OHIO DEPARTMENT OF HEALTH

246 North High Street
Columbus, Ohio 43215

614/466-3543
www.odh.ohio.gov

John R. Kasich/Governor

Richard Hodges/Director of Health

December 3, 2015

Ms. Faith A. Davis
Government Contract Specialist
Abbott Nutrition
3300 Stelzer Road
RP2-2, Dept. 106711
Columbus, OH 43219

Dear Ms. Davis:

Enclosed is Ohio's WIC invoice and formula report for November 2015. This invoice includes the number of cans of formula redeemed in the month of November for food instruments with a first day of use as of August 1, 2015 – November 30, 2015. The cans of infant formula indicated on this invoice are subject to the rebate levels effective April 1, 2014.

The total amount of rebate due for formula identified as redeemed during November through the food instrument redemption system and WIC EBT is $4,745,163.36. Using the established methodology, the amount to be deducted because of partial redemptions is $189.86, leaving a total balance of **$4,744,973.50.**

Thank you for your participation in Ohio's sole-source rebate system. If you have any questions, please contact Robert Parker, Program Analysis Supervisor, at (614) 728-2877.

Sincerely,

Michele A. Frizzell, RD, MBA, Chief
Bureau of Health Services

MAF/MS/ms

Enclosures

cc: Amadou Diallo

Ohio Department of Health **Request for Invoice**	Program Tracking No. **88L00216**

Revenue Reference Number:	Customer Tax Number:	DOH Customer Reference Number:	Customer P.O. Number:
ABB6			

Customer Name and Address:	Instructions:
Abbott Nutrition c/o Faith A. Davis Government Contract Specialist 3300 Stelzer Road Columbus, OH 43219	Complete form and sign before sending to: Accounts Receivable, 4th Floor, Attn: Billing Request. Backup information to be sent out with the invoice must be in duplicate: otherwise backup will not be sent.

Item No. 1	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$4,744,973.50
Customer Contact Person:					

Description of Service: For cans of infant formula redeemed in November 2015 for August 2015 through November 2015, and minus the partial redemption amount.

Item No. 2	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$
Customer Contact Person:					
Description of Service:					

Item No. 3	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$
Customer Contact Person:					
Description of Service:					

Item No. 4	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$
Customer Contact Person:					
Description of Service:					

Name/Title of Person Making Request:	Signature:	Date:
Michele A. Frizzell, RD, MBA, Chief Bureau of Health Services	*Michele A. Frizzell*	12/3/2015

HEA 6335 (Rev. 4/03)
L:\BNS\BUREAU\Program Analysis\INREPORTS\INFANT FORM\Request for Invoice\FORM 2016.doc

FROM:
Ohio Department of Health
Bureau of Nutrition Services
246 North High Street, 6th Floor
Columbus, Ohio 43215

TO:
Abbott Nutrition
3300 Stelzer Road
RP2-2, Dept. 106711
Columbus, OH 43219

MONTH

	July CANS	August CANS	September CANS	October CANS	November CANS	TOTAL CANS	REBATE	TOTAL DOLLARS
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	0	0	291	2,326	42,298	44,915	4.1190	$185,004.89
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	0	0	0	57	1,091	1,148	2.8500	$3,271.80
1 qt RTF SIMILAC SENSITIVE	0	0	0	81	2,142	2,223	2.7850	$6,191.06
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	0	69	648	9,798	212,643	223,158	13.0650	$2,915,559.27
12.4 oz PWD SIMILAC SOY ISOMIL	0	0	94	1,399	41,580	43,073	13.5320	$582,863.84
13 oz CONC SIMILAC SOY ISOMIL	0	0	8	519	12,468	12,995	4.4080	$57,281.96
12.6 oz PWD SIMILAC SENSITIVE	0	3	140	1,808	66,005	67,956	12.9620	$880,845.67
1 qt RTF SIMILAC SOY ISOMIL	0	0	0	6	297	303	3.2950	$998.39
12.3 oz POWDER SIMILAC for SPIT-UP	0	3	5	195	8,113	8,316	13.5320	$112,532.11
32 oz RTF SIMILAC for SPIT-UP	0	0	0	12	173	185	3.3210	$614.39
TOTAL AMOUNT DUE								$4,745,163.36

November	INFANTS SERVED:
NON-BREASTFED	61,633
PARTIALLY BREASTFED	2,298
BREASTFED	6,829
TOTAL	70,760

2016 Can:A

MONTHLY REBATE TRACKING FORM

	July	August	September	October	November	TOTAL
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	$0.00	$0.00	$1,198.63	$9,580.79	$174,225.46	$185,004.89
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	$0.00	$0.00	$0.00	$162.45	$3,109.35	$3,271.80
1qt RTF SIMILAC SENSITIVE	$0.00	$0.00	$0.00	$225.59	$5,965.47	$6,191.06
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	$0.00	$901.49	$8,466.12	$128,010.87	$2,778,180.80	$2,915,559.27
12.4 oz PWD SIMILAC SOY ISOMIL	$0.00	$0.00	$1,272.01	$18,931.27	$562,660.56	$582,863.84
13 oz CONC SIMILAC SOY ISOMIL	$0.00	$0.00	$35.26	$2,287.75	$54,958.94	$57,281.96
12.6 oz PWD SIMILAC SENSITIVE	$0.00	$38.89	$1,814.68	$23,435.30	$855,556.81	$880,845.67
1 qt RTF SIMILAC SOY ISOMIL	$0.00	$0.00	$0.00	$19.77	$978.62	$998.39
12.3 oz POWDER SIMILAC for SPIT-UP	$0.00	$40.60	$67.66	$2,638.74	$109,785.12	$112,532.11
32 oz RTF SIMILAC FOR SPIT-UP	$0.00	$0.00	$0.00	$39.85	$574.53	$614.39
TOTAL	$0.00	$980.97	$12,854.36	$185,332.38	$4,545,995.66	$4,745,163.36

Ohio Department of Health - Bureau of Nutrition Services

ODHWIC0401 - WIC Formula Rebate Invoice Report (Prompted)

FROM:

Ohio Department of Health
246 North High Street, 6th Floor
Columbus, Ohio 43215

TO:

Ross Laboratories
625 Cleveland Avenue
Columbus, Ohio 43215

Coupon Formula Rebates

NOV 2015

Food Item Description	Begin Month Year Name	Can Count	Rebate Amount	Rebate Total
279 - 13oz Conc Sim Adv	SEP 2015	279	$4.1190	$1,149.20
	OCT 2015	975	$4.1190	$4,016.03
333 - 12.4oz Pwdr Sim Adv	AUG 2015	66	$13.0650	$862.29
	SEP 2015	628	$13.0650	$8,204.82
	OCT 2015	3,385	$13.0650	$44,225.02
	NOV 2015	134	$13.0650	$1,750.71
334 - 12.4oz Pwdr Sim Soy Isomil	SEP 2015	93	$13.5320	$1,258.48
	OCT 2015	526	$13.5320	$7,117.83
	NOV 2015	7	$13.5320	$94.72
335 - 13oz Conc Sim Soy Isomil	SEP 2015	8	$4.4080	$35.26
	OCT 2015	180	$4.4080	$793.44
337 - 12.6/12oz Pwdr Similac Sensitive	AUG 2015	3	$12.9620	$38.89
	SEP 2015	41	$12.9620	$531.44
337 - 12oz Pwdr Similac Sensitive	SEP 2015	92	$12.9620	$1,192.50
	OCT 2015	561	$12.9620	$7,271.68
	NOV 2015	28	$12.9620	$362.94
360 - 12.3/12oz Powder Similac for Spit-Up	SEP 2015	3	$13.5320	$40.60
360 - 12oz Powder Similac for Spit-Up	AUG 2015	3	$13.5320	$40.60
	SEP 2015	2	$13.5320	$27.06
	OCT 2015	49	$13.5320	$663.07
Summary				$79,676.58

Ohio Department of Health - Bureau of Nutrition Services

ODHWIC0401 - WIC Formula Rebate Invoice Report (Prompted)

FROM:

Ohio Department of Health
246 North High Street, 6th Floor
Columbus, Ohio 43215

TO:

Ross Laboratories
625 Cleveland Avenue
Columbus, Ohio 43215

EBT Formula Rebates

NOV 2015

Benefit Claim Current Description	Redemption Month	Quantity	Rebate Amount	Final Rebate
21/031 - SIMSOYISOMILPWD 12.4OZ	SEP 2015	1	13.532	$13.53
	OCT 2015	873	13.532	$11,813.44
	NOV 2015	41,573	13.532	$562,565.84
21/032 - SIMSOYISOMIL 13OZ CONC	OCT 2015	339	4.408	$1,494.31
	NOV 2015	12,468	4.408	$54,958.94
21/034 - SIMSENSITIVE 12.0OZ PWD	SEP 2015	7	12.962	$90.73
	OCT 2015	1,247	12.962	$16,163.61
	NOV 2015	65,977	12.962	$855,193.87
21/036 - SIMSENSITIVE 1 QT RTF	OCT 2015	81	2.785	$225.59
	NOV 2015	2,142	2.785	$5,965.47
21/071 - SIM SPIT-UP 1 QT RTF	OCT 2015	12	3.321	$39.85
	NOV 2015	173	3.321	$574.53
21/082 - SIM ADVANCE 12.4OZ PWD	AUG 2015	3	13.065	$39.20
	SEP 2015	20	13.065	$261.30
	OCT 2015	6,413	13.065	$83,785.85
	NOV 2015	212,509	13.065	$2,776,430.09
21/083 - SIMADVANCE 13OZ CONC	SEP 2015	12	4.119	$49.43
	OCT 2015	1,351	4.119	$5,564.77
	NOV 2015	42,298	4.119	$174,225.46
21/085 - SIM SPIT-UP PWD 12.0OZ	OCT 2015	146	13.532	$1,975.67
	NOV 2015	8,113	13.532	$109,785.12
21/501 - SIM SOY ISOMIL 1 QT RTF	OCT 2015	6	3.295	$19.77
	NOV 2015	297	3.295	$978.62
21/502 - SIM ADVANCE 1 QT RTF	OCT 2015	57	2.85	$162.45
	NOV 2015	1,091	2.85	$3,109.35
Summary				$4,665,486.78

Ohio Department of Health - Bureau of Nutrition Services

ODHWIC0402 - WIC Formula Rebate Partial List Report (Prompted)

NOV 2015

Food Item Description	Begin Month Year Name	Partial Count	Rebate Amount	Partial Total
279 - 13oz Conc Sim Adv	SEP 2015	0	$4.1190	$0.00
	OCT 2015	11	$4.1190	$45.31
333 - 12.4oz Pwdr Sim Adv	AUG 2015	2	$13.0650	$26.13
	SEP 2015	0	$13.0650	$0.00
	OCT 2015	6	$13.0650	$78.39
	NOV 2015	0	$13.0650	$0.00
334 - 12.4oz Pwdr Sim Soy Isomil	SEP 2015	1	$13.5320	$13.53
	OCT 2015	1	$13.5320	$13.53
	NOV 2015	0	$13.5320	$0.00
335 - 13oz Conc Sim Soy Isomil	SEP 2015	0	$4.4080	$0.00
	OCT 2015	0	$4.4080	$0.00
337 - 12.6/12oz Pwdr Similac Sensitive	AUG 2015	0	$12.9620	$0.00
	SEP 2015	0	$12.9620	$0.00
337 - 12oz Pwdr Similac Sensitive	SEP 2015	0	$12.9620	$0.00
	OCT 2015	1	$12.9620	$12.96
	NOV 2015	0	$12.9620	$0.00
360 - 12.3/12oz Powder Similac for Spit-Up	SEP 2015	0	$13.5320	$0.00
360 - 12oz Powder Similac for Spit-Up	AUG 2015	0	$13.5320	$0.00
	SEP 2015	0	$13.5320	$0.00
	OCT 2015	0	$13.5320	$0.00
Summary				$189.86

Ohio Department of Health - Bureau of Nutrition Services
ODHWIC0403 - WICP50A5 Rebated Formula Item Counts Report

Coupon Rebated Formula Counts

279 - 13oz Conc Sim Adv

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	15,637	8,033	113		23,783
SEP 2015		7,672	4,631	279	12,582
OCT 2015			2,466	975	3,441
Total(Begin Month Year Name)	15,637	15,705	7,210	1,254	39,806

309 - 1 QT RTF Sim Adv

Can Count	AUG 2015	SEP 2015	OCT 2015	Total(Process Month Year Name)
AUG 2015	207	90		297
SEP 2015		106	21	127
OCT 2015			48	48
Total(Begin Month Year Name)	207	196	69	472

312 - 1 QT RTF Similac Sensitive

Can Count	AUG 2015	SEP 2015	OCT 2015	Total(Process Month Year Name)
AUG 2015	869	133		1,002
SEP 2015		438	100	538
OCT 2015			86	86
Total(Begin Month Year Name)	869	571	186	1,626

333 - 12.4oz Pwdr Sim Adv

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	53,102	29,813	939	66	83,920
SEP 2015		23,033	14,985	628	38,646
OCT 2015			5,592	3,385	8,977
NOV 2015				134	134
Total(Begin Month Year Name)	53,102	52,846	21,516	4,213	131,677

334 - 12.4oz Pwdr Sim Soy Isomil

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	10,719	4,825	112		15,656
SEP 2015		4,366	2,714	93	7,173
OCT 2015			936	526	1,462
NOV 2015				7	7
Total(Begin Month Year Name)	10,719	9,191	3,762	626	24,298

335 - 13oz Conc Sim Soy Isomil

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	3,984	1,797	50		5,831
SEP 2015		1,873	963	8	2,844
OCT 2015			557	180	737
Total(Begin Month Year Name)	3,984	3,670	1,570	188	9,412

337 - 12.6/12oz Pwdr Similac Sensitive

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	9,931	4,090	77	3	14,101
SEP 2015		2,789	1,453	41	4,283
OCT 2015			7		7
Total(Begin Month Year Name)	9,931	6,879	1,537	44	18,391

337 - 12oz Pwdr Similac Sensitive

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	6,497	2,222	21		8,740
SEP 2015		4,537	1,476	92	6,105
OCT 2015			1,511	561	2,072
NOV 2015				28	28
Total(Begin Month Year Name)	6,497	6,759	3,008	681	16,945

339 - 1 QT RTF Sim Soy Isomil

Can Count	AUG 2015	SEP 2015	Total(Process Month Year Name)
AUG 2015	132	7	139
SEP 2015		46	46
Total(Begin Month Year Name)	132	53	185

360 - 12.3/12oz Powder Similac for Spit-Up

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	1,097	448	12		1,557
SEP 2015		412	111	3	526
Total(Begin Month Year Name)	1,097	860	123	3	2,083

360 - 12oz Powder Similac for Spit-Up

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	749	236		3	988
SEP 2015		493	116	2	611
OCT 2015			230	49	279
Total(Begin Month Year Name)	749	729	346	54	1,878

361 - 32oz RTF Similac for Spit-Up

Can Count	AUG 2015	SEP 2015	OCT 2015	Total(Process Month Year Name)
AUG 2015	37	10		47
SEP 2015		29	9	38
Total(Begin Month Year Name)	37	39	9	85

Ohio Department of Health - Bureau of Nutrition Services

ODHWIC0403 - WICP50A5 Rebated Formula Item Counts Report

EBT Rebated Formula Counts

21/031 - SIMSOYISOMILPWD 12.4OZ

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	26,475	982	2		27,459
SEP 2015		34,456	834	1	35,291
OCT 2015			40,546	873	41,419
NOV 2015				41,573	41,573
Total(Benefit Month)	26,475	35,438	41,382	42,447	145,742

21/032 - SIMSOYISOMIL 13OZ CONC

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	7,788	532			8,320
SEP 2015		10,360	364		10,724
OCT 2015			12,398	339	12,737
NOV 2015				12,468	12,468
Total(Benefit Month)	7,788	10,892	12,762	12,807	44,249

21/034 - SIMSENSITIVE 12.0OZ PWD

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	40,330	1,195	5		41,530
SEP 2015		53,330	1,191	7	54,528
OCT 2015			63,169	1,247	64,416
NOV 2015				65,977	65,977
Total(Benefit Month)	40,330	54,525	64,365	67,231	226,451

21/036 - SIMSENSITIVE 1 QT RTF

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	1,031	61			1,092
SEP 2015		1,563	71		1,634
OCT 2015			1,908	81	1,989
NOV 2015				2,142	2,142
Total(Benefit Month)	1,031	1,624	1,979	2,223	6,857

21/071 - SIM SPIT-UP 1 QT RTF

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	147	16			163
SEP 2015		180	4		184
OCT 2015			203	12	215
NOV 2015				173	173
Total(Benefit Month)	147	196	207	185	735

21/082 - SIM ADVANCE 12.4OZ PWD

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	135,820	5,798	14	3	**141,635**
SEP 2015		176,291	5,665	20	**181,976**
OCT 2015			206,216	6,413	**212,629**
NOV 2015				212,509	**212,509**
Total(Benefit Month)	**135,820**	**182,089**	**211,895**	**218,945**	**748,749**

21/083 - SIMADVANCE 13OZ CONC

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	23,993	1,372	30		**25,395**
SEP 2015		32,086	1,170	12	**33,268**
OCT 2015			40,086	1,351	**41,437**
NOV 2015				42,298	**42,298**
Total(Benefit Month)	**23,993**	**33,458**	**41,286**	**43,661**	**142,398**

21/085 - SIM SPIT-UP PWD 12.0OZ

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	4,668	149			**4,817**
SEP 2015		6,422	179		**6,601**
OCT 2015			7,537	146	**7,683**
NOV 2015				8,113	**8,113**
Total(Benefit Month)	**4,668**	**6,571**	**7,716**	**8,259**	**27,214**

21/501 - SIM SOY ISOMIL 1 QT RTF

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	286	1			**287**
SEP 2015		339	15		**354**
OCT 2015			342	6	**348**
NOV 2015				297	**297**
Total(Benefit Month)	**286**	**340**	**357**	**303**	**1,286**

21/502 - SIM ADVANCE 1 QT RTF

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	770	40			**810**
SEP 2015		945	74		**1,019**
OCT 2015			1,036	57	**1,093**
NOV 2015				1,091	**1,091**
Total(Benefit Month)	**770**	**985**	**1,110**	**1,148**	**4,013**

OHIO DEPARTMENT OF HEALTH

246 North High Street
Columbus, Ohio 43215

614/466-3543
www.odh.ohio.gov

John R. Kasich/Governor

Richard Hodges/Director of Health

January 4, 2016

Ms. Faith A. Davis
Government Contract Specialist
Abbott Nutrition
3300 Stelzer Road
RP2-2, Dept. 106711
Columbus, OH 43219

Dear Ms. Davis:

Enclosed is Ohio's WIC invoice and formula report for December 2015. This invoice includes the number of cans of formula redeemed in the month of December for food instruments with a first day of use as of August 1, 2015 – December 31, 2015. The cans of infant formula indicated on this invoice are subject to the rebate levels effective April 1, 2014.

The total amount of rebate due for formula identified as redeemed during December through the food instrument redemption system and WIC EBT is **$4,696,946.95.** There were no partial redemptions in the month of December.

Thank you for your participation in Ohio's sole-source rebate system. If you have any questions, please contact Robert Parker, Program Analysis Supervisor, at (614) 728-2877.

Sincerely,

Michele A. Frizzell, RD, MBA, Chief
Bureau of Health Services

MAF/MS/ms

Enclosures

cc: Amadou Diallo

Ohio Department of Health

Request for Invoice

Program Tracking No.

88L00316

Revenue Reference Number:	Customer Tax Number:	DOH Customer Reference Number:	Customer P.O. Number:
ABB6			

Customer Name and Address:

Abbott Nutrition
c/o Faith A. Davis
Government Contract Specialist
3300 Stelzer Road
Columbus, OH 43219

Instructions:

Complete form and sign before sending to: Accounts Receivable, 4th Floor, Attn: Billing Request. Backup information to be sent out with the invoice must be in duplicate: otherwise backup will not be sent.

Item No. 1	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$4,696,946.95

Customer Contact Person:

Description of Service: For cans of infant formula redeemed in December 2015 for August 2015 through December 2015.

Item No. 2	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$

Customer Contact Person:

Description of Service:

Item No. 3	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$

Customer Contact Person:

Description of Service:

Item No. 4	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$

Customer Contact Person:

Description of Service:

Name/Title of Person Making Request:	Signature:	Date:
Michele A. Frizzell, RD, MBA, Chief Bureau of Health Services	*Michele A. Frizzell*	1/4/2016

FROM:
Ohio Department of Health
Bureau of Nutrition Services
246 North High Street, 6th Floor
Columbus, Ohio 43215

TO:
Abbott Nutrition
3300 Stelzer Road
RP2-2, Dept. 106711
Columbus, OH 43219

MONTH

	August CANS	September CANS	October CANS	November CANS	December CANS	TOTAL CANS	REBATE	TOTAL DOLLARS
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	0	0	33	1,205	42,081	43,319	4.1190	$178,430.96
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	0	0	0	43	961	1,004	2.8500	$2,861.40
1 qt RTF SIMILAC SENSITIVE	0	0	0	78	2,392	2,470	2.7850	$6,878.95
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	64	0	164	6,062	214,284	220,574	13.0650	$2,881,799.31
12.4 oz PWD SIMILAC SOY ISOMIL	0	0	20	848	41,887	42,755	13.5320	$578,560.66
13 oz CONC SIMILAC SOY ISOMIL	0	0	12	343	12,309	12,664	4.4080	$55,822.91
12.6 oz PWD SIMILAC SENSITIVE	0	0	29	1,094	66,731	67,854	12.9620	$879,523.55
1 qt RTF SIMILAC SOY ISOMIL	0	0	0	29	255	284	3.2950	$935.78
12.3 oz POWDER SIMILAC for SPIT-UP	0	0	0	115	8,120	8,235	13.5320	$111,436.02
32 oz RTF SIMILAC for SPIT-UP	0	0	0	5	205	210	3.3210	$697.41
TOTAL AMOUNT DUE								$4,696,946.95

December	INFANTS SERVED:
NON-BREASTFED	61,442
PARTIALLY BREASTFED	2,300
BREASTFED	6,739
TOTAL	70,481

2016 Can:A

MONTHLY REBATE TRACKING FORM

	August	September	October	November	December	TOTAL
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	$0.00	$0.00	$135.93	$4,963.40	$173,331.64	$178,430.96
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	$0.00	$0.00	$0.00	$122.55	$2,738.85	$2,861.40
1qt RTF SIMILAC SENSITIVE	$0.00	$0.00	$0.00	$217.23	$6,661.72	$6,878.95
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	$836.16	$0.00	$2,142.66	$79,200.03	$2,799,620.46	$2,881,799.31
12.4 oz PWD SIMILAC SOY ISOMIL	$0.00	$0.00	$270.64	$11,475.14	$566,814.88	$578,560.66
13 oz CONC SIMILAC SOY ISOMIL	$0.00	$0.00	$52.90	$1,511.94	$54,258.07	$55,822.91
12.6 oz PWD SIMILAC SENSITIVE	$0.00	$0.00	$375.90	$14,180.43	$864,967.22	$879,523.55
1 qt RTF SIMILAC SOY ISOMIL	$0.00	$0.00	$0.00	$95.56	$840.23	$935.78
12.3 oz POWDER SIMILAC for SPIT-UP	$0.00	$0.00	$0.00	$1,556.18	$109,879.84	$111,436.02
32 oz RTF SIMILAC FOR SPIT-UP	$0.00	$0.00	$0.00	$16.61	$680.81	$697.41
TOTAL	$836.16	$0.00	$2,978.02	$113,339.05	$4,579,793.72	$4,696,946.95

Ohio Department of Health - Bureau of Nutrition Services

ODHWIC0401 - WIC Formula Rebate Invoice Report (Prompted)

FROM:

Ohio Department of Health
246 North High Street, 6th Fl
Columbus, Ohio 43215

TO:

Ross Laboratories
625 Cleveland Avenue
Columbus, Ohio 43215

Coupon Formula Rebates

DEC 2015

Food Item Description	Begin Month Year Name	Can Count	Rebate Amount	Rebate Total
279 - 13oz Conc Sim Adv	OCT 2015	33	$4.1190	$135.93
333 - 12.4oz Pwdr Sim Adv	AUG 2015	64	$13.0650	$836.16
	OCT 2015	153	$13.0650	$1,998.95
	NOV 2015	55	$13.0650	$718.58
334 - 12.4oz Pwdr Sim Soy Isomil	OCT 2015	20	$13.5320	$270.64
335 - 13oz Conc Sim Soy Isomil	OCT 2015	12	$4.4080	$52.90
337 - 12oz Pwdr Similac Sensitive	OCT 2015	29	$12.9620	$375.90
Summary				$4,339.04

Ohio Department of Health - Bureau of Nutrition Services

ODHWIC0401 - WIC Formula Rebate Invoice Report (Prompted)

FROM:

Ohio Department of Health
246 North High Street, 6th Floor
Columbus, Ohio 43215

TO:

Ross Laboratories
625 Cleveland Avenue
Columbus, Ohio 43215

EBT Formula Rebates

DEC 2015

Benefit Claim Current Description	Redemption Month	Quantity	Rebate Amount	Final Rebate
21/031 - SIMSOYISOMILPWD 12.4OZ	NOV 2015	848	13.532	$11,475.14
	DEC 2015	41,887	13.532	$566,814.88
21/032 - SIMSOYISOMIL 13OZ CONC	NOV 2015	343	4.408	$1,511.94
	DEC 2015	12,309	4.408	$54,258.07
21/034 - SIMSENSITIVE 12.0OZ PWD	NOV 2015	1,094	12.962	$14,180.43
	DEC 2015	66,731	12.962	$864,967.22
21/036 - SIMSENSITIVE 1 QT RTF	NOV 2015	78	2.785	$217.23
	DEC 2015	2,392	2.785	$6,661.72
21/071 - SIM SPIT-UP 1 QT RTF	NOV 2015	5	3.321	$16.61
	DEC 2015	205	3.321	$680.81
21/082 - SIM ADVANCE 12.4OZ PWD	OCT 2015	11	13.065	$143.72
	NOV 2015	6,007	13.065	$78,481.46
	DEC 2015	214,284	13.065	$2,799,620.46
21/083 - SIMADVANCE 13OZ CONC	NOV 2015	1,205	4.119	$4,963.40
	DEC 2015	42,081	4.119	$173,331.64
21/085 - SIM SPIT-UP PWD 12.0OZ	NOV 2015	115	13.532	$1,556.18
	DEC 2015	8,120	13.532	$109,879.84
21/501 - SIM SOY ISOMIL 1 QT RTF	NOV 2015	29	3.295	$95.56
	DEC 2015	255	3.295	$840.23
21/502 - SIM ADVANCE 1 QT RTF	NOV 2015	43	2.85	$122.55
	DEC 2015	961	2.85	$2,738.85
Summary				$4,692,557.91

Ohio Department of Health - Bureau of Nutrition Services

ODHWIC0402 - WIC Formula Rebate Partial List Report (Prompted)

DEC 2015

Food Item Description	Begin Month Year Name	Partial Count	Rebate Amount	Partial Total
279 - 13oz Conc Sim Adv	OCT 2015	0	$4.1190	$0.00
333 - 12.4oz Pwdr Sim Adv	AUG 2015	0	$13.0650	$0.00
	OCT 2015	0	$13.0650	$0.00
	NOV 2015	0	$13.0650	$0.00
334 - 12.4oz Pwdr Sim Soy Isomil	OCT 2015	0	$13.5320	$0.00
335 - 13oz Conc Sim Soy Isomil	OCT 2015	0	$4.4080	$0.00
337 - 12oz Pwdr Similac Sensitive	OCT 2015	0	$12.9620	$0.00
Summary				$0.00

Ohio Department of Health - Bureau of Nutrition Services
ODHWIC0403 - WICP50A5 Rebated Formula Item Counts Report
Coupon Rebated Formula Counts

279 - 13oz Conc Sim Adv

Can Count	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month Year Name)
SEP 2015	7,672	4,631	279		12,582
OCT 2015		2,466	975	33	3,474
Total(Begin Month Year Name)	7,672	7,097	1,254	33	16,056

309 - 1 QT RTF Sim Adv

Can Count	SEP 2015	OCT 2015	Total(Process Month Year Name)
SEP 2015	106	21	127
OCT 2015		48	48
Total(Begin Month Year Name)	106	69	175

312 - 1 QT RTF Similac Sensitive

Can Count	SEP 2015	OCT 2015	Total(Process Month Year Name)
SEP 2015	438	100	538
OCT 2015		86	86
Total(Begin Month Year Name)	438	186	624

333 - 12.4oz Pwdr Sim Adv

Can Count	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month Year Name)
SEP 2015	23,033	14,985	628		38,646
OCT 2015		5,592	3,385	153	9,130
NOV 2015			134	55	189
Total(Begin Month Year Name)	23,033	20,577	4,147	208	47,965

334 - 12.4oz Pwdr Sim Soy Isomil

Can Count	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month Year Name)
SEP 2015	4,366	2,714	93		7,173
OCT 2015		936	526	20	1,482
NOV 2015			7		7
Total(Begin Month Year Name)	4,366	3,650	626	20	8,662

335 - 13oz Conc Sim Soy Isomil

Can Count	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month Year Name)
SEP 2015	1,873	963	8		2,844
OCT 2015		557	180	12	749
Total(Begin Month Year Name)	1,873	1,520	188	12	3,593

337 - 12.6/12oz Pwdr Similac Sensitive

Can Count	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
SEP 2015	2,789	1,453	41	4,283
OCT 2015		7		7
Total(Begin Month Year Name)	2,789	1,460	41	4,290

337 - 12oz Pwdr Similac Sensitive

Can Count	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month Year Name)
SEP 2015	4,537	1,476	92		6,105
OCT 2015		1,511	561	29	2,101
NOV 2015			28		28
Total(Begin Month Year Name)	4,537	2,987	681	29	8,234

339 - 1 QT RTF Sim Soy Isomil

Can Count	SEP 2015	Total(Process Month Year Name)
SEP 2015	46	46
Total(Begin Month Year Name)	46	46

360 - 12.3/12oz Powder Similac for Spit-Up

Can Count	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
SEP 2015	412	111	3	526
Total(Begin Month Year Name)	412	111	3	526

360 - 12oz Powder Similac for Spit-Up

Can Count	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
SEP 2015	493	116	2	611
OCT 2015		230	49	279
Total(Begin Month Year Name)	493	346	51	890

361 - 32oz RTF Similac for Spit-Up

Can Count	SEP 2015	OCT 2015	Total(Process Month Year Name)
SEP 2015	29	9	38
Total(Begin Month Year Name)	29	9	38

Ohio Department of Health - Bureau of Nutrition Services

ODHWIC0403 - WICP50A5 Rebated Formula Item Counts Report

EBT Rebated Formula Counts

21/031 - SIMSOYISOMILPWD 12.4OZ

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	34,456	834	1		35,291
OCT 2015		40,546	873		41,419
NOV 2015			41,573	848	42,421
DEC 2015				41,887	41,887
Total(Benefit Month)	34,456	41,380	42,447	42,735	161,018

21/032 - SIMSOYISOMIL 13OZ CONC

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	10,360	364			10,724
OCT 2015		12,398	339		12,737
NOV 2015			12,468	343	12,811
DEC 2015				12,309	12,309
Total(Benefit Month)	10,360	12,762	12,807	12,652	48,581

21/034 - SIMSENSITIVE 12.0OZ PWD

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	53,330	1,191	7		54,528
OCT 2015		63,169	1,247		64,416
NOV 2015			65,977	1,094	67,071
DEC 2015				66,731	66,731
Total(Benefit Month)	53,330	64,360	67,231	67,825	252,746

21/036 - SIMSENSITIVE 1 QT RTF

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	1,563	71			1,634
OCT 2015		1,908	81		1,989
NOV 2015			2,142	78	2,220
DEC 2015				2,392	2,392
Total(Benefit Month)	1,563	1,979	2,223	2,470	8,235

21/071 - SIM SPIT-UP 1 QT RTF

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	180	4			184
OCT 2015		203	12		215
NOV 2015			173	5	178
DEC 2015				205	205
Total(Benefit Month)	180	207	185	210	782

21/082 - SIM ADVANCE 12.4OZ PWD

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	176,291	5,665	20		181,976
OCT 2015		206,216	6,413	11	212,640
NOV 2015			212,509	6,007	218,516
DEC 2015				214,284	214,284
Total(Benefit Month)	176,291	211,881	218,942	220,302	827,416

21/083 - SIMADVANCE 13OZ CONC

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	32,086	1,170	12		33,268
OCT 2015		40,086	1,351		41,437
NOV 2015			42,298	1,205	43,503
DEC 2015				42,081	42,081
Total(Benefit Month)	32,086	41,256	43,661	43,286	160,289

21/085 - SIM SPIT-UP PWD 12.0OZ

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	6,422	179			6,601
OCT 2015		7,537	146		7,683
NOV 2015			8,113	115	8,228
DEC 2015				8,120	8,120
Total(Benefit Month)	6,422	7,716	8,259	8,235	30,632

21/501 - SIM SOY ISOMIL 1 QT RTF

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	339	15			354
OCT 2015		342	6		348
NOV 2015			297	29	326
DEC 2015				255	255
Total(Benefit Month)	339	357	303	284	1,283

21/502 - SIM ADVANCE 1 QT RTF

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	945	74			1,019
OCT 2015		1,036	57		1,093
NOV 2015			1,091	43	1,134
DEC 2015				961	961
Total(Benefit Month)	945	1,110	1,148	1,004	4,207

OHIO DEPARTMENT OF HEALTH

246 North High Street
Columbus, Ohio 43215

614/466-3543
www.odh.ohio.gov

John R. Kasich/Governor

Richard Hodges/Director of Health

February 4, 2016

Ms. Faith A. Davis
Government Contract Specialist
Abbott Nutrition
3300 Stelzer Road
RP2-2, Dept. 106711
Columbus, OH 43219

Dear Ms. Davis:

Enclosed is Ohio's WIC invoice and formula report for January 2016. This invoice includes the number of cans of formula redeemed in the month of January for food instruments with a first day of use as of April 1, 2015 – January 31, 2016. The cans of infant formula indicated on this invoice are subject to the rebate levels effective April 1, 2014.

The total amount of rebate due for formula identified as redeemed during January through WIC EBT is **$4,480,805.05.**

Thank you for your participation in Ohio's sole-source rebate system. If you have any questions, please contact Robert Parker, Program Analysis Supervisor, at (614) 728-2877.

Sincerely,

Michele A. Frizzell, RD, MBA, Chief
Bureau of Health Services

MAF/MS/ms

Enclosures

cc: Amadou Diallo

Ohio Department of Health

Request for Invoice

Program Tracking No.

88L00416

Revenue Reference Number:	Customer Tax Number:	DOH Customer Reference Number:	Customer P.O. Number:
ABB6			

Customer Name and Address:

Abbott Nutrition
c/o Faith A. Davis
Government Contract Specialist
3300 Stelzer Road
Columbus, OH 43219

Instructions:

Complete form and sign before sending to: Accounts Receivable, 4th Floor, Attn: Billing Request. Backup information to be sent out with the invoice must be in duplicate: otherwise backup will not be sent.

Item No. 1	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$4,480,805.05

Customer Contact Person:

Description of Service: For cans of infant formula redeemed in January 2016 for April 2015 through January 2016.

Item No. 2	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$

Customer Contact Person:

Description of Service:

Item No. 3	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$

Customer Contact Person:

Description of Service:

Item No. 4	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				$	$

Customer Contact Person:

Description of Service:

Name/Title of Person Making Request:	Signature:	Date:
Michele A. Frizzell, RD, MBA, Chief Bureau of Health Services	*Michele A. Frizzell*	2/4/2016

FROM:
Ohio Department of Health
Bureau of Nutrition Services
246 North High Street, 6th Floor
Columbus, Ohio 43215

TO:
Abbott Nutrition
3300 Stelzer Road
RP2-2, Dept. 106711
Columbus, OH 43219

MONTH

	Apr-Aug CANS	September CANS	October CANS	November CANS	December CANS	January CANS	TOTAL CANS	REBATE	TOTAL DOLLARS
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	0	34	0	0	956	39,651	40,641	4.1190	$167,400.28
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	0	0	0	0	6	870	876	2.8500	$2,496.60
1 qt RTF SIMILAC SENSITIVE	0	0	0	0	22	2,303	2,325	2.7850	$6,475.13
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	78	87	4	7	4,552	205,057	209,785	13.0650	$2,740,841.03
12.4 oz PWD SIMILAC SOY ISOMIL	8	9	4	3	718	39,859	40,601	13.5320	$549,412.73
13 oz CONC SIMILAC SOY ISOMIL	4	8	0	0	280	12,077	12,369	4.4080	$54,522.55
12.6 oz PWD SIMILAC SENSITIVE	44	0	0	1	1,050	64,517	65,612	12.9620	$850,462.74
1 qt RTF SIMILAC SOY ISOMIL	0	0	0	0	1	337	338	3.2950	$1,113.71
12.3 oz POWDER SIMILAC for SPIT-UP	8	0	0	0	84	7,869	7,961	13.5320	$107,728.25
32 oz RTF SIMILAC for SPIT-UP	0	0	0	0	3	103	106	3.3210	$352.03
TOTAL AMOUNT DUE									$4,480,805.05

January	INFANTS SERVED:
NON-BREASTFED	59,859
PARTIALLY BREASTFED	2,133
BREASTFED	6,702
TOTAL	68,694

MONTHLY REBATE TRACKING FORM

	Apr-Aug	September	October	November	December	January	TOTAL
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	$0.00	$140.05	$0.00	$0.00	$3,937.76	$163,322.47	$163,462.52
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	$0.00	$0.00	$0.00	$0.00	$17.10	$2,479.50	$2,479.50
1qt RTF SIMILAC SENSITIVE	$0.00	$0.00	$0.00	$0.00	$61.27	$6,413.86	$6,413.86
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	$1,019.07	$1,136.66	$52.26	$91.46	$59,471.88	$2,679,069.71	$2,681,369.15
12.4 oz PWD SIMILAC SOY ISOMIL	$108.26	$121.79	$54.13	$40.60	$9,715.98	$539,371.99	$539,696.76
13 oz CONC SIMILAC SOY ISOMIL	$17.63	$35.26	$0.00	$0.00	$1,234.24	$53,235.42	$53,288.31
12.6 oz PWD SIMILAC SENSITIVE	$570.33	$0.00	$0.00	$12.96	$13,610.10	$836,269.35	$836,852.64
1 qt RTF SIMILAC SOY ISOMIL	$0.00	$0.00	$0.00	$0.00	$3.30	$1,110.42	$1,110.42
12.3 oz POWDER SIMILAC for SPIT-UP	$108.26	$0.00	$0.00	$0.00	$1,136.69	$106,483.31	$106,591.56
32 oz RTF SIMILAC FOR SPIT-UP	$0.00	$0.00	$0.00	$0.00	$9.96	$342.06	$342.06
TOTAL	$1,823.54	$1,433.75	$106.39	$145.01	$89,198.28	$4,388,098.07	$4,391,606.77

Ohio Department of Health - Bureau of Nutrition Services

ODHWIC0401 - WIC Formula Rebate Invoice Report (Prompted)

FROM:

Ohio Department of Health
246 North High Street, 6th Fl
Columbus, Ohio 43215

TO:

Ross Laboratories
625 Cleveland Avenue
Columbus, Ohio 43215

EBT Formula Rebates

JAN 2016

Benefit Claim Current Description	Redemption Month	Quantity	Rebate Amount	Final Rebate
21/031 - SIMSOYISOMILPWD 12.4OZ	APR 2015	1	13.532	$13.53
	JUN 2015	7	13.532	$94.72
	SEP 2015	9	13.532	$121.79
	OCT 2015	4	13.532	$54.13
	NOV 2015	3	13.532	$40.60
	DEC 2015	718	13.532	$9,715.98
	JAN 2016	39,859	13.532	$539,371.99
21/032 - SIMSOYISOMIL 13OZ CONC	MAY 2015	4	4.408	$17.63
	SEP 2015	8	4.408	$35.26
	DEC 2015	280	4.408	$1,234.24
	JAN 2016	12,077	4.408	$53,235.42
21/034 - SIMSENSITIVE 12.0OZ PWD	MAY 2015	9	12.962	$116.66
	JUN 2015	14	12.962	$181.47
	JUL 2015	5	12.962	$64.81
	AUG 2015	16	12.962	$207.39
	NOV 2015	1	12.962	$12.96
	DEC 2015	1,050	12.962	$13,610.10
	JAN 2016	64,517	12.962	$836,269.35
21/036 - SIMSENSITIVE 1 QT RTF	DEC 2015	22	2.785	$61.27
	JAN 2016	2,303	2.785	$6,413.86
21/071 - SIM SPIT-UP 1 QT RTF	DEC 2015	3	3.321	$9.96
	JAN 2016	103	3.321	$342.06
21/082 - SIM ADVANCE 12.4OZ PWD	MAY 2015	6	13.065	$78.39
	JUN 2015	30	13.065	$391.95
	JUL 2015	28	13.065	$365.82
	AUG 2015	14	13.065	$182.91
	SEP 2015	87	13.065	$1,136.66

	OCT 2015	4	13.065	$52.26
	NOV 2015	7	13.065	$91.46
	DEC 2015	4,552	13.065	$59,471.88
	JAN 2016	205,057	13.065	$2,679,069.71
21/083 - SIMADVANCE 13OZ CONC	SEP 2015	34	4.119	$140.05
	DEC 2015	956	4.119	$3,937.76
	JAN 2016	39,651	4.119	$163,322.47
21/085 - SIM SPIT-UP PWD 12.0OZ	APR 2015	8	13.532	$108.26
	DEC 2015	84	13.532	$1,136.69
	JAN 2016	7,869	13.532	$106,483.31
21/501 - SIM SOY ISOMIL 1 QT RTF	DEC 2015	1	3.295	$3.30
	JAN 2016	337	3.295	$1,110.42
21/502 - SIM ADVANCE 1 QT RTF	DEC 2015	6	2.85	$17.10
	JAN 2016	870	2.85	$2,479.50
Summary				$4,180,805.05

Ohio Department of Health - Bureau of Nutrition Services
ODHWIC0403 - WICP50A5 Rebated Formula Item Counts Report
EBT Rebated Formula Counts

21/031 - SIMSOYISOMILPWD 12.4OZ

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	40,546	873		4	41,423
NOV 2015		41,573	848	3	42,424
DEC 2015			41,887	718	42,605
JAN 2016				39,859	39,859
Total(Benefit Month)	40,546	42,446	42,735	40,584	166,311

21/032 - SIMSOYISOMIL 13OZ CONC

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	12,398	339			12,737
NOV 2015		12,468	343		12,811
DEC 2015			12,309	280	12,589
JAN 2016				12,077	12,077
Total(Benefit Month)	12,398	12,807	12,652	12,357	50,214

21/034 - SIMSENSITIVE 12.0OZ PWD

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	63,169	1,247			64,416
NOV 2015		65,977	1,094	1	67,072
DEC 2015			66,731	1,050	67,781
JAN 2016				64,517	64,517
Total(Benefit Month)	63,169	67,224	67,825	65,568	263,786

21/036 - SIMSENSITIVE 1 QT RTF

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	1,908	81			1,989
NOV 2015		2,142	78		2,220
DEC 2015			2,392	22	2,414
JAN 2016				2,303	2,303
Total(Benefit Month)	1,908	2,223	2,470	2,325	8,926

21/071 - SIM SPIT-UP 1 QT RTF

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	203	12			215
NOV 2015		173	5		178
DEC 2015			205	3	208
JAN 2016				103	103
Total(Benefit Month)	203	185	210	106	704

21/082 - SIM ADVANCE 12.4OZ PWD

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	206,216	6,413	11	4	**212,644**
NOV 2015		212,509	6,007	7	**218,523**
DEC 2015			214,284	4,552	**218,836**
JAN 2016				205,057	**205,057**
Total(Benefit Month)	**206,216**	**218,922**	**220,302**	**209,620**	**855,060**

21/083 - SIMADVANCE 13OZ CONC

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	40,086	1,351			**41,437**
NOV 2015		42,298	1,205		**43,503**
DEC 2015			42,081	956	**43,037**
JAN 2016				39,651	**39,651**
Total(Benefit Month)	**40,086**	**43,649**	**43,286**	**40,607**	**167,628**

21/085 - SIM SPIT-UP PWD 12.0OZ

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	7,537	146			**7,683**
NOV 2015		8,113	115		**8,228**
DEC 2015			8,120	84	**8,204**
JAN 2016				7,869	**7,869**
Total(Benefit Month)	**7,537**	**8,259**	**8,235**	**7,953**	**31,984**

21/501 - SIM SOY ISOMIL 1 QT RTF

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	342	6			**348**
NOV 2015		297	29		**326**
DEC 2015			255	1	**256**
JAN 2016				337	**337**
Total(Benefit Month)	**342**	**303**	**284**	**338**	**1,267**

21/502 - SIM ADVANCE 1 QT RTF

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	1,036	57			**1,093**
NOV 2015		1,091	43		**1,134**
DEC 2015			961	6	**967**
JAN 2016				870	**870**
Total(Benefit Month)	**1,036**	**1,148**	**1,004**	**876**	**4,064**