

**Vermont Office of Attorney General
109 State Street
Montpelier, VT 05609-1001**

2012 Samples Disclosure Form for Manufacturers of Prescribed Products

Reporting Period: January 1, 2012 to December 31, 2012; Due Date: April 1, 2013

Name of Manufacturer											
Last Name of Recipient							First Name			MI	
Lic. Number/ID Number of Recipient											
Date Delivered					Number of Samples						
Contents (Check all that apply)					<input type="checkbox"/> Prescribed Product		<input type="checkbox"/> Vouchers, etc		<input type="checkbox"/> Other (Including Non-Prescribed Items or Educational Materials)		
Prescribed Product											
Prescribed Product Type		Prescribed Product Name			Units/Sample		Dosage or N/A		Description		
Vouchers, Coupons, Co-Pay Cards, Etc.											
Prescribed Product Type		Prescribed Product Name, or N/A, Multiple Products, and/or Multiple Manufacturers			Vouchers/Sample		Description of Product/Discount				
Other (Including Non-Prescribed Items or Educational Materials)											
Prescribed Product Type		Prescribed Product Name, or N/A, or Multiple Products			Other Sample Type		Description of Item/Discount/Material				

Next Disclosure

Submit by Email

Print for Your Records

2012 Samples Disclosure Field Values

Product Type

Pharmaceuticals
Biologics
Medical Devices
Combination Product

Sample Type

Non-Prescribed Item
Educational Material
Other