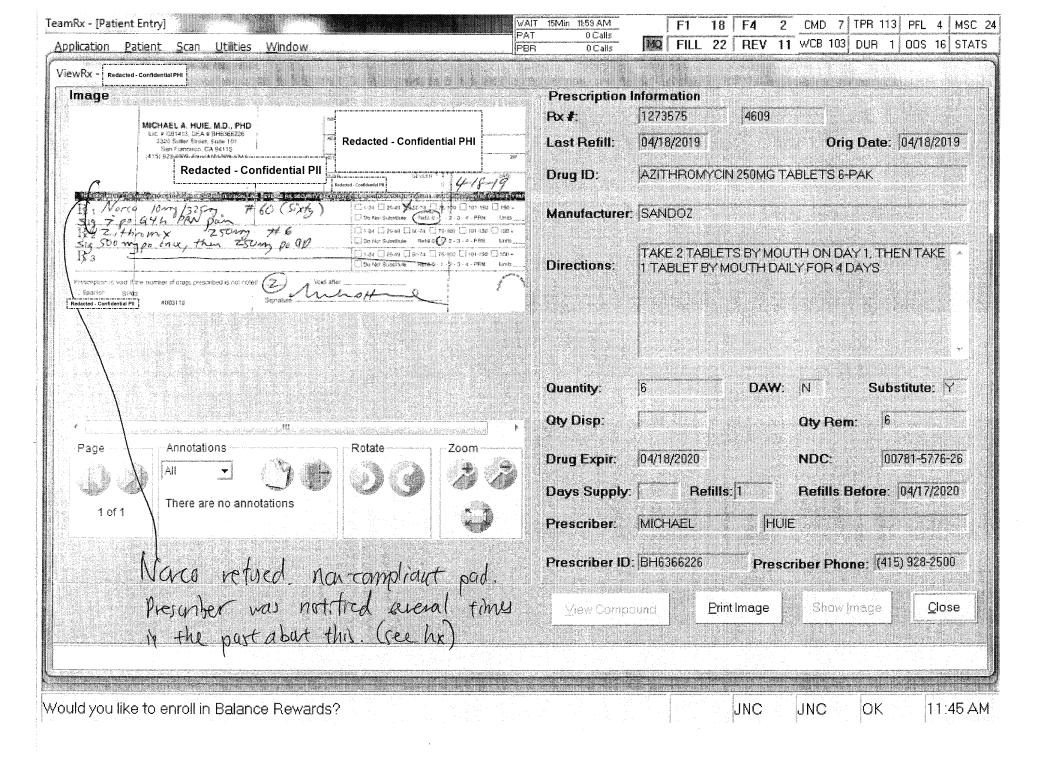


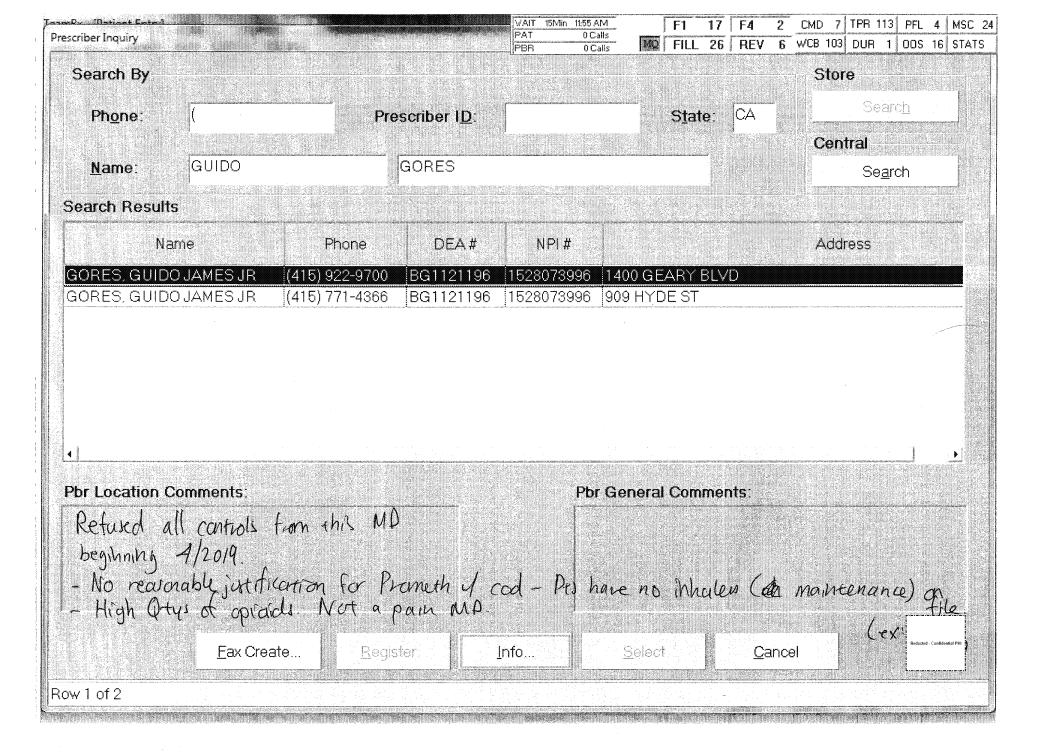
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* perved

Saint Francis Medical Group Office 909 Hyde Street, Ste 125, San Francisco, CA 94109 415-771-4366 Plan Name Guido Gores M.D. CAG61254 (CS#: 1528073996) DEA #BG1121196 NPI:1528073996 Card Holder ID PBM Unique ID Note to Pharmacy: If medication details are handwritten, call prescriber's office for verification. Name Redacted - Confidential PHI Group No Address clonazePAM I MG Orul Tublet (**60** TAB) 1-24 Relationship Code Quantity: (**60** TAB) (sixty tablet) 50-74 TAKE 1 TABLET BY MOUTH TWICE DAILY Member Phone No 75-100 Home: Redacted - Confidential PII 101-150 The prescription will be filled generically unless prescriber writes 'daw' in the box below' x Duilo & Dang 151 and over Date 04/10/2019 May Substitute Security Feature List:
1. (*) bordered and spelled quantities _Units CONFIDENTIAL PROTECTED HEALTH INFORMATION

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