Minnetonka, MN 55343
MINNESOTA STATUTES REQUIRE WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.461, CLAUSES (3) TO (6), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE, TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Erskine Caperton, M. D.	711 Physicians & Surgeons Bldg. 63 S. 9th St. Ste. 711 Minneapolis, MN 55402	\$ 750.00	Speaker honorarium
Jay N. Cohn, M.D.	4848 Russell Avenue South Minneapolis, MN 55455	\$1000.00	Professional consultation
Nelson Rhodus, M.D.	U of M 7-536 Moos HSP 515 Delaware Street Minneapolis, MN 55455	\$1000.00	Author and technical advisor for newsletter

MINNESOTA BOARD OF PHARMACY
2829 University Ave. SE, #530
Minneapolis, MN 55414-3251

January 12, 1999

Mr. David E. Holmstrom

Executive Director

Minnesota Board of Pharmacy

2829 University Avenue SE, Room 530

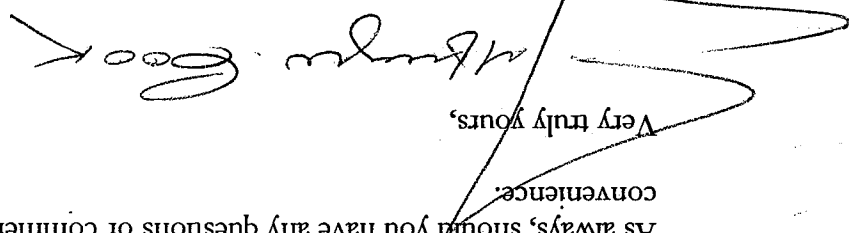
Minneapolis, MN 55414

Dear Mr. Holmstrom:

In response to your letter of November 5, 1998, we submit the attached report identifying those payments made to licensed practitioners in the state of Minnesota. I am advised that these payments were made for the professional consulting services of the respective physicians.

As always, should you have any questions or comments, kindly contact me at your convenience.

Very truly yours,



Jeffrey W. Cook

Chief Legal Counsel

Aveda Corporation

JWC/kat

Enclosure

Peter Matravers

Jim Pavlakis

Susan DeFields

NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

Mneda Corporation
MN BOARD OF PHARMACY LICENSE NUMBER

4000 Pleasant Ridge Dr.
Mpls MN 55413

3459982-1

MINNESOTA STATUTES REQUIRE WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.44, CLAUSES (1) TO (9), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE. TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Dr. Brian Zelikson	2764 Drew Ave. So., Mpls, MN 55416	80,000.00	Check-consultation
Dr. René Belkiver (St. Paul Eye Clinic)	340 Lowery Medical Bldg 350 St. Peter St. St. Paul, MN 55102	2,000.00	Check -

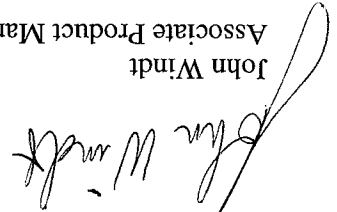
January 6, 1999

Mr. David E. Holmstrom
Executive Director
Minnesota Board of Pharmacy
2829 University Avenue, SE, #530
Minneapolis, MN 55414-3251

Mr. Holmstrom:

In response to your memo dated November 5, 1998 entitled "Gifts to Practitioners," I am enclosing the completed form detailing payments Gilead Sciences has made to licensed practitioners in Minnesota. If you require any additional information, please feel free to contact me.

Sincerely,



John Windt
Associate Product Manager

JW/kw

Enclosure

NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER
Gilead Sciences, Inc.

MINNESOTA STATUTES REQUIRE WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.441, CLAUSES (3) TO (5), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE, TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

MIN BOARD OF PHARMACY LICENSE NUMBER
360624-9

NAME OF PRACTITIONER
 Please include designation (i.e., MD, etc.)
Frank Rhame MD

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER
**333 Lakeside Drive
 Foster City CA 94404**

ADDRESS OF PRACTITIONER
**11007 Northwestern Hospital, Clinic 42
 900 East 28th Ave. Minneapolis, MN 55407**

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Frank Rhame MD	11007 Northwestern Hospital, Clinic 42 900 East 28th Ave. Minneapolis, MN 55407	\$992.00	Airfare, hotel, + meals

MINNESOTA BOARD OF PHARMACY
 2829 University Ave. SE, #530
 Minneapolis, MN 55414-3251



December 15, 1998

RECEIVED AT
DEC 24 1998

MINNESOTA BOARD
OF PHARMACY

David E. Holmstrom, Executive Director

State of Minnesota

Department: Minnesota Board of Pharmacy

2829 University Avenue, SE, #530

Minneapolis, MN 55414-3251

Dear Mr. Holmstrom:

Enclosed you will find Allergan's annual report identifying all payments, honoraria, reimbursement, and other compensation paid to licensed practitioners in Minnesota during calendar year 1998.

If you should have any questions or comments, please feel free to contact me at (714) 246-4391.

Sincerely,

Elizabeth Bancroft

Director, Regulatory Affairs

EB/dmo

Enclosure

NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER

ALLERGAN, INC.

2525 DUPONT DRIVE, P. O. BOX 19534, IRVINE, CA 92623

MN BOARD OF PHARMACY LICENSE NUMBER

459613-8

MINNESOTA STATUTES REQUIRE WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.441, CLAUSES (3) TO (6), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE, TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Chris Buntrock, MD	111 3rd St., Grand Rapids, MN	\$100.00	Teleconference Honoraria
Dorothy Horns, MD	6533 Drew Ave., Edna, MN	\$100.00	Teleconference Honoraria
Dorothy Horns, MD	6533 Drew Ave., Edna, MN	\$300.00	Airfare to Washington, DC
Andrea Joplin, MD	109 Doctors Park, St. Cloud, MN 56303	\$100.00	Honoraria
Jeff Ketcham, MD	Hwy. 61 P. O. Box 54, Red Wing, MN 55066	\$100.00	Honoraria
Richard Lucius, MD	2055 15th St., N., Ste. D., St. Cloud, MN	\$100.00	Honoraria
Jerome Poland, MD	One Third Ave., Crosby, MN	\$300.00	Airfare to Chicago, IL
William Rickman, MD	825 S. 8th St., Minneapolis, MN	\$100.00	Teleconference Honoraria
Thomas Samuelson, MD	710 E. 24th St., Minneapolis, MN	\$300.00	Airfare to Fargo, ND
Thomas Samuelson, MD	710 E. 24th St., Minneapolis, MN	\$1,000.00	Core Honoraria
Thomas Samuelson, MD	710 E. 24th St., Minneapolis, MN	\$100.00	Teleconference Honoraria
Thomas Samuelson, MD	710 E. 24th St., Minneapolis, MN	\$1,000.00	Core Honoraria
Paul Tani, M.D.	17 Exchange St., W., Ste. 200, St. Paul, MN	\$100.00	Honoraria
Carl Tubbs, MD	232 N. Main, Stillwater, MN 55062	\$746.96	Airfare
Carl Tubbs, MD	232 N. Main, Stillwater, MN 55082	\$100.00	Honoraria

MINNESOTA BOARD OF PHARMACY
2829 University Ave. SE, #530
Minneapolis, MN 55414-3251

FAX

07/01/99

15:11

GLI FINANCE + 6126172212

NO. 937

P01

GALDERMA

USA



Date:

July 1, 1999

From:

Ludie Rudolph
FAX NUMBER 817-263-2735

To:

David E Holmstrom - Minnesota Board of Pharmacy

Fax #:

612-617-2212

Subject:

Gifts to Practitioners - Calendar Year 1998

Please transmit to all individuals at your location.

Number of pages(s) 2

including cover page:

c.c.:

Laboratories, Inc.

Attached is the Gifts to Practitioners for Calendar Year 1998 form for Galderma

Attach: (1)

GALDERMA LABORATORIES, INC.

3000 Alta Mesa Boulevard, Suite 300, Fort Worth, Texas, U.S.A. - Tel: (817) 263-2644 - Fax: (817) 263-2602

2735

2698

NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER
 Galderma Laboratories, Inc.

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER
 3000 Alta Mesa Blvd., #300, Fort Worth, TX 76133

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NAME OF PRACTITIONER (Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Hark Dahl & Associates Inc	4513 Willow Oak Lane, Minnetonka, MN 55343	78,560.00	Publishing Services for 1998
Hark Dahl MD	4513 Willow Oak Lane, Minnetonka, MN 55343	6,224.24	Acne & Rosacea Symposium Honorariums & Expenses for 1998 Symposiums
Minnesota Clinical Study Center	7205 University Ave NE, Fridley, MN 55432	20,800.00	1998 Clinical Services Rendered by Dr Kemper
	Total	105,584.24	

Schering Laboratories



Schering-Plough Corporation
2000 Galloping Hill Road
Kenilworth, New Jersey 07033-0530
Telephone (908) 298-4000

June 25, 1999

RECEIVED AT
JUN 29 1999
PHARMACY

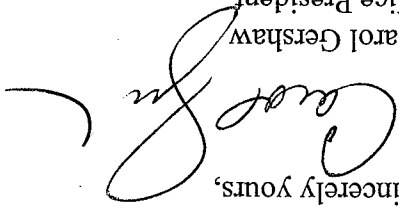
David E. Holmstrom, R. Ph., J.D.
Executive Director
Minnesota Board of Pharmacy
2700 University Avenue W. #107
St. Paul, MN 55114-1079

Dear Director Holmstrom:

Enclosed is Schering Corporation and affiliate's annual report for calendar year 1998, which is required by Minnesota Statutes 151.47(f).

Please send me copies of any regulations or rules which may be issued regarding this statute.

Sincerely yours,



Carol Gershaw
Vice President
Sales and Marketing Planning
and Administration

Enclosure

NAME OF WHOLESALE DRUG DISTRIBUTOR / MANUFACTURER

ADDRESS OF WHOLESALE DRUG DISTRIBUTOR / MANUFACTURER

Scherling Corporation and Affiliates

2000 Galloping Hill Road, Kenilworth, N.J. 07033

BOARD OF PHARMACY LICENSE NUMBER

MINNESOTA STATES REQUIRES WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT & OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.461, CLAUSES (3) TO (6), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THE PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Abid, Dr. Munir	400 Ritchie Medical Plaza 310 N Smith Ave, St Paul MN 55102	\$300.00	Preceptorship(s)
Ahmed, Dr. Ify	420 Delaware Street SE, Minneapolis MN 55455	\$100.00	Preceptorship(s)
Allergy & Asthma Specialists	8250 Niccollet Mall Suite 1149 Minneapolis MN 55402	\$750.00	Honoraria
Alper, Barry MD	3366 Oakdale, Robbinsdale MN 55122	\$250.00	Preceptorship(s)
Arive, Floro MD	Stewart Medical Center 300 Bowman Street, Stewart MN 55385	\$200.00	Preceptorship(s)
Arora, Dr. Vjender	901 23rd Ave NE, Minneapolis MN 55412	\$250.00	Preceptorship(s)
Asch, Susan MD	34 N Oaks Rd, North Oaks MN 55127	\$125.00	Preceptorship(s)
Atamian, Susan D. MD	1200 6th Avenue North, St Cloud MN 56303	\$250.00	Preceptorship(s)
Banaszak, Lori MD	2855 Campus Drive Ste 4, Plymouth MN 55441	\$100.00	Preceptorship(s)
Baumgartner, Dr. C. John	5109 W 66th Street, Minneapolis MN 55439	\$1,000.00	Honoraria
Baumgartner, Dr. C. John	5109 W 66th Street, Minneapolis MN 55439	\$167.68	Exp. Reimbursement(s)
Baumgartner, Dr. John	5109 West 66th Street, Minneapolis MN 55439	\$1,000.00	Honoraria
Becker, Lowell MD	616 Sunset Lane, Cambridge MN 55008	\$750.00	Honoraria
Berman, Gary D. MD	Medical Arts Bldg Ste 1149 825 Niccollet Mall Minn. MN 55402	\$1,500.00	Honoraria
Berman, Theodore MD	920 East 28th Street 3700, Minneapolis MN	\$300.00	Preceptorship(s)
Berti, Dr. Richard	437 127th Avenue, Coon Rapids MN 55448	\$200.00	Preceptorship(s)
Biel, Lawrence MD	4430 West 25th Street, St Lous Park MN 55416	\$500.00	Honoraria
Biel, Lawrence MD	4430 West 25th Street, St Lous Park MN 55416	\$143.25	Exp. Reimbursement(s)
Bjorklund, Dr. John	3017 Bloomington Avenue, Minneapolis MN 55407	\$100.00	Preceptorship(s)
Bloom, Dr. Kenneth	Medical Place Suite 407 910 East 26th St. Minneapolis MN 55404	\$100.00	Preceptorship(s)
Bloom, Dr. Kenneth	Medical Place Suite 407 910 East 26th St. Minneapolis MN 55405	\$750.00	Honoraria
Blum, Paul MD	815 Park Terrace, Hopkins MN 55305	\$1,000.00	Honoraria
Blum, Paul MD	815 Park Terrace, Hopkins MN 55305	\$975.00	Preceptorship(s)
Bowen, Michael MD	920 East 28th Street, Minneapolis MN 55407	\$250.00	Preceptorship(s)

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ADDRESS OF WHOLESALE DRUG DISTRIBUTOR / MANUFACTURER

Schering Corporation and Affiliates

2000 Galloping Hill Road, Kenilworth, N.J. 07033

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NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Bowen, R. Michael MD	2021 Autumn Place, Roseville MN 55113	\$300.00	Preceptorship(s)
Brady, Dennis MD	1675 Beam Avenue, Maplewood MN 55109	\$100.00	Preceptorship(s)
Bransford, Dr. Charles	1500 Curve Crest Blvd, Stillwater MN 55082	\$250.00	Preceptorship(s)
Brucker, Dr. Heinrich	4010 W 65th Street #221, Minneapolis MN 55435	\$550.00	Preceptorship(s)
Brucker, Hannelore A. MD	4010 West 65th Street #221, Edina MN 55435	\$1,250.00	Honoraria
Brucker, Hannelore A. MD	4010 West 65th Street #221, Edina MN 55435	\$1,000.00	Preceptorship(s)
Buckler, Anita MD	17615 Chisholm, Ham Lake MN 55304	\$500.00	Preceptorship(s)
Carney, Patrick MD	7373 France Avenue So Ste 408, Edina MN 55435	\$600.00	Honoraria
Carney, Patrick MD	7373 France Avenue So Ste 408, Edina MN 55435	\$150.00	Preceptorship(s)
Central Avenue Clinic	2610 Central Avenue Clinic	\$300.00	Preceptorship(s)
Chalgren, Robert MD	Duluth Clinic 730 E 34th Street Hibbing MN 55746	\$100.00	Preceptorship(s)
Choquette, David M. MD	2304 East Third Street, Duluth MN 55812	\$125.00	Preceptorship(s)
Compton, Rand MD	2109 4th Ave SE, Willmar MN	\$750.00	Honoraria
Corson, Dr. Wilfred A.	6363 France Ave S #601, Edina MN 55435	\$300.00	Preceptorship(s)
Cress, Dr. Brian	921 S Greeley Street, Stillwater MN 55082	\$100.00	Preceptorship(s)
Dawson, Dr. Jan	129 E Highland, Hibbing MN 35746	\$250.00	Preceptorship(s)
Day, Thomas MD	330 N 8th Avenue, Duluth MN 55803	\$500.00	Preceptorship(s)
Dennison, Dr. Bruce F.	921 S. Greeley St., Stillwater MN 55082	\$200.00	Preceptorship(s)
Dudek, Arkadiusz MD	516 Delaware St SE Box 480 Mayo, Minneapolis MN 55455	\$1,200.00	Honoraria
Dunham, Dr. Charles Kenneth	4015 Birch Knoll Dr, White Bear MN 55112	\$250.00	Preceptorship(s)
Ebertz, Michael MD	3366 Oakdale Avenue N., Robbinsdale MN 55422	\$100.00	Preceptorship(s)
Elieff, Dr. Daniel	2700 First Street N #303, St Cloud MN 56303	\$100.00	Preceptorship(s)
Elieff, Dr. Daniel	2700 First Street N #303, St Cloud MN 56303	\$500.00	Honoraria
Eling, Dr. Carin L.	2922 East Second Street, Duluth MN 55812	\$1,675.00	Honoraria

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 Schering Corporation and Affiliates 2000 Galloping Hill Road, Kenilworth, N.J. 07033

BOARD OF PHARMACY LICENSE NUMBER MINNESOTA STATES REQUIRES WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT & OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.461, CLAUSES (3) TO (6), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THE PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Eling, Dr. Carin L.	2922 East Second Street, Duluth MN 55812	\$625.00	Preceptorship(s)
Ellingson, Amy MD	101 Willmar Avenue, Willmar MN 56201	\$200.00	Preceptorship(s)
Ellington, Amy MD	1605 Country Club Drive, Willmar MN 56201	\$100.00	Preceptorship(s)
England, Dr. Thomas G.	1230 E Main St., Mankato MN 56002	\$100.00	Preceptorship(s)
Evan, Karin E. MD	3960 Coon Rapids Blvd, Coon Rapids MN 55433	\$100.00	Preceptorship(s)
Fenske, Dr. Arnold W.	420 E Sarnia, Winona MN 55987	\$300.00	Preceptorship(s)
Ferris, Fredrick O. MD	4924 Safari Court South, Eagan MN 55122	\$2,000.00	Honoraria
Ferris, Fredrick O. MD	4924 Safari Court South, Eagan MN 55122	\$439.28	Exp. Reimbursement(s)
Fischer, Robert L. MD	PO Box 742, Hibbing MN 55746	\$750.00	Honoraria
Foster, Larry D.O.	8611 W Pt Douglas Road, Cottage Grove MN 55016	\$625.00	Preceptorship(s)
Fox, William MD	3960 Coon Rapids Blvd, Coon Rapids MN 55433	\$125.00	Preceptorship(s)
Froymovich, Oleg MD	13264 39th Ave North Plymouth MN. 55441	\$750.00	Honoraria
Froymovich, Oleg MD	13264 39th Ave North Plymouth MN. 55441	\$400.00	Preceptorship(s)
Geller, Dr. Gary R.	565 So Snelling Ave, St Paul Mn 55116	\$500.00	Honoraria
Geller, Dr. Gary R.	565 So Snelling Ave, St Paul Mn 55116	\$500.00	Consultant(s)
Geller, Dr. Gary R.	565 So Snelling Ave, St Paul Mn 55116	\$250.00	Preceptorship(s)
Gensmer, Dr. Charles	3960 Coon Rapids Blvd, Coon Rapids MN 55433	\$500.00	Honoraria
Gould, W. MD	13986 Maple Knoll Way Maple Grove MN 55639	\$125.00	Preceptorship(s)
Graft, Dr. David F.	3800 Park Nicollet Clinic, Minneapolis MN 55416	\$12,700.00	Honoraria
Graft, Dr. David F.	3800 Park Nicollet Clinic, Minneapolis MN 55416	\$900.00	Preceptorship(s)
Graft, Dr. David F.	3800 Park Nicollet Clinic, Minneapolis MN 55416	\$1,431.50	Exp. Reimbursement(s)
Green, Dr. Edward	101 Willmar Avenue, Willmar MN 56201	\$200.00	Preceptorship(s)
Grenz, Karla MD	11269 Jefferson, Champlin MN 55316	\$125.00	Preceptorship(s)
Griebe, Dr. Matthew	ENT Department 3366 Oakdale Avenue, Robbinsdale MN 55422	\$200.00	Preceptorship(s)

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Schering Corporation and Affiliates 2000 Galloping Hill Road, Kenilworth, N.J. 07033

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NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Gross, Jack MD	200 First Street SW The Mayo Clinic, Rochester MN 55905	\$1,000.00	Honoraria
Gross, John B. MD	200 First Street SW, Rochester MN. 55905	\$1,968.88	Exp. Reimbursement(s)
Gross, John B. MD	200 First Street SW, Rochester MN. 55905	\$6,000.00	Honoraria
Gupta, Sanjay MD	Cambridge Medical Center, Cambridge MN 55008	\$200.00	Preceptorship(s)
Haberman, Rex S. MD	1020 Bandana Blvd St Paul MN 55108	\$100.00	Preceptorship(s)
Hanson, Dr. A. Stuart	110 1st Ave NE #1603, Minneapolis MN 55413	\$500.00	Preceptorship(s)
Harris, Pamela MD	10982 Purdey Road, Eden Prairie MN 55347	\$300.00	Preceptorship(s)
Harris, Pamela MD	10982 Purdey Road, Eden Prairie MN 55347	\$750.00	Honoraria
Haycraft, Dr Kenneth	3017 Bloomington Ave S., Minneapolis MN 55407	\$125.00	Preceptorship(s)
Henrickson, Dr. Gerald	403 East Prairie Ave, Staples MN 56479	\$100.00	Preceptorship(s)
Ho, Samuel MD	1 Beebe Ave, Mendota Heights MN 55118	\$1,000.00	Honoraria
Ho, Samuel MD	1 Beebe Ave, Mendota Heights MN 55118	\$1,586.34	Exp. Reimbursement(s)
Janning, Dr. Martin	101 Willmar Ave., Willmar MN 56201	\$200.00	Preceptorship(s)
Johnson, Dr. Linda C.	9557 Virginia Avenue, Bloom MN 55438	\$250.00	Preceptorship(s)
Jones, Dr. Gregory	9483 Amesbury Lane, Eden Prairie MN 55347	\$2,500.00	Honoraria
Jones, Dr. Gregory	9483 Amesbury Lane, Eden Prairie MN 55347	\$600.00	Preceptorship(s)
Jones, Dr. Gregory	9483 Amesbury Lane, Eden Prairie MN 55347	\$150.40	Exp. Reimbursement(s)
Kaiser, Harold B. MD	825 Niccollet Mall Suite 1149, Minneapolis MN 55402	\$2,250.00	Honoraria
Karan, Edathil MD	210 N St Mary Avenue Albert Lea MN 56007	\$150.00	Preceptorship(s)
Katz, Harold MD	360 Sherman Suite 250, St Paul MN 55102	\$350.00	Preceptorship(s)
Katz, Harold MD	360 Sherman Suite 250, St Paul MN 55102	\$1,500.00	Honoraria
Kempers, Steven E. MD	7205 University Avenue NE, Fridley MN 55432	\$100.00	Preceptorship(s)
Ketover, Dr. Linda	12805 W Highway 55, Plymouth MN 55441	\$200.00	Preceptorship(s)
Kimberly, Dr. Barry	618 W Broadway, St Peter MN 56082	\$300.00	Preceptorship(s)

NAME OF WHOLESALE DRUG DISTRIBUTOR / MANUFACTURER ADDRESS OF WHOLESALE DRUG DISTRIBUTOR / MANUFACTURER
 Schering Corporation and Affiliates 2000 Galloping Hill Road, Kenilworth, N.J. 07033

BOARD OF PHARMACY LICENSE NUMBER MINNESOTA STATES REQUIRES WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REMBURSEMENT & OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.461, CLAUSES (3) TO (5), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE TO A PARTICULAR PRACTITIONER DURING THE YEAR, AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THE PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Kishel, Dr. Gene F.	910 N 6th Avenue, Virginia MN 55792	\$150.00	Preceptorship(s)
Komoto, Timothy MD	4099 States Avenue, Eagan MN 55123	\$575.00	Preceptorship(s)
Krause, Dr. Kevin	1814 E 14th Avenue, Hibbing MN 55746	\$100.00	Preceptorship(s)
Kravitz, Dr. Gary	360 Sherman Suite 250, St Paul MN 55102	\$2,250.00	Honoraria
Kuderko, Joseph MD	2855 Campus Drive, Plymouth MN 55441	\$300.00	Preceptorship(s)
Lemke, Kurt MD	3120 Walden Way, St Cloud MN 56301	\$250.00	Preceptorship(s)
Long, Dr. James	5300 153rd Avenue, Ramsey MN 55303	\$225.00	Preceptorship(s)
Magnusen, Dr. Todd	1528 Northway Drive, St Cloud MN 56303	\$100.00	Preceptorship(s)
Magnuson, Penny MD	9055 Springbrook Dr., Coon Rapids MN 55433	\$425.00	Preceptorship(s)
McAlpine, Dr. David	8325 City Center Drive, Woodbury MN 55125	\$375.00	Preceptorship(s)
Metropolitan Internists	825 S 8th St. #914, Minneapolis MN 55404	\$250.00	Preceptorship(s)
Mikhail, Dr. Walid	8611 West Pt Douglas Road, Cottage Grove MN 55016	\$750.00	Preceptorship(s)
Mlot, Dr. Dennis	901 9th Street N Ste 100, Virginia MN 55792	\$100.00	Preceptorship(s)
Monson, Dr. Warren	4702 Grand Ave., Duluth MN 55807	\$150.00	Preceptorship(s)
Montgomery, Dr. Mark	3366 Oakdale Ave Suite 150, Robbinsdale MN 55422	\$200.00	Preceptorship(s)
Morris, Richard MD	3800 Park Nicollet Blvd, St Louis Park MN. 55416	\$200.00	Preceptorship(s)
Morris, Richard MD	3800 Park Nicollet Blvd, St Louis Park MN. 55416	\$750.00	Honoraria
Mulmed, Lawrence MD	710 E 24th #405, Minneapolis MN 55404	\$300.00	Preceptorship(s)
Murphy, Dr. Michael	6545 France Avenue South, Edina MN 55435	\$100.00	Preceptorship(s)
Myklebust, Dr. Monica	1229 2nd St. NE, Minneapolis MN 55112	\$250.00	Preceptorship(s)
Nancy Ott MD	5300 West 62 Street, Edina MN 55436	\$500.00	Honoraria
Neel, Ingrid MD	828 8th St. Sw., Rochester MN 55902	\$725.00	Preceptorship(s)
Nelms, Dr. C. Randall	8360 City Center Dr., Woodbury MN 55125	\$200.00	Preceptorship(s)
Neuwirth, Geraldo MD	11914 St Acbar's Hollow Dr., Minnetonka MN 55305	\$100.00	Preceptorship(s)

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 2000 Galloping Hill Road, Kenilworth, N.J. 07033

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NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Nicholas, S. Scott MD	17599 Kenwood Trail Ste 2, Lakeville MN 55044	\$1,250.00	Honoraria
Nicholas, S. Scott MD	17599 Kenwood Trail Ste 2, Lakeville MN 55044	\$1,150.00	Preceptorship(s)
Nordahl, Thomas MD	9341 Wyoming, Bloomingham MN 55438	\$125.00	Preceptorship(s)
Norland Dr. Ann	7205 University Avenue, Fridley MN 55432	\$100.00	Preceptorship(s)
Novick, Dr. Timothy G.	510 Second Street, Pine City MN 55063	\$150.00	Preceptorship(s)
Ofstedal, Dr. Wesley	201 N Hillstead, Fosston MN 56542	\$250.00	Preceptorship(s)
O'Halloran, Gerald L. MD	3600 Park Nicollet Blvd, St Louis Park MN 55416	\$400.00	Preceptorship(s)
O'Halloran, Gerald L. MD	3600 Park Nicollet Blvd, St Louis Park MN 55416	\$500.00	Honoraria
Olson, Dr. Theodore	400 South Minnesota, Crookston MN 56716	\$250.00	Preceptorship(s)
Ott, Nancy MD	5300 West 62 Street, Edina MN 55436	\$750.00	Preceptorship(s)
Otto, Michael MD	739 Benton Street, Anoka MN 55303	\$100.00	Preceptorship(s)
Pallas, Ken MD	14655 Galaxie, Apple Valley MN 55124	\$250.00	Preceptorship(s)
Peine, Craig MD	HCMC Gastro Dept 5th Fl. 701 Park Ave. Minneapolis MN 55415	\$15,450.00	Honoraria
Peine, Craig MD	HCMC Gastro Dept 5th Fl. 701 Park Ave. Minneapolis MN 55416	\$2,637.59	Exp. Reimbursement(s)
Pfeifer, Dr. Brian	3015 Miller Trunk Rd, Eveleth MN 55734	\$250.00	Preceptorship(s)
Ramos, Dr. Mari-lou	1345 Thompson Ave, South St Paul MN 55075	\$600.00	Preceptorship(s)
Rapp, Dr. Larry	930 First Street NE, Elbow Lake MN 56531	\$250.00	Preceptorship(s)
Regan Jr., John J. MD	606 24th Avenue #200, Minneapolis MN 55454	\$450.00	Preceptorship(s)
Rehman, Ronald MD	3960 Coon Rapids Blvd Ste 101, Coon Rapids MN 55433	\$100.00	Preceptorship(s)
Rhodes, Dr. Virgil	6545 France Avenue South, Edina MN 55435	\$100.00	Preceptorship(s)
Rhodes, Mark C. MD	1000 East First Street, Duluth MN 55805	\$700.00	Honoraria
Rieb, Mark MD	15650 Cedar South, Apple Valley MN 55124	\$225.00	Preceptorship(s)
Robson, Edward MD	3017 Bloomington Ave S., Minneapolis MN 55407	\$250.00	Preceptorship(s)
Rogers, Dr. Charles	2545 Chicago Ave. South, Minneapolis MN 55404	\$125.00	Preceptorship(s)

NAME OF WHOLESALE DRUG DISTRIBUTOR / MANUFACTURER ADDRESS OF WHOLESALE DRUG DISTRIBUTOR / MANUFACTURER
 Schering Corporation and Affiliates 2000 Galloping Hill Road, Kenilworth, N.J. 07033

BOARD OF PHARMACY LICENSE NUMBER MINNESOTA STATES REQUIRES WHOLESALE DRUG DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL PAYMENTS, HONORARIA, REIMBURSEMENT & OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.461, CLAUSES (3) TO (5), PAID TO PRACTITIONERS IN MINNESOTA DURING THE PRECEDING CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALING \$100 OR MORE TO A PARTICULAR PRACTITIONER DURING THE YEAR AND SHALL IDENTIFY THE PRACTITIONER. REPORTS FILED UNDER THE PROVISION ARE PUBLIC DATA.

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Rosario, Dr. Inell	1707 Spinaker LN, Woodbury MN 55125	\$100.00	Preceptorship(s)
Ryan, Dr. Walter	1011 East First Street, Duluth MN	\$900.00	Honoraria
Sachs, Dr. Martin I.	2305 10th Ave NW, Rochester MN 55901	\$500.00	Honoraria
Sahni, Gulshan MD	101 Willmar Avenue, Willmar MN 56201	\$100.00	Preceptorship(s)
Salazar, Albert MD	4156 Wenzel Ave, Eagan MN 55122	\$125.00	Preceptorship(s)
Samuelson, Dr. Jeffrey	2800 Hennepin Avenue, Minneapolis MN 55408	\$200.00	Preceptorship(s)
Schoenwetter, William MD	3800 Park Nicollet Blvd, St Louis Park MN. 55416	\$8,750.00	Honoraria
Schoenwetter, William MD	3800 Park Nicollet Blvd, St Louis Park MN. 55416	\$500.00	Preceptorship(s)
Schoenwetter, William MD	3800 Park Nicollet Blvd, St Louis Park MN. 55416	\$239.88	Exp. Reimbursement(s)
Schnrockenstein, David MD	7250 France Avenue So, Edina MN 55435	\$1,000.00	Preceptorship(s)
Seifert, Dr. Gregory L	19285 Highway Seven, Shorewood MN 55331	\$100.00	Preceptorship(s)
Stiefferman, Thomas MD	3420 Denmark Ave, Eagan MN 55122	\$200.00	Preceptorship(s)
Stoberg, Robert MD	1000 E 1st Street Ste 203, Duluth MN 55803	\$1,100.00	Honoraria
Skubitz, Dr. Keith	420 Delaware Street SE, Minneapolis MN 55455	\$1,500.00	Honoraria
Smith, Coleman I. MD	2545 Chicago Avenue So #700, Minneapolis MN 55044	\$1,750.00	Honoraria
Smith, Coleman I. MD	2545 Chicago Avenue So #700, Minneapolis MN 55044	\$803.24	Exp. Reimbursement(s)
Spilseth, Paul MD	921 S. Greeley St., Stillwater MN 55082	\$375.00	Preceptorship(s)
St Paul Allergy	565 Snelling Avenue S, St Paul MN 55116	\$450.00	Preceptorship(s)
Stang, Dr. Mark	920 E 28th St, Minneapolis Mn 55407	\$250.00	Preceptorship(s)
Stern, Wayne MD	920 East 28th Street, Minneapolis MN 55407	\$550.00	Preceptorship(s)
Stillerman, Allan MD	11509 Cedar Pass, Minnetonka MN 55305	\$1,500.00	Honoraria
Stillerman, Allan MD	11509 Cedar Pass, Minnetonka MN 55305	\$1,150.00	Preceptorship(s)
Storvick, Dr. Eric	2509 E Main Street, Mankato MN 56001	\$300.00	Preceptorship(s)
Sveum, Richard MD	3800 Park Nicollet Blvd, St Louis Park MN. 55416	\$4,450.00	Honoraria

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NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Sveum, Richard MD	3800 Park Nicollet Blvd, St Louis Park MN. 55416	\$700.00	Preceptorship(s)
Sveum, Richard MD	3800 Park Nicollet Blvd, St Louis Park MN. 55416	\$86.80	Exp. Reimbursement(s)
Taber, Dr. Jeffrey D.	Highway 70 & 60, Windam MN 56101	\$100.00	Preceptorship(s)
Tansek, Dr. Karin	ENT Department 3366 Oakdale Avenue, Robbinsdale MN 55422	\$100.00	Preceptorship(s)
Traub, Audrey MD	1328 Birchcrest Drive, White Bear Lake MN 55110	\$500.00	Honoraria
Traub, Audrey MD	1328 Birchcrest Drive, White Bear Lake MN 55110	\$177.25	Exp. Reimbursement(s)
Tuttle, Todd MD	3900 Park Nicollet St Louis Park, MN 55416	\$6,000.00	Honoraria
Tuttle, Todd MD	3900 Park Nicollet St Louis Park, MN 55416	\$1,133.40	Exp. Reimbursement(s)
Velick, Gary MD	221 Medical Arts Bldg. 825 Nicollet Mall MN. 55402	\$450.00	Preceptorship(s)
Vilaseca, Luis B. MD	3470 Washington Dr Ste 201, Eagan MN 55120	\$600.00	Preceptorship(s)
Wahlstrom, Dr. John	565 S Snelling Avenue, St Paul MN 55116	\$475.00	Preceptorship(s)
Wahlstrom, Dr. John	565 S Snelling Avenue, St Paul MN 55116	\$2,250.00	Honoraria
Wallsh, William E. MD	University Park Medical Bldg 1690 University Ave. W., St Paul MN 55104	\$225.00	Preceptorship(s)
Warhol, Dr. Richard	1850 Beam Ave, Maplewood MN 55109	\$500.00	Honoraria
Wheeler, Dr. William	2545 Chicago Ave., Minneapolis MN 55404	\$125.00	Preceptorship(s)
Wilson, Kent MD	3424 Denmark Ave, Eagan MN 55123	\$150.00	Preceptorship(s)
Wyatt, Richard A. MD	3800 Park Nicollet Blvd, St Louis Park MN. 55416	\$2,000.00	Honoraria
Wyatt, Richard A. MD	3800 Park Nicollet Blvd, St Louis Park MN. 55416	\$700.00	Preceptorship(s)
Yassin, Mohamrd MD	1511 Northway Drive Suite 101, St. Cloud MN 56303	\$1,000.00	Honoraria
Yokel, Benjamin MD	1812 Young Lake Road, Melrude MN 55766	\$1,500.00	Honoraria
Zachary, Dr Cherie	600 West 98th Street, Bloomington MN 55420	\$750.00	Honoraria
Zekowski, Dr. Steven	2341 Copperfield Drive, Mendota Hts MN 55120	\$500.00	Honoraria
Zieske, Dr. Larry A.	3800 Park Nicollet Blvd, St Louis Park MN. 55416	\$100.00	Preceptorship(s)
Zuckman, Michael R. D.O.	2650 Raleigh Ave S., St Louis Park MN 55416	\$125.00	Preceptorship(s)

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NAME OF PRACTITIONER	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Please include designation (i.e., MD, etc.)			
Zurek, Dr. John F.	3366 Oakdale Ave N. Suite 150, Robbinsdale MN 55422	\$200.00	Preceptorship(s)

Cynthia K. Dinetta
Manager of Finance Support

Cynthia K. Dinetta
Manager of Finance Support

Cynthia K. Dinetta

Sincerely,

Please find attached a 1998 year end report listing payments made by Zeneca Inc. to individuals within the State of Minnesota. I can be reached at (302) 886-7733 if you have any questions concerning the information submitted.

Dear Mr. Holmstrom:

Mr. David Holmstrom, Exec. Director
Minneapolis Board of Pharmacy
2700 University Ave., W., Suite 107
St. Paul, Minnesota, 55114-1079

January 28, 1999

Cynthia K. Dinetta
Finance Department
1800 Concord Pike
Wilmington, DE 19850-5438

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MINNESOTA BOARD
OF PHARMACY