

CALIFORNIA STATE BOARD OF PHARMACY 2720 GATEWAY OAKS DRIVE, SUITE 100 SACRAMENTO, CA 95833 (916) 518-3100

## Designated Representative-Reverse

LICENSE NUMBER RECEIPT NO. Distributor License VALID UNTIL

41290344

VALID UNTIL JULY 01, 2025

JOHN A. CAPELLI 37103 65TH CT BURLINGTON WI 53105 In accordance with the provisions of section 4053 of the Business and Professions Code, the individual named hereon holds a Drug Wholesaler Designated Representative License.

Any change of name or address must be reported to the Board of Pharmacy in writing within 30 days of the change.

SIGNATURE OF DESIGNATED REPRESENTATIVE:

WPHDRR 09/30/19

05/13/24

The official status of this license can be verified at www.pharmacy.ca.gov