



PURCHASE ORDER

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Tax Exempt Agency of Texas State Government

ORDER DATE: 02-25-15 INVITATION/REQUEST NO: [REDACTED]
PURCHASE ORDER NO: 696-5-[REDACTED]

AGENCY NAME AND ADDRESS
TEXAS DEPT. OF CRIMINAL JUSTICE
ACCOUNTS PAYABLE / 696-5-[REDACTED]
P.O. BOX 4018
HUNTSVILLE, TX 77342-4018
DESTINATION OF GOODS

VENDOR NAME AND ADDRESS
[REDACTED]
[REDACTED]
VENDOR PHONE NO. [REDACTED]
VENDOR ID NO. [REDACTED]
PERSON CONTACTED: [REDACTED]
CASH DISCOUNT NET % DAYS OR NET 30

Order Type: F FOB: DESTINATION Freight Terms: PREPAID

| DESCRIPTION | QTY | U/M | UNIT PRICE | EXTENSION |
|---|-----------|-----|------------|-----------|
| TDCJ SECURITY OPERATIONS: CONTACT NAME: [REDACTED] PHONE NUMBER: 936-437-9031 | | | | |
| PAYMENT SHALL BE MADE PRIOR TO SHIPMENT OF GOODS. | | | | |
| 271-92 | 1000.0000 | EA | 24.990000 | 24990.00 |

THIOPENTAL SODIUM 1.0 G PER VIAL

DELIVER TO:
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
HUNTSVILLE UNIT HOSPITAL
815 12TH STREET
HUNTSVILLE, TEXAS 77340
ATTN: [REDACTED]

RIGHT TO OFFSET:
IN THE EVENT TDCJ DETERMINES THAT VENDOR OWES MONEY TO TDCJ UNDER ANY CONTRACT OR PURCHASE ORDER, TDCJ UPON PROVIDING VENDOR WITH WRITTEN NOTICE OF ITS INTENT TO OFFSET, SHALL HAVE THE RIGHT TO WITHHOLD MONIES DUE VENDOR WITH RESPECT TO THIS PURCHASE ORDER OR WITH RESPECT TO ANY CONTRACT OR PURCHASE ORDER WITH TDCJ AND APPLY SUCH MONIES TO THE MONEY DUE TDCJ.

VENDOR MAINTENANCE DIRECT DEPOSIT AND SUBSTITUTE W-9 FORM
[REDACTED] Signature of Authorized Purchaser

If terms and conditions set forth in the referenced Invitation/Request become a part of this purchase order. In accordance with your bid/offer, item(s) must be received at the destination address on or before 03/01/2015
Seller agrees that any payments due under this contract will be applied towards any debt, including but not limited to delinquent taxes and child support that is owed to the State of Texas.
STATE AND CITY SALES TAX EXEMPTION: The undersigned claims an exemption from taxes under Chapter 151, Section 309, Texas Tax Code, for the purchase of services/tangible personal property purchased from the contractor and/or shipper listed above, as these are being secured for the exclusive use of the State of Texas.



HPL TEXAS CORRECTIONS



Invoice No. & DATE: [REDACTED] / TEXAS CORRECTIONS / 3rd March 2015
 Order No: 606-0 [REDACTED] Date: 25th Feb 2015
 User Ref: HPL
 Buyer (if other than consignee): HPL

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
 HUNTSVILLE UNIT HOSPITAL
 615 6TH STREET
 HUNTSVILLE, TEXAS 77240,
 UNITED STATES OF AMERICA
 OEA NUMBER [REDACTED]
 PHONE NUMBER: +1-936-437-0033

Country of Origin of Goods: [REDACTED] Country of Destination: UNITED STATES OF AMERICA

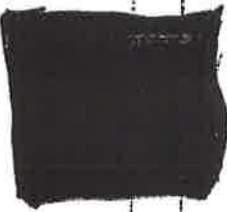
Place of Discharge: Houston Airport, TEXAS
 Place of Loading: [REDACTED]
 Final Destination: HUNTSVILLE, TEXAS

Terms of Sale: 2007 ADVANCE

| Mark | Gr./ID | Package | Description | Quantity | Rate | Amount |
|------|--------|---------|--------------------------------|----------|-----------|--------|
| | | | Harmless Medicine | | | |
| | 1 | 1 | Thiopenta Sodium USP 3gm / 1ml | 1000 | 24.93 | 24930 |
| | | | | | TOTAL USD | 24930 |

TOTAL: US DOLLARS (Twenty Four Thousand Nine Hundred and Ninety Only) ✓

Declaration: We declare that this invoice shows the actual price of the Goods described and that all particulars are true and correct.



REFUSE INTEREST *copy 4*

U.S. Department of Justice / Drug Enforcement Administration

CONTROLLED SUBSTANCES IMPORT / EXPORT DECLARATION

(Read Instructions on reverse before completing)

OMB APPROVAL

No. 1117-0009

EXPIRATION DATE: 9/30/2016

See reverse for Privacy Act

U.S. CUSTOMS

CERTIFICATION

Date of Departure/Arrival

Date of Certification

Signature of Customs Official

DEA Transaction ID

IMPORT DECLARATION Nonnarcotic Substances In Schedules III, IV, V
 EXPORT DECLARATION Nonnarcotic Substances In Schedules II, and IV and all substances in Schedule V

IMPORTER/EXPORTER (Name and Address)
 Texas Department of Criminal Justice
 Huntsville Unit
 1212 12th Street
 Huntsville, TX 77340

BROKER OR FORWARDING AGENT, IF USED (Name and Address)
 [REDACTED]

REGISTRATION NO. [REDACTED]

1a. NAME AND QUANTITY OF DRUG OR PREPARATION
(Enter names as shown on labels; numbers and sizes of packages; strength of tablets, capsules, etc., CSA Drug Code and DCI Number)

2b. CONTROLLED SUBSTANCE CONTENT OF DRUG OR PREPARATION
expressed as acid, base or alkaloid. (Enter names of controlled substances contained in the drug, compound, or preparation)

2c. DATE IMPORTED/EXPORTED AND ACTUAL QUANTITY
(Completed by registrant at time of transaction)

Thiopental
 1,000 vials / shipment x 914.1 mg / vial
 = 914100 mg / shipment
 = 914.1 g / shipment of Thiopental

 Number: 2100/2329
 Number: 69860-0001-01

Thiopental
 1,000 vials / shipment x 914.1 mg / vial
 = 914100 mg / shipment
 = 914.1 g / shipment of Thiopental

[REDACTED]

FOREIGN (for U.S. Import) DOMESTIC (for U.S. export) **PORT OF DEPARTURE AND APPROX. DEPARTURE DATE**
 [REDACTED]

FOREIGN (for U.S. export) DOMESTIC (for U.S. Import) **PORT OF IMPORTATION AND APPROX. ARRIVAL DATE**
 (George Bush Intercontinental / Houston Airport (IAH) - [REDACTED])

MODE OF TRANSPORT; NAME OF VESSEL / CARRIER (if known)
 Flight

1b. NAME OF ALL INTERMEDIATE CARRIERS
 [REDACTED]

NAME AND ADDRESS OF FOREIGN CONSIGNEE/CONSIGNOR
 [REDACTED]

I certify that the substance(s) listed in Section 2 are to be Imported (conform to 21 U.S.C. § 952(b)) Exported (conform to 21 U.S.C. § 953(e)) and are for Medical, Scientific, or Other legitimate uses (attach explanation for other legitimate use).

The above named substances are to be Re-Exported (Attach documentation per Title 21, CFR 1312.27) to (list countries):

If being used as an "Export Declaration", attach documentation that the consignee is authorized under the laws and regulations of the country of destination to receive the controlled substances. If the controlled substances are being re-exported from the first country to second countries, attach documentation that the country of ultimate destination is authorized under the laws and regulations of that country to receive the controlled substances.

NAME OF AUTHORIZED INDIVIDUAL OF IMPORTER / BROKER OR FORWARDING AGENT
 [REDACTED]

DATE
 June 8, 2015

NAME OF FIRM AND TELEPHONE NUMBER
 Texas Department of Criminal Justice
 (936) 437-1950

PURCHASE ORDER

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| DESCRIPTION | QTY | U/M | UNIT PRICE | EXTENSION |
|-------------|-----|-----|------------|-----------|
|-------------|-----|-----|------------|-----------|

(ELECTRONIC FUNDS TRANSFER):
 GOVERNMENT CODE 403.016 (C) (3) ENCOURAGES STATE AGENCIES TO TRANSMIT PAYMENTS TO VENDORS THROUGH ELECTRONIC FUNDS TRANSFER (DIRECT DEPOSIT). TO SET UP YOUR ACCOUNT, CONTACT AGENCY ACCOUNTS PAYABLE AT (936) 437-8761 OR (936) 437-6357.

REGARDLESS AS TO WHETHER DIRECT DEPOSIT IS CHOSEN, THE AWARDED VENDOR SHALL SUBMIT A COMPLETED VENDOR MAINTENANCE DIRECT DEPOSIT AND SUBSTITUTE V-9 FORM TO TDCJ ACCOUNTS PAYABLE. VENDORS WHO HAVE ALREADY SUBMITTED A FORM FOR ANOTHER SEPARATE PURCHASE ORDER ARE NOT REQUIRED TO SUBMIT ANOTHER FORM. THE VENDOR FORM AND INSTRUCTIONS ARE FOUND AT THE FOLLOWING LINK ON THE TDCJ WEBSITE: WWW.TDCJ.STATE.TX.US/DIVISIONS/FINANCE/FINANCE_ACCT_ACCTS_PAY.HTML (NOTE: THIS ADDRESS MUST BE IN LOWER CASE LETTERING WHEN ENTERED IN THE ADDRESS BAR OF YOUR BROWSER.)

TO ENROLL FOR ADVANCE NOTIFICATION OF ELECTRONIC FUNDS TRANSFER TO YOUR ACCOUNT, PLEASE CONTACT THE NUMBERS LISTED ABOVE. PAYMENT INFORMATION MAY BE OBTAINED BY CALLING THE COMPTROLLER OF PUBLIC ACCOUNTS TOLL FREE AT (800) 531-5441, EXT. 3-3660 OR IN AUSTIN, TEXAS CALL (512) 936-3461, SELECT OPTION 3 (PIN NOT REQUIRED) AND ENTER THEIR VENDOR IDENTIFICATION NUMBER AND 696 FOR THE AGENCY NUMBER. INFORMATION IS AVAILABLE VIA THE INTERNET AT: HTTPS://FMX.CPA.STATE.TX.US/FMX/PAYMENT/INDEX.PHP (NOTE: THIS ADDRESS MUST BE IN LOWER CASE LETTERING WHEN ENTERED IN THE ADDRESS BAR OF YOUR BROWSER.)

SHIPPING AND INVOICE INSTRUCTIONS:

~~FAILURE TO FOLLOW THESE SHIPPING AND INVOICE INSTRUCTIONS (A-H) MAY RESULT IN MERCHANDISE BEING REJECTED AT THE RECEIVING DOCK AND RETURNED TO THE VENDOR WITHOUT NOTICE.~~

SHIP INDIVIDUAL LINE ITEMS COMPLETE.

EACH PART SHIPPED SHALL HAVE A PART NUMBER OR BE TAGGED WITH A PART NUMBER AS IT APPEARS ON THE PURCHASE ORDER. IF ITEMS ARE SHIPPED WITHOUT A PART NUMBER, THEY WILL BE RETURNED TO THE VENDOR.

INCLUDE OR MARK P.O. NUMBERS ON ALL PACKING SLIPS, CARTONS, PACKAGES, BUNDLES, ETC.

INVOICES MUST BE SENT TO ACCOUNTS PAYABLE, P.O. BOX 4018, HUNTSVILLE, TX 77342-4018.

SUBMIT SEPARATE INVOICES FOR EACH SHIPMENT/PER LOCATION.

ONLY ONE P.O. NUMBER ON AN INVOICE.

THE INVOICE MUST BE ITEMIZED WITH THE DESCRIPTION, UNIT PRICE, AND EXTENSION LISTED.

VENDOR MUST SUPPLY A VALID PAYEE IDENTIFICATION NUMBER (PIN) ON

PURCHASE ORDER

CONTINUATION PAGE

696-5 [REDACTED]

Page 3 of 4

| DESCRIPTION EACH INVOICE. | QTY | U/M | UNIT PRICE | EXTENSION |
|------------------------------|-----|-----|------------|-----------|
|------------------------------|-----|-----|------------|-----------|

IN ACCORDANCE WITH SECTION 2252.907, GOVERNMENT CODE, THE VENDOR ACKNOWLEDGES THAT THIS CONTRACT AND INFORMATION CREATED OR MAINTAINED IN CONNECTION WITH THIS CONTRACT IS PUBLIC INFORMATION AND SUBJECT TO DISCLOSURE AS PROVIDED BY CHAPTER 552, GOVERNMENT CODE (TEXAS PUBLIC INFORMATION ACT). THE PUBLIC INFORMATION ACT MAY REQUIRE THE VENDOR TO MAKE INFORMATION RELATED TO THIS CONTRACT AVAILABLE TO THE PUBLIC PURSUANT TO A REQUEST FOR PUBLIC INFORMATION. THE VENDOR AGREES, UPON REQUEST, TO MAKE INFORMATION RELATED TO THIS CONTRACT THAT IS NOT OTHERWISE EXCEPTED FROM RELEASE BY THE PUBLIC INFORMATION ACT AVAILABLE TO THE PUBLIC IN HARD COPY, UNLESS THE

REQUESTOR OF THE INFORMATION CONSENTS TO RECEIVE THE INFORMATION IN ANOTHER MUTUALLY AGREEABLE FORMAT. THE VENDOR ACKNOWLEDGES THAT THE AGENCY SHALL NOT PROVIDE LEGAL COUNSEL RELATED TO THE VENDOR'S COMPLIANCE WITH THE PUBLIC INFORMATION ACT.

SECURITY:

WHEN MAKING DELIVERIES TO CORRECTIONAL FACILITIES, CONTRACTOR'S COMPLIANCE WITH TDCJ SECURITY PROCEDURES IS REQUIRED. THIS INCLUDES DELIVERIES TO ALL TDCJ UNITS AND WAREHOUSES, OR ANY OTHER TDCJ OWNED, LEASED, OR CONTRACTED PREMISES. SPECIFIC REQUIREMENTS INCLUDE, BUT ARE NOT LIMITED TO:

- ALL CONTRACTOR STAFF OR CONTRACTED DELIVERY SERVICE MAKING DELIVERIES WITHIN A CORRECTIONAL FACILITY, AND THOSE AREAS WHERE OFFENDERS ARE ASSIGNED, WILL BE REQUIRED TO HAVE A SECURITY ESCORT THROUGHOUT THEIR DELIVERY. ALL DELIVERY STAFF SHALL BE REQUIRED TO FOLLOW THE DIRECTION OF SECURITY STAFF. ~~DELIVERY STAFF SHALL NOT INTERACT WITH OFFENDERS.~~

FURTHERMORE, CONTRACTOR STAFF SHALL ADHERE TO THE PROVISIONS FOUND IN PERSONNEL DIRECTIVE PD-29, "SEXUAL MISCONDUCT WITH OFFENDERS," WHICH IS LOCATED ON THE TDCJ WEBSITE AT [HTTP://WWW.TDCJ.STATE.TX.US/DIVISIONS/HR/HR-POLICY/PD-29.PDF](http://www.tdcj.state.tx.us/divisions/hr/hr-policy/pd-29.pdf). (NOTE: THIS ADDRESS MUST BE IN LOWER CASE LETTERING WHEN ENTERED IN THE ADDRESS BAR OF YOUR BROWSER.)

THE CONTRACTOR SHALL NOTIFY EACH OF THE CONTRACTOR'S STAFF ACCESSING TDCJ'S PREMISES OF THE PROVISIONS WITHIN THIS DIRECTIVE, PRIOR TO ANY DELIVERY.

ALL DELIVERY STAFF AND VEHICLES ARE SUBJECT TO SEARCH AND INSPECTION WHILE ON TDCJ PROPERTY.

ALL VEHICLES WILL BE LOCKED AND SECURED WHEN NOT IN USE. DRIVERS ARE REQUIRED TO KEEP KEYS IN THEIR DIRECT POSSESSION AT ALL TIMES.

DELIVERY STAFF SHALL NOT INTRODUCE ANY TYPE OF CONTRABAND ONTO ANY TDCJ FACILITY. EXAMPLES OF CONTRABAND INCLUDE, BUT ARE NOT LIMITED TO FIREARMS, KNIVES, WEAPONS OF ANY TYPE, TOBACCO OF ANY TYPE, ALCOHOL, CONTROLLED SUBSTANCES (ILLEGAL DRUGS), PAGERS, AND

PURCHASE ORDER

CONTINUATION PAGE

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| DESCRIPTION | QTY | U/M | UNIT PRICE | EXTENSION |
|---|-----|-----|------------|-----------|
| CELL PHONES. DELIVERY STAFF MAY NOT CARRY MORE THAN TWENTY-FIVE DOLLARS (\$25.00) IN CASH INTO ANY TDCJ FACILITY. | | | | |

- 5. DELIVERY EMPLOYEE'S ATTIRE MUST BE APPROPRIATE OR COMPATIBLE WITH THE CURRENT BUSINESS ENVIRONMENT.
- 6. GENERALLY, EX-OFFENDERS SHALL NOT BE ALLOWED INSIDE THE FENCED PERIMETER OF A FACILITY TO MAKE DELIVERIES UNLESS APPROVED BY THE UNIT WARDEN. THE WARDEN MAY NOT ALLOW AN EX-OFFENDER ON A UNIT OR FACILITY, WHETHER INSIDE OR OUTSIDE THE FENCED PERIMETER, IF THE WARDEN BELIEVES THE PERSON MAY JEOPARDIZE THE SAFE AND ORDERLY OPERATION OF THE UNIT OR FACILITY, POSE A DANGER TO OFFENDERS OR EMPLOYEES, OR PLACE AN UNDUE LOGISTICAL BURDEN ON STAFF.
- 7. MINORS AND PETS ARE PROHIBITED FROM TDCJ PROPERTY AND SHALL NOT BE IN DELIVERY VEHICLE.

TDCJ RESERVES THE RIGHT TO IMMEDIATELY REMOVE AND/OR REFUSE ENTRY TO ANY INDIVIDUAL WHO HAS VIOLATED THE ABOVE RESTRICTIONS. THE UNIT WARDEN OR FACILITY ADMINISTRATOR WILL ULTIMATELY BE RESPONSIBLE FOR INTERPRETING THESE RULES.

FOR QUESTIONS OR INQUIRIES CONTACT:

TDCJ CONTRACTS AND PROCUREMENT
 40 FINANCIAL PLAZA STE. 525
 WINTSVILLE, TX 77340
 TEL: 936-437-7069 FAX: 325-223-0310
 EMAIL: [REDACTED]@TDCJ.TEXAS.GOV

ORDER TOTAL: \$ 24,990.00

[REDACTED]

APRIL TEXAS COURT REPORTERS

| Invoice No. & DATE (U.S. CUSTOMER'S USE ONLY) APRIL 2015 | | ICC No. [REDACTED] | | | | |
|---|----------|--|-------------------------------|----------|-------|--------|
| Order Order No. 6905 | | Date: 25th Feb 2015 | | | | |
| Other Ref: Nil | | | | | | |
| Buyer (if other than consignor): Nil | | | | | | |
| Country of Origin of Goods: [REDACTED] | | Country of Destination: UNITED STATES OF AMERICA | | | | |
| ATTN: JAMES ANDERSON TEXAS DEPARTMENT OF CRIMINAL JUSTICE BURNHAMMERT HOSPITAL 825 4TH STREET DUNSTONVILLE, TEXAS 77540, UNITED STATES OF AMERICA PHONE NUMBERS: (936) 317-9033 | | | | | | |
| Incoterms: C.F.R. | | National Import License: [REDACTED] | | | | |
| Mode of Transport: By Air | | Part of Invoice: [REDACTED] | | | | |
| Invoice Description: [REDACTED] | | Final Destination: DUNSTONVILLE, TEXAS | | | | |
| Rank | Quantity | Package | Description | Quantity | Rate | Amount |
| | | | Hardest Medicine | | USD | USD |
| | 1 | 1 | Thiopenta Sodium USP 3gm Vial | 1.000 | 24.98 | 24.980 |
| TOTAL USD | | | | | | 24.980 |
| TOTAL US DOLLARS (Twenty Four Thousand Nine Hundred and Ninety Only) | | | | | | |
| Declaration: We declare that this invoice is for the actual value of the Goods described and that all particulars are true and correct. | | | | | | |
| [REDACTED] | | | [REDACTED] | | | |

REFUSE INTEREST *exp 4*

U.S. Department of Justice / Drug Enforcement Administration
CONTROLLED SUBSTANCES IMPORT / EXPORT DECLARATION

(Read Instructions on reverse before completing)

OMB APPROVAL
 No. 1117-0009
 EXPIRATION DATE: 9/30/2016
 See reverse for Privacy Act

1. CHECK ONE IMPORT DECLARATION Nonnarcotic Substances in Schedules III, IV, V
 EXPORT DECLARATION Nonnarcotic Substances in Schedules III, and IV and all substances in Schedule V

U.S. CUSTOMS
 CERTIFICATION

Date of Departure/Arrival

IMPORTER/EXPORTER (Name and Address)
 Texas Department of Criminal Justice
 Huntsville Unit
 815 12th Street
 Huntsville, TX 77340

BROKER OR FORWARDING AGENT, IF USED (Name and Address)

Date of Certification

Signature of Customs Official

DEA REGISTRATION NO. [REDACTED]

DEA Transaction ID

2. CONTROLLED SUBSTANCES TO BE IMPORTED OR EXPORTED

2a. NAME AND QUANTITY OF DRUG OR PREPARATION
 (Enter names as shown on labels; numbers and sizes of packages; strength of tablets, capsules, etc., CSA Drug Code and NDC Number)

2b. CONTROLLED SUBSTANCE CONTENT OF DRUG OR PREPARATION expressed as acid, base or alkaloid. (Enter names of controlled substances contained in the drug, compound, or preparation)

2c. DATE IMPORTED/EXPORTED AND ACTUAL QUANTITY
 (Completed by registrant at time of transaction)

Thiopental
 1,000 vials
 993.6 mg powder / vial (Thiopental Sodium)
 914.1 mg powder / vial (Thiopental)

Thiopental
 1,000 vials / shipment x 914.1 mg / vial
 = 914100 mg / shipment
 = 914.1 g / shipment of Thiopental

DEA Number: 2100/2329
 NDC Number: 69860-0001-01

a. FOREIGN (for U.S. import) DOMESTIC (for U.S. export) PORT OF EXPORTATION AND APPROX. DEPARTURE DATE

3b. FOREIGN (for U.S. export) DOMESTIC (for U.S. Import) PORT OF IMPORTATION AND APPROX. ARRIVAL DATE

[REDACTED] June 19, 2015

George Bush Intercontinental / Houston Airport (IAH) - June 23, 2015

a. MODE OF TRANSPORT; NAME OF VESSEL / CARRIER (if known)
 Air Freight

4b. NAME OF ALL INTERMEDIATE CARRIERS
 [REDACTED]

NAME AND ADDRESS OF FOREIGN CONSIGNEE/CONSIGNOR
 [REDACTED]

I hereby certify that the substance(s) listed in Section 2 are to be Imported (conform to 21 U.S.C. § 952(b)) Exported (conform to 21 U.S.C. § 953(e)) and are intended for Medical, Scientific, or Other legitimate uses (attach explanation for other legitimate use).

The above named substances are to be Re-Exported (Attach documentation per Title 21, CFR 1312.27) to (list countries):

If this form is being used as an "Export Declaration", attach documentation that the consignee is authorized under the laws and regulations of the country of destination to receive the controlled substances. If the controlled substances are being re-exported from the first country to second countries, attach documentation that the consignee in the country of ultimate destination is authorized under the laws and regulations of that country to receive the controlled substances.

NATURE OF AUTHORIZED INDIVIDUAL OF IMPORTER / EXPORTER, BROKER OR FORWARDING AGENT

DATE
 June 8, 2015

NAME OF FIRM AND TELEPHONE NUMBER
 Texas Department of Criminal Justice
 (936) 437-1950

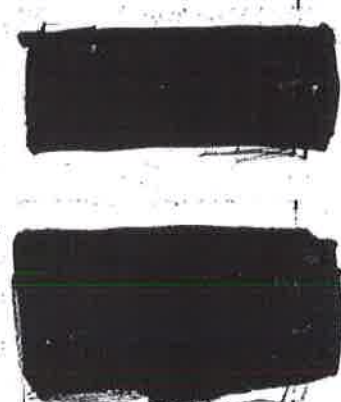
Print Name:

STATE OF TEXAS PURCHASE VOUCHER

| | | | | | |
|----------------------|---|----------------------|----------------------|----------------|--------------------------------|
| ARCHIVE REFERENCE NO | AGENCY 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | CURRENT DOCUMENT [REDACTED] |
| | EFF DATE 03/25/15 | DOC DATE 02/25/15 | DUE DATE 04/03/15 | DOC AGY 696 | DOCUMENT AMOUNT 24,990.00 |
| VENDOR NO / MC | REQUESTED PAYMENT DATE 03/25/15 | | PDT | PCC 696-5 | REQUISITION NO [REDACTED] |

| | |
|------------------------------|--|
| NAME / ADDRESS [REDACTED] | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 |
|------------------------------|--|

| | | | | | | | | | |
|---------------|------|--------------------|--------------------|-----|----|------|------------|-----------|---|
| REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| APPN | FUND | INVOICE NUMBER | DESCRIPTION | | | | AGENCY USE | | |
| | | 001 225 [REDACTED] | 41060 15 7312 8306 | | | | | 24,990.00 | |
| 5038 | 0014 | HPL/TEXAS/CORR | | | | | | | |



| DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT |
|----------------------------------|-----|-----------|--------|
| 15 | | | |

INVOICE SERVICES (936) 437-6929 MWI2262
 PHONE ENT BY

Approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. Payment complies with the General Appropriations Act.

TITLE _____ DATE _____
 TITLE _____ DATE _____



TEXAS DEPARTMENT OF CRIMINAL JUSTICE
 HUNTSVILLE UNIT
 815 12TH STREET
 HUNTSVILLE, TX 77340-0000-000



| | | | |
|---|---------------------------|------------|--|
| DEA REGISTRATION NUMBER | THIS REGISTRATION EXPIRES | FEE PAID | CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON D.C. 20537 |
| [REDACTED] | 11-30-2015 | FEE EXEMPT | |
| SCHEDULES | BUSINESS ACTIVITY | ISSUE DATE | |
| 3N, | IMPORTER | 01-21-2015 | Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance. |
| TEXAS DEPARTMENT OF CRIMINAL JUSTICE HUNTSVILLE UNIT 815 12TH STREET HUNTSVILLE, TX 77340-0000 | | | THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE. |

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
 UNITED STATES DEPARTMENT OF JUSTICE
 DRUG ENFORCEMENT ADMINISTRATION
 WASHINGTON D.C. 20537

| | | |
|-------------------------|---------------------------|------------|
| DEA REGISTRATION NUMBER | THIS REGISTRATION EXPIRES | FEE PAID |
| [REDACTED] | 11-30-2015 | FEE EXEMPT |
| SCHEDULES | BUSINESS ACTIVITY | ISSUE DATE |
| 3N, | IMPORTER | 01-21-2015 |

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
 HUNTSVILLE UNIT
 815 12TH STREET
 HUNTSVILLE, TX 77340-0000

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

TX002

| | | |
|--|--|---|
| U.S. Department of Justice / Drug Enforcement Administration CONTROLLED SUBSTANCES IMPORT / EXPORT DECLARATION <i>(Read Instructions on reverse before completing)</i> | | OMB APPROVAL No. 1117-0009 EXPIRATION DATE: 9/30/2016 See reverse for Privacy Act |
| 1. CHECK ONE <input checked="" type="checkbox"/> IMPORT DECLARATION <input type="checkbox"/> EXPORT DECLARATION | Nonnarcotic Substances in Schedules III, IV, V Nonnarcotic Substances in Schedules III, and IV and all substances in Schedule V | U.S. CUSTOMS CERTIFICATION Date of Departure/Arrival Date of Certification Signature of Customs Official DEA Transaction ID |
| IMPORTER/EXPORTER (Name and Address) Texas Department of Criminal Justice Huntsville Unit 815 12th Street Huntsville, TX 77340 | BROKER OR FORWARDING AGENT, IF USED (Name and Address) (b)(6) Alpha Brokers Group 2875 NW 82nd Avenue Miami, Florida 33122 | |
| DEA REGISTRATION NO. RT0474382 | | |
| 2. CONTROLLED SUBSTANCES TO BE IMPORTED OR EXPORTED | | |
| 2a. NAME AND QUANTITY OF DRUG OR PREPARATION <i>(Enter names as shown on labels; numbers and sizes of packages; strength of tablets, capsules, etc., CSA Drug Code and NDC Number)</i> Thiopental 1,000 vials 993.6 mg powder / vial (Thiopental Sodium) 914.1 mg powder / vial (Thiopental) DEA Number: 2100/2329 NDC Number: 69860-0001-01 | 2b. CONTROLLED SUBSTANCE CONTENT OF DRUG OR PREPARATION expressed as acid, base or alkaloid. <i>(Enter names of controlled substances contained in the drug, compound, or preparation)</i> Thiopental 1,000 vials / shipment x 914.1 mg / vial = 914100 mg / shipment = 914.1 g / shipment of Thiopental | 2c. DATE IMPORTED/EXPORTED AND ACTUAL QUANTITY <i>(Completed by registrant at time of transaction)</i> 2015 JUN 11 PM 2:53 RECEIVED 8001 |
| 3a. <input checked="" type="checkbox"/> FOREIGN (for U.S. import) <input type="checkbox"/> DOMESTIC (for U.S. export) PORT OF EXPORTATION AND APPROX. DEPARTURE DATE Indira Gandhi International Airport, India - June 19, 2015 | 3b. <input type="checkbox"/> FOREIGN (for U.S. export) <input checked="" type="checkbox"/> DOMESTIC (for U.S. import) PORT OF IMPORTATION AND APPROX. ARRIVAL DATE George Bush Intercontinental / Houston Airport (IAH) - June 23, 2015 | |
| 4a. MODE OF TRANSPORT; NAME OF VESSEL / CARRIER (if known) Air Freight | 4b. NAME OF ALL INTERMEDIATE CARRIERS OCASA Logistic Solutions | |
| 5. NAME AND ADDRESS OF FOREIGN CONSIGNEE/CONSIGNOR Harris Pharma LLP RDB Boulevard, 8th Floor Plot K-1, Sector V, Block EP & GP Salt Lake City, Kolkata 700 091 India | | |
| I hereby certify that the substance(s) listed in Section 2 are to be <input checked="" type="checkbox"/> Imported (conform to 21 U.S.C. § 952(b)) <input type="checkbox"/> Exported (conform to 21 U.S.C. § 953(e)) and are intended for <input type="checkbox"/> Medical, <input type="checkbox"/> Scientific, or <input checked="" type="checkbox"/> Other legitimate uses (attach explanation for other legitimate use). <input type="checkbox"/> The above named substances are to be Re-Exported (Attach documentation per Title 21, CFR 1312.27) to (list countries): | | |
| If the form is being used as an "Export Declaration", attach documentation that the consignee is authorized under the laws and regulations of the country of destination to receive the controlled substances. If the controlled substances are being re-exported from the first country to second countries, attach documentation that the consignee in the country of ultimate destination is authorized under the laws and regulations of that country to receive the controlled substances. | | |
| SIGNATURE OF IMPORTER/EXPORTER (b)(6) | DATE June 8, 2015 | NAME OF FIRM AND TELEPHONE NUMBER Texas Department of Criminal Justice (936) 437-1950 |
| (b)(6) Name FORM-236 2015 JUN 11 PM 2:53 RECEIVED 8001 | COPY 4 | (b)(6) TDCJ, Texas go TDCJ, Texas go |