Identification of CBER-regulated Generic Drug Facility

| Registrant - Altman Dermatology Associates (030883482) | | | | | | |
|--|---|------------------|----------------------------------|--|--|--|
| Contact | Address | Telephone Number | Email Address | | | |
| Samantha Waitzman | Address: 1100 West Central Road Suite 200 City, State, Zip: Arlington Heights, IL, 60005 Country: USA | +1-847-372-0069 | samantha.waitzman@altmanderm.net | | | |

| Facility | | | | | | | |
|----------------------------------|-------------------------------------|--|----------------------|---|--|--|--|
| Name | Address | | ID/FEI | Business Operations | | | |
| Altman Dermatology Associates | Address: City, State, Zip: Country: | 1100 West Central Road Suite 200 Arlington Heights, IL, 60005 USA | 030883482/3008821931 | Clinical Bioequivalence or Bioavailability Study | | | |
| Contact | Address | | Telephone Number | Email Address | | | |
| Samantha Waitzman | Address: City, State, Zip: Country: | 1100 West Central Road Suite 200 Arlington Heights, IL, 60005 USA | +1-847-372-0069 | samantha.waitzman@altmanderm.ne | | | |

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