



**OVATION**  
Pharmaceuticals, Inc.

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August 22, 2008

Minnesota Board of Pharmacy  
Suite 530  
2829 University Avenue Southeast  
Minneapolis, MN 55414-3251  
[Pharmacy.Board@state.mn.us](mailto:Pharmacy.Board@state.mn.us)

RE: Reporting of Payments to Practitioners-Ovation Pharmaceuticals, Inc.: January 1,  
2007 through December 31, 2007

Dear Board of Pharmacy:

Enclosed is a report, also sent to the e-mail address above, of payments made to  
Practitioners in the state of Minnesota for the Calendar Year 2007. Ovation  
Pharmaceuticals, Inc. is providing information in the annual report based on its good faith  
efforts and interpretation of, and compliance with, the Minnesota statutes, sections  
151.461 and 151.47(f).

If you have any questions or require further clarification regarding this report, please do  
not hesitate to contact me at 847-282-1108

Sincerely,

Erik Eglite, D.P.M., J.D.  
Chief Compliance Officer  
Ovation Pharmaceuticals, Inc.

Attachment



**State of Minnesota Payments to Practitioners Reporting Form - 2007**

Wholesaler/Manufacturer Name	Ovation Pharmaceuticals, Inc.
Wholesaler/Manufacturer Address	Four Parkway North Deerfield, Illinois 60015
Minnesota License Number	
Name of Individual Completing Report	Erik Eglite, D.P.M., J.D.
Phone number	847-282-1000

**Background information and instructions:** Minnesota Statutes require wholesale drug distributors and manufacturers to file with the Board of Pharmacy an annual report identifying certain payments made to practitioners. (Practitioners are those licensed health professionals who are authorized to prescribe drugs, Pharmacists are not practitioners). The payments that must be reported include: honoraria and payments for expenses of a practitioner who serves as a speaker at a professional or educational conference or meeting; and compensation for substantial professional or consulting services of a practitioner working on a genuine research project. (See Minnesota Statutes 151.461 and 151.47). The report must identify the specific reason for payments totalling \$100 or more. In the column marked "Specific reason for payment", please list the reason for the payment. (e.g. "honoraria and expenses for speaking", "payment for research consultation", etc.). Do not list general reasons (e.g. "payments for consultation", "payments for services rendered"). Reports filed under this provision are public data. Reports must be filed in an electronic format, so please fill out this spreadsheet and return it to the Board either attached to an e-mail (Pharmacy.Board@state.mn.us) or copied onto a CD\_ROM.

LAST NAME OF PRACTITIONER	FIRST NAME OF PRACTITIONER	Professional designation (e.g. MD), if any	ADDRESS OF PRACTITIONER				PAYMENT INFORMATION	
			Street Address	City	State	Zip Code	Value of Payment	Specific reason for payment
Ong	Betty	M.D.	200 University Ave.-E	St. Paul	MN	55101	\$300.00	Honorarium
Ritter	Frank	M.D.	225 Smith Ave-North	St. Paul	MN	55102	\$4,094.80	Honorarium/ Consulting/Reimbursen
Vercellotti	Gregory	M.D.	12909 Otchipwe Ave. N	Stillwater	MN	55082	\$129.91	Lodging Reimbursement/Consultant