**PHARMACEUTICAL PRICING AGREEMENT**

**ADDENDUM A**

**2024 ANNUAL**

| PRODUCT BRAND NAME | NDC NUMBER | FEDERAL CEILING PRICE  PER PACKAGE UNIT (NDC) |
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\*\*Please do not include the IFF in the price provided. This should represent your calculated Federal Ceiling Price only.

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| --- | --- |
| Manufacturer Name: | Contract Number: |
| Printed Name and Title of Signatory: | |
|  | |
| Signature and Date: |  |