NAME OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER	ADDRESS OF WHOLESALE DRUG DISTRIBUTOR/MANUFACTURER
Alpharma Pharmaceuticals, LLC	**1 New England Avenue, Piscataway, NJ 08854**

MD BOARD OF PHARMACY LICENSE NUMBER	MINNESOTA STATUTES REQUIRE WHOLESALE DISTRIBUTORS TO FILE WITH THE BOARD OF PHARMACY AN ANNUAL REPORT IDENTIFYING ALL REIMBURSEMENT OTHER COMPENSATION AUTHORIZED UNDER SECTION 151.461. CLAUSES (3) TO (5). PAID TO PRACTITIONERS IN MINNESOTA CALENDAR YEAR. THE REPORT SHALL IDENTIFY THE NATURE AND VALUE OF ANY PAYMENTS TOTALLING $100 OR MORE, TO A PARTICULAR AND SHALL IDENTIFY THE PRACTITIONER, REPORTS FILED UNDER THIS PROVISION ARE PUBLIC DATA.
Currently Not Available. **Application In Progress**	

NAME OF PRACTITIONER Please include designation (i.e., MD, etc.)	ADDRESS OF PRACTITIONER	VALUE OF PAYMENTS	TYPE OF PAYMENTS
Anderson, Alfred V. MD	**5775 Wayzata Blvd # 110, Minneapolis, MN 55416**	**$1,285**	**Honraria, and expenses for two Speaker Programs**

RECEIVED AT
APR 19 2007
MINNESOTA BOARD OF PHARMACY