



STATE OF NEW HAMPSHIRE  
 BOARD OF PHARMACY  
 121 South Fruit Street  
 Concord, NH 03301-2412  
 Tel. (603) 271-2350 Fax: (603) 271-2856  
 Website: www.state.nh.us/pharmacy

APPLICATION FEE:  
**\$250.00**

MAKE CHECK PAYABLE TO:  
 Treasurer, State of New Hampshire

RECEIVED

OCT 28 2022

**APPLICATION FOR PERMIT  
 TO CONDUCT A PHARMACY IN NEW HAMPSHIRE**

(Please Use Typewriter or Print Clearly In Ink)

OPLC-FINANCE

*OK 22-005651504  
 \$250.*

**Type of Application:**

- New Pharmacy / Original Application  
 Estimated Date of Opening: \_\_\_\_\_
- Change of Pharmacy Name  
 Effective Date of Change: \_\_\_\_\_
- Change of Location  
 Estimated Date of Move: \_\_\_\_\_
- Change of Ownership  
 Estimated Date of Change: \_\_\_\_\_
- Change of Pharmacist-In-Charge  
 Effective Date of PIC Change: 9/8/2022 Name of Former PIC: Albert Rogers

*The 1st app was sent to Philbrook Bldg.  
 Walmart used OLD Form.*

**PHARMACY INFORMATION**

Name Of Pharmacy <b>Wal-Mart Stores East, LP d/b/a Wal-Mart 10-1762</b>			<i>Lic # 0360</i>
Street Address Of Pharmacy <b>700 Lafayette Rd.</b>			
City/Town Seabrook	State <b>NH</b>	Zip Code 03874	
Telephone Number <b>603-474-2037</b>	Fax Number <b>603-474-2961</b>	E-Mail Address <b>complic@walmart.com</b>	
DEA Number <b>BW5373496</b>		Expiration Date <b>5/31/2025</b>	

**PHARMACIST-IN-CHARGE STATEMENT**

I, Fatemeh Tahajoud, of 91 Gile Road,  
Designated Pharmacist Home Address (Not P.O. Box)

Nottingham NH 03290 do hereby agree to serve as  
City/Town State Zip Code

pharmacist-in-charge at the above pharmacy.

*Lic # R1361  
 Passed PIC Exam 9-18-18  
 no disc.*

## TYPE OF PHARMACY

This application is for a permit to conduct a: (check one)

- Community Pharmacy ⇒ If community pharmacy, licensing:  Entire Store Area  Pharmacy Dept. Only
- Hospital Pharmacy (For Profit)  Home Infusion Pharmacy
- Other (Specify) \_\_\_\_\_

## TYPE OF OWNERSHIP

(Check One)

- Sole Proprietorship  Partnership  Corporation  LLC

(Check One)

- For Profit  Non-Profit

- If **non-profit organization**, and **IRS tax exempt**, attach a copy of the 501(c)(3) exemption approval issued by the U.S. Internal Revenue Service for each applicable entity.
- In the case of non-501(c)(3) organizations, attach a disclosure listing of **any practitioner ownership** which is not exempt as a "passive investment acquired at open market terms". (practitioner means any person lawfully entitled to prescribe medicine, or such person's spouse or dependent children).

If a **sole proprietorship**, list the name, official address, and occupation/business of owner:

If a **partnership**, list the name, official address, and occupation/business of each partner and the percentage of ownership held by each partner:

WSE Investment, LLC - Owner of 99% of Wal-Mart Stores East, LP

WSE Management, LLC - Owner of 1% of Wal-Mart Stores East, LP

Walmart Inc. - Owner of 100% of WSE Investment and WSE Management

If any partner is a corporation, that partner shall **also** provide the information required of corporations below.

If a **corporation** (list the following):

Corporation name and date and state of incorporation:

Walmart Inc. - Delaware 10/31/1969

If applicable, date of filing with the State of New Hampshire as a foreign corporation:  
(attach copy of authorization issued by the NH Secretary of State)

January 14, 1991 Registration #152686

Address of principal place of business:

702 SW 8th Street, Bentonville, Arkansas 72716

**CORPORATE INFORMATION (CONTINUED)**

Name, address, & telephone number of **agent of record**, in New Hampshire, for service of process:

CT Corporation

9 Capitol Street, Concord, New Hampshire 03301

List each type, or class, of voting stock and the number of shares authorized and outstanding for each class:

Please reference supplement

- Provide as a supplement to this application, the name, address, corporate title, occupation and percentage of stock held for all corporate officers/directors, and of all holders of 5% or more of each class of voting stock.
- If a listed shareholder is itself a corporation, provide the same for each such corporation.
- If a listed shareholder is a partnership, provide the information required under the partnership section on page 2 for each such partnership.
- Provide as a supplement to this application, the disclosure of the corporate structure, including parent company or companies.

**LEGAL PROCEEDINGS/ACTIONS**

To your knowledge, have there been or are there now pending any indictments of any nature or any alleged violations of the law governing the practice of pharmacy, controlled substances, or other regulated drugs against the corporation, members of the corporation or partnership, or any of the individuals named in this application?

Yes       No      (If yes, attach explanation)

To your knowledge, have any of the above individuals/entities been convicted of a local, state, or federal drug or pharmacy law?

Yes       No      (If yes, attach explanation)

To your knowledge, have any of the above individuals/entities been convicted of a felony within the past 10 years?

Yes       No      (If yes, attach explanation)

## PHARMACY HOURS OF OPERATION

This pharmacy shall be open a total of 73 hours per week and available to provide professional services during the following time periods:

MON. 9:00 AM to 8:00 PM    TUES. 9:00 AM to 8:00 PM    WED. 9:00 AM to 8:00 PM  
 THUR. 9:00 AM to 8:00 PM    FRI. 9:00 AM to 8:00 PM  
 SAT. 9:00 AM to 7:00 PM    SUN. 10:00 AM to 6:00 PM

\*Note: There must be pharmacist coverage (as noted in next section) for all hours the pharmacy is open.

## PHARMACISTS TO BE EMPLOYED AT PHARMACY

(Including Owner/Manager, if A Licensed Pharmacist - Attach additional sheet if necessary)

PHARMACIST NAME	NH LICENSE #	HOURS/WEEK
<u>Fatemeh Tahajouel</u>	<u>R1361</u>	<u>40 Average</u>
<u>see attached floating pharmacist's list</u>		<u>40 Average</u>

## PHARMACY TECHNICIANS TO BE EMPLOYED AT PHARMACY - Attach additional sheet if necessary

TECHNICIAN NAME	NH TECHNICIAN REG. #
<u>Shannon E. Eaton</u>	<u>CPHT-126251</u>
<u>Roberta J ouellette</u>	<u>CPHT-07400</u>
<u>Malissa M Coates</u>	<u>PT05665</u>
<u>Shacina Mason</u>	<u>CPHT-124174</u>
<u>Kelly Ann Zuchowski</u>	<u>CPHT-127267</u>
<u>Timothy Oliver Johnson, Jr.</u>	<u>PHT-126773</u>
<u>Lisa M Raymond</u>	<u>PHT-121954</u>

## GENERAL PHARMACY INFORMATION/SPECIFICATIONS

What are the dimensions of that portion of the pharmacy devoted to the preparation of prescriptions?

41'-0.5" work counter, 528.01 SQ. FT Enter either total square footage or dimension (length x width)

Give a brief description of the pharmacy department. (Complete only if this is an original application for a new pharmacy or if changes have occurred to an existing pharmacy)

NA

**GENERAL PHARMACY INFORMATION/SPECIFICATIONS (Continued)**

List persons (names & titles) who have security access to the pharmacy [according to Ph 303.02(m) and Ph 702.05(b)].

Fatemeh Tahajoud Staff pharmacist (Incoming PIC)

**PHARMACY OWNER / CORPORATE REPRESENTATIVE AFFIDAVIT**

As chief administrative officer of Walmart Inc. I certify that  
Corporation/Partnership

Fatemeh Tahajoud is designated by me as pharmacist-in-charge to operate  
Name of Pharmacist  
this pharmacy in compliance with all federal, state, and local laws. I have read this application and all of the statements made on it are, to the best of my knowledge, true and correct. As the owner or corporate representative of this pharmacy, my signature below acknowledges my (the corporation's) responsibilities as the permit holder, including all of the corporate / permit holder duties and responsibilities noted in NH RSA 318:38 and Ph 704.11(d).

  
Signature of Company / Corporate Representative Asst Corporate Secretary 9/19/22  
Title Date  
Timothy R. Koch

**PHARMACIST-IN-CHARGE AFFIDAVIT**

**PHARMACIST-IN-CHARGE AFFIDAVIT**

I swear and affirm that the answers and statements made on this application are true and correct to the best of my knowledge and belief, that this pharmacy has the required facilities and equipment and meets the conditions specified by the Board of Pharmacy, a copy of whose laws and rules I have read. I agree to replace promptly any item on the required equipment list which becomes lost, broken, or otherwise becomes unfit for use. I also agree to display the pharmacy permit in a conspicuous place in this pharmacy. I understand that this permit is issued to the pharmacy in the name of the corporation or the owner of the pharmacy. Upon my termination as pharmacist-in-charge this permit is not transferable; and upon any change in partnership composition; or upon the acquisition of the existing corporation by any person; or change in controlling interest in the corporation; or should the pharmacy be moved or closed or if the premises are damaged by fire or otherwise, this permit shall be immediately surrendered to the Board of Pharmacy.

I further agree to operate this pharmacy in accordance with all federal, state, and local pharmacy/drug laws and regulations.

  
Signature 9/19/2022  
Date

## Floating pharmacists :

\* Setareh Bouzari , Lic # 4278

Home store : wal-Mart 03535  
35 Fresh River Road  
Epping, NH 03042

\* Brian Mockler , Lic # R 2534

Home store : wal-Mart 03535  
35 Fresh River Road  
Epping, NH 03042

\* Hussien Taha , Lic # R 3150

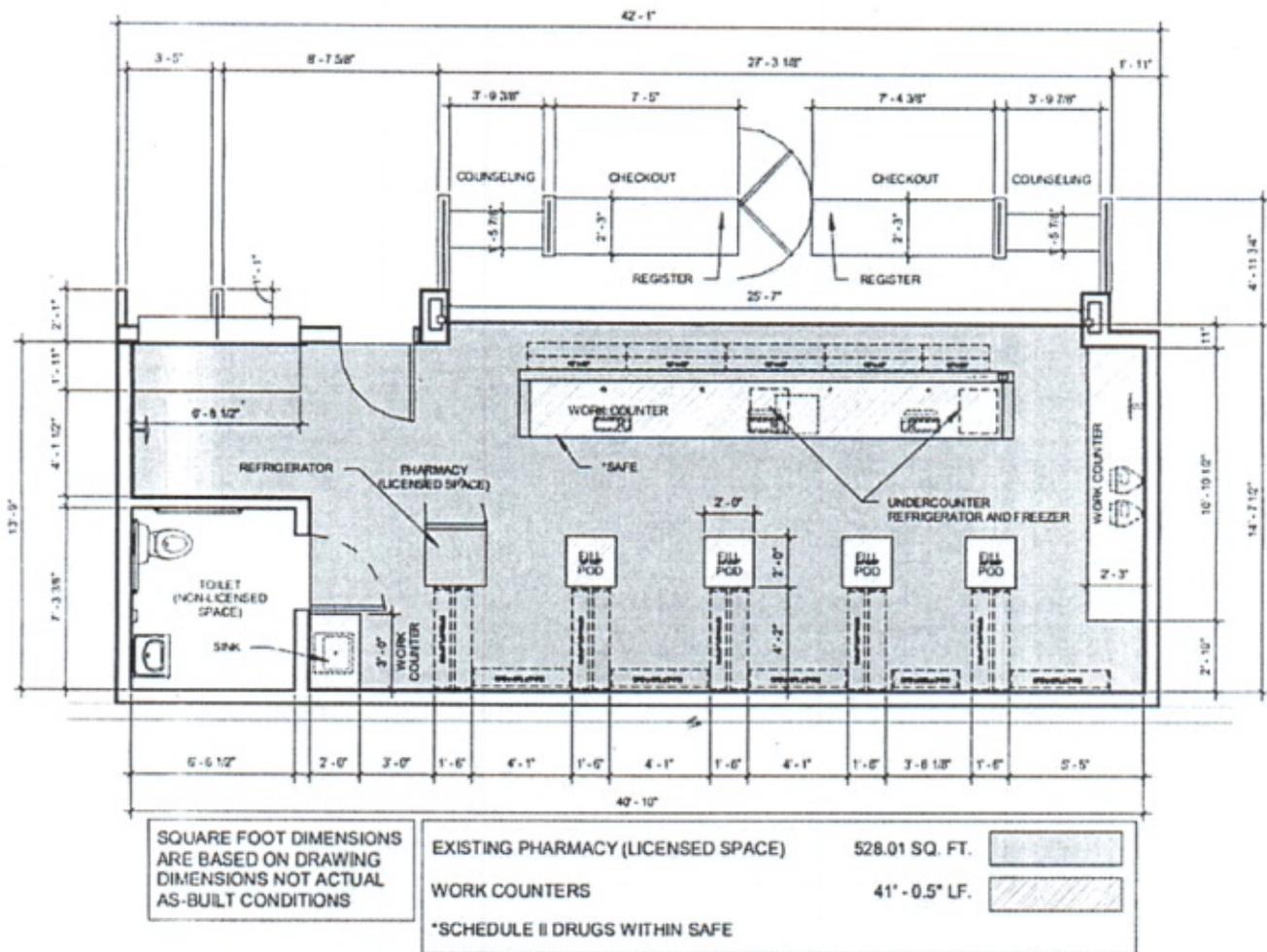
Home store : wal-Mart 02660

72 Main Street

North Reading, MA 01864

Store: 01762

14a) Our Walmart Pharmacy is a full service pharmacy with prescription drugs, OTC drugs, minimal amounts of non-sterile compounding, immunizations, MTM and DME.



## 1762 Seabrook, NH Pharmacy

Licensing Plan

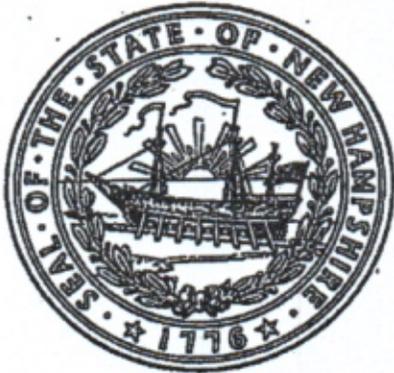
September 7, 2022

**State of New Hampshire**  
**Department of State**

**CERTIFICATE**

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that WAL-MART STORES, INC. is a Delaware Profit Corporation registered to transact business in New Hampshire on January 14, 1991. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 152686



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 3rd day of May A.D. 2017.

A handwritten signature in black ink, appearing to read "William M. Gardner".

William M. Gardner  
Secretary of State

# Pharmacist in Charge (PIC) Change Witness Form

Date: 9, 8, 2022

Store/Club #: 10- 1762

Time: 1:15

**\*\*This form must be completed as a required element of every PIC change\*\***

*Upon assuming the role of PIC, the incoming PIC must complete an inventory of controlled substances. The outgoing PIC is entitled to participate in the inventory, regardless of the reason for the PIC change, including termination for cause. Please complete this form, fax/scan send to Practice Compliance, and retain the form in the pharmacy with the PIC change inventory paperwork.*

**Complete ONLY this BOX when the outgoing & incoming PICs participate in the PIC change inventory**

Outgoing and Incoming PIC both participated in the PIC change inventory

Outgoing PIC: Albert A. Rogers III x Albert A. Rogers III

(Full Name)

(Signature)

Incoming PIC: Putemeh Zukhjaed x [Signature]

(Full name)

(Signature)

**Complete ONLY this BOX when the outgoing PIC does NOT participate in the PIC change inventory**

The outgoing PIC *did not* participate in the PIC change inventory for the following reasons:

- they were unavailable at the time chosen for inventory,
- they were unavailable due to circumstances beyond their control
- they refused to participate
- other

Additional details are required for any of the above listed reasons indicating why the outgoing PIC did not participate:

**\*THIS SECTION OF THE FORM MUST BE SIGNED BY A MARKET LEADER AND A WITNESS ONLY WHEN THE OUTGOING PIC DOES NOT PARTICIPATE IN THE PIC CHANGE INVENTORY.**

*(A witness may be any member of management. This member of management must witness the Outgoing PIC's refusal to participate in the PIC change inventory and countersign this document below)*

\_\_\_\_\_  
(Market Leader Print Name)

\_\_\_\_\_  
(Market Leader Signature)

\_\_\_\_\_  
(Witness Print Name)

\_\_\_\_\_  
(Witness Signature)

Pharmacy



Date: 9, 8, 2022

Time: 11:15

Pharmacist in Charge (PIC) Change Witness Form

Upon assuming the role of PIC, the incoming PIC must complete an inventory of controlled substances. The outgoing PIC is entitled to participate in the inventory, regardless of the reason for the PIC change, including termination for cause. This form must be completed as a required element of all PIC changes. Please complete this form, fax/scan send to Practice Compliance, and retain the form in the pharmacy with the PIC change inventory paperwork.

While performing the PIC Change at Walmart/Sam's Club Pharmacy 10- 762, the outgoing PIC,

Albert A. Rogers III

Participated in the PIC change inventory

Did not participate in the PIC change inventory for the following reasons:

- they were unavailable at the time chosen for inventory,
- they were unavailable due to circumstances beyond their control,
- they refused to participate,
- other

Explanation required for any reason that the outgoing PIC did not participate:

\_\_\_\_\_  
\_\_\_\_\_

The incoming PIC, \_\_\_\_\_, participated in the PIC change inventory.

**\*THIS FORM MUST BE SIGNED BY MHWD AND A WITNESS.**

\_\_\_\_\_  
(MHWD signature)

\_\_\_\_\_  
(MHWD Print Name)

\_\_\_\_\_  
(Witness signature)

\_\_\_\_\_  
Witness Print Name)

Market Health and wellness Director:

Name: Melissa Mangasa

phone: 479-866-1021

E-mail: Melissa.davis@walMart.com

Market office address:

55 Brooksby Village way,

Danvers Ma 01923

“Managing employee” means a general manager, business manager, administrator, director, or other individual that exercises operational or managerial control over, or who directly or indirectly conducts, the day-to-day operation of the provider or supplier, either under contract or through some other arrangement, whether or not the individual is a W-2 employee of the provider or supplier.

Operations – Kevin Host, SVP  
 Compliance – Tim Koch, Sr. Director  
 Payer Relations – OPEN  
 Licensing – Sarah Little, Sr. Director  
 Sam’s Club – Sean Jackson, SVP, GMM  
 Vision Center – David Reitnauer, VP Optical Walmart US

**Disclosure of Persons with Ownership and/or Control Interests**

**November 2021**

<b>Owners</b>	<b>Board Members (Other Disclosing Entity)</b>	<b>Managing Employees</b>
Alice Walton	Cesar Conde	George Flaherty Sr. Director, Commercial Contracting
Rob Walton	Sarah Friar	Kevin Host SVP, Health & Wellness
Jim Walton	Timothy Patrick Flynn	Michele Diane Garvey Sr. Director, Billing & Reconciliation
	Carla A. Harris	OPEN VP, H&W Compliance
	Thomas Warren Horton	OPEN VP, Payer Relations
	Marissa Ann Mayer	Tim Koch Sr. Director, US Ethics & Compliance
	Carl Douglas McMillon	OPEN Sr. Director, Payer Relations
	Gregory Boyd Penner	Sean Jackson SVP/GMM, Health & Wellness Sam’s Club
	Steven S Reinemund	Sarah Little Sr. Director, US Licensing
	S. Robert Walton	David Reitnauer VP, Specialty Operations
	Steuart Walton	JoAnn Stevens Sr. Director, Health & Wellness Compliance
		Lisa Young Sr. Director, Controlled Substance Compliance

**EXHIBIT 1**  
**OWNERSHIP DISCLOSURE**  
**NEW HAMPSHIRE**

In New Hampshire, the Applicant (Owner) is Wal-Mart Stores East, LP (for Walmart pharmacies) or Sam's East, Inc. (for Sam's Club pharmacies). Wal-Mart Stores East, LP and Sam's East, Inc. are, ultimately, wholly owned by the publicly traded entity known as Walmart Inc. ("Walmart").

Below is the information requested on the Application for each entity:

Corporation Name	Date and State of Incorporation	Date of Filing with New Hampshire	Address of Principal Place of Business	Agent for Service of Process
Wal-Mart Stores East, LP	11/09/2001 Reg. #3455699	12/17/2001 Reg. #388574	702 SW 8th Street, Bentonville AR 72716	CT Corporation Systems 9 Capitol Street Concord, New Hampshire 03301
Sam's East, Inc.	8/30/1996 Reg. #2658800	10/03/1996 Reg. #255985	702 SW 8th Street, Bentonville AR 72716	CT Corporation Systems 9 Capitol Street Concord, New Hampshire 03301
Walmart Inc.	Delaware 10/31/1969	1/14/1991 Reg. #152686	702 SW 8th Street, Bentonville AR 72716	CT Corporation Systems 9 Capitol Street Concord, New Hampshire 03301

Walmart operates nearly five thousand, eight hundred thousand retail pharmacies, five pharmacy distribution centers, a mail order pharmacy, a specialty pharmacy and over three thousand Vision Centers™ ("Provider Facilities") in the United States through Walmart Inc. and its other subsidiary companies (collectively the "Operating Entities").

Below is a "Stock Ownership Chart" that identifies those individuals and organizations who have a direct or indirect ownership or control interest of 5% or more in Walmart Inc. Other than these individuals and organizations, no other employee, partner, member, director, officer or stockholder owns more than five percent (5%) of the Applicant/Provider:

The following table lists the beneficial owners of greater than 5% of the Shares outstanding as of April 9, 2020. As of April 9, 2020, there were 2,833,701,902 Shares outstanding.

Name and Address of Beneficial Owner <sup>(1)</sup>	Direct or Indirect Ownership with Sole Voting and Investment Power	Shared Voting and Investment Power			Total	Percent of Class
		Shared, Indirect Ownership Through Walton Enterprises, LLC <sup>(1)</sup>	Shared, Indirect Ownership Through the Walton Family Holdings Trust <sup>(1)</sup>	Other Indirect Ownership with Shared Voting and Investment Power		
Alice L. Walton	6,748,580	1,000,891,131 <sup>(3)</sup>	419,155,600 <sup>(4)</sup>	2,174 <sup>(5)</sup>	1,426,797,485	50.35%
Jim C. Walton	6,351,524 <sup>(2)</sup>	1,000,891,131 <sup>(3)</sup>	419,155,600 <sup>(4)</sup>	2,174 <sup>(5)</sup>	1,426,400,429	50.34%
John T. Walton Estate Trust	0	1,000,891,131 <sup>(3)</sup>	0	0	1,000,891,131	35.32%
S. Robson Walton	2,614,436	1,000,891,131 <sup>(3)</sup>	419,155,600 <sup>(4)</sup>	2,347 <sup>(6)</sup>	1,422,663,514	50.21%

<sup>(1)</sup> The business address of Alice L. Walton, Jim C. Walton, the John T. Walton Estate Trust, S. Robson Walton, Walton Enterprises, LLC, and the Walton Family Holdings Trust is P.O. Box 1508, Bentonville, Arkansas, 72712.

<sup>(2)</sup> Jim C. Walton has pledged 4,251,488 of the Shares directly owned by him as security for a line of credit extended to a company not affiliated with Walmart.

<sup>(3)</sup> Walton Enterprises, LLC holds a total of 1,000,891,131 Shares. Alice L. Walton, Jim C. Walton, and S. Robson Walton share voting and dispositive power with respect to all Shares held by Walton Enterprises, LLC, individually as managing members of Walton Enterprises, LLC, and in their capacities as co-trustees of the John T. Walton Estate Trust, which is also a managing member of Walton Enterprises, LLC. The managing members of Walton Enterprises, LLC have the power to sell and vote those Shares.

<sup>(4)</sup> The Walton Family Holdings Trust holds a total of 419,155,600 Shares. Alice L. Walton, Jim C. Walton, and S. Robson Walton, as co-trustees, share voting and dispositive power.

<sup>(5)</sup> The number includes 2,174 Shares held by a trust as to which Jim C. Walton, Alice L. Walton, and an entity under her control, as co-trustees, share voting and dispositive power.

<sup>(6)</sup> This number includes 2,347 Shares held by various trusts in which S. Robson Walton, as co-trustee thereof, shares voting and dispositive power.

**Walmart Inc., Wal-Mart Stores East, LP, Wal-Mart Louisiana, LLC, Wal-Mart Stores Arkansas, LLC, Wal-Mart Stores Texas, LLC**

<b>NAME AND TITLE</b>	<b>ADDRESS</b>
Tim Koch Assistant Secretary	702 S.W. 8 <sup>th</sup> Street Bentonville, AR 72716
Sarah Little Assistant Secretary	702 S.W. 8 <sup>th</sup> Street Bentonville, AR 72716
Kevin Host SVP, Health & Wellness	702 S.W. 8 <sup>th</sup> Street Bentonville, AR 72716
OPEN VP, Payer Relations	702 S.W. 8 <sup>th</sup> Street Bentonville, AR 72716

The above officers / directors own less than 1% stock of Walmart Inc., a public corporation.

The above officers / directors are those designated with authority for all licensing matters and serve in the capacity as listed above for Wal-Mart Stores East, LP, Wal-Mart Louisiana, LLC, Wal-Mart Stores Arkansas, LLC and Wal-Mart Stores Texas, LLC.

WSE Management, LLC and WSE Investment, LLC own the limited and general partnership interest in Wal-Mart Stores East, LP.

WSE Management, LLC	General Partner	1%
WSE Investment, LLC	Limited Partner	99%

## Disclosure of Officers

April 2022

Owners	Board Members (Other Disclosing Entity)	Officers
Alice Walton	Sarah Friar	Sarah Little
Rob Walton	Timothy Patrick Flynn	Kevin Host
Jim Walton	Carla A. Harris	Tim Koch
	Thomas Warren Horton	Sean Jackson (Sam's Club)
	Marissa Ann Mayer	
	Carl Douglas McMillon	
	Gregory Boyd Penner	
	Steven S Reinemund	
	S. Robert Walton	
	Steuart Walton	

### **Explanation of Legal Proceedings/Actions**

The applicant, Wal-Mart Stores East, LP [or, when applicable, Sam's East Inc.], and its affiliated and related entities including, but not limited to, Wal-Mart Stores East, LP and their ultimate parent corporation, Walmart Inc. (collectively, "Walmart" or the "Applicant") understand this question to relate to licenses, registrations and penalties applicable to the manufacture or distribution of pharmaceuticals, or the practice of pharmacy.

Walmart operates nearly five thousand, eight hundred retail pharmacies across the United States. In connection with its retail pharmacy operations, Walmart applies for and holds numerous permits, licenses, and certificates of authority with federal, state and local agencies, including state professional licenses as well as state and federal controlled substance registrations some of which have been subjected to discipline as described below.

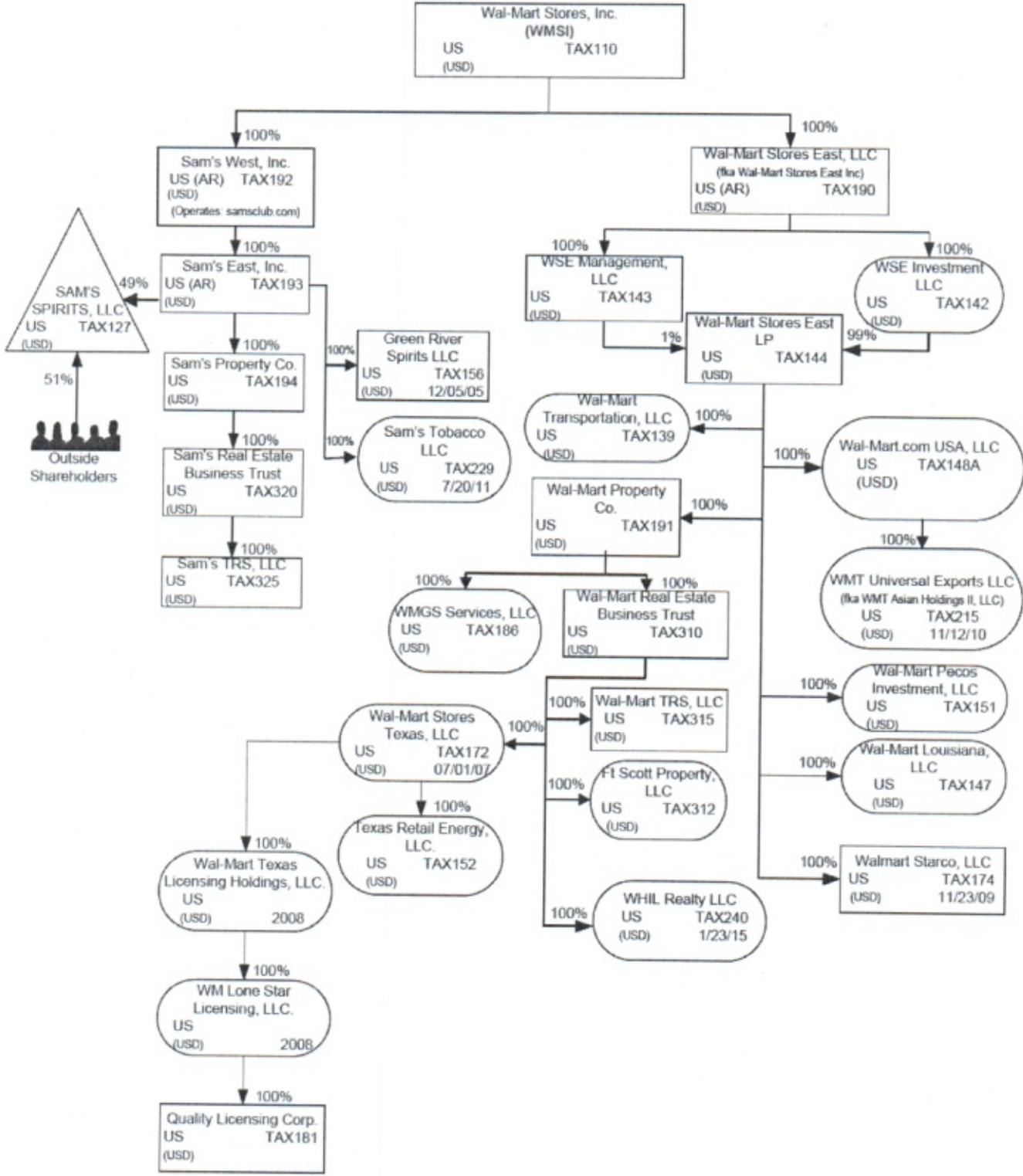
The Applicant is a corporation that is wholly owned by the publicly traded company known as Walmart Inc. Neither Walmart Inc. nor Sam's East, Inc., or any related or affiliated entity has ever been indicted, nor are there any pending indictments against Walmart or any related or affiliated entity or any of the individuals named in this application.

From time to time, Walmart has had a permit, license or registration subjected to discipline. No such disciplinary actions, however, have ever had a material adverse effect on Walmart's ability to continue to provide pharmacy services in any state where Wal-Mart holds such permits, licenses or registrations, regardless of the type of permit, license or registration.

To the best of the Walmart's knowledge and attached to this application as **Exhibit 2**, is a chart that provides a summary of those final actions that have been taken against Walmart, Walmart's Pharmacy Facilities' and Walmart's employed licensed pharmacy professionals' respective registrations and licenses for the last two (2) years. **Exhibit 2** summarizes the nature of the action taken; the regulatory authority; the reason for the action; and the resolution of the action with the regulatory authority.



Unofficial



### **Explanation of Legal Proceedings/Actions**

The applicant, Wal-Mart Stores East, LP [or, when applicable, Sam's East Inc.], and its affiliated and related entities including, but not limited to, Wal-Mart Stores East, LP and their ultimate parent corporation, Wal-Mart Stores, Inc. (collectively, "Wal-Mart" or the "Applicant") understand this question to relate to licenses, registrations and penalties applicable to the manufacture or distribution of pharmaceuticals, or the practice of pharmacy.

Wal-Mart operates over six thousand retail pharmacies across the United States. In connection with its retail pharmacy operations, Wal-Mart applies for and holds numerous permits, licenses, and certificates of authority with federal, state and local agencies, including state professional licenses as well as state and federal controlled substance registrations some of which have been subjected to discipline as described below.

The Applicant is a corporation that is wholly owned by the publicly traded company known as Wal-Mart Stores, Inc. Neither Wal-Mart Stores, Inc. nor Sam's East, Inc., or any related or affiliated entity has ever been indicted, nor are there any pending indictments against Wal-Mart or any related or affiliated entity or any of the individuals named in this application.

From time to time, Wal-Mart has had a permit, license or registration subjected to discipline. No such disciplinary actions, however, have ever had a material adverse effect on Wal-Mart's ability to continue to provide pharmacy services in any state where Wal-Mart holds such permits, licenses or registrations, regardless of the type of permit, license or registration.

To the best of the Wal-Mart's knowledge and attached to this application as **Exhibit 2**, is a chart that provides a summary of those final actions that have been taken against Wal-Mart, Wal-Mart's Pharmacy Facilities' and Wal-Mart's employed licensed pharmacy professionals' respective registrations and licenses for the last two (2) years. **Exhibit 2** summarizes the nature of the action taken; the regulatory authority; the reason for the action; and the resolution of the action with the regulatory authority.

This document is intended to assist a new pharmacist-in-charge (PIC) as a reminder of some of the requirements/duties. It is not intended to be a comprehensive list of all requirements/duties and is not intended to negate individual responsibility of any other pharmacist practicing at the location.

**Ph 704.11 Pharmacist-in-Charge/Corporate Entity Requirements/Duties.**

- (a) Pharmacists looking to serve as a Pharmacist-in-Charge (PIC) shall:
  - (1) Have worked as a pharmacist for a minimum of 2 years post-graduation;
  - (2) Complete and pass with a minimum of 80% an exam designed by the board to assess the knowledge of the candidate in regard to their responsibilities as PIC; and
  - (3) Work a minimum of 20 hours per week at the location where he/she serves as PIC except when absent due to scheduled vacation or other authorized leave.
  
- (b) Pharmacist in charge duties shall include:
  - (1) Responsibility for the control of all drugs issued or dispensed in the pharmacy where he/she practices;
  - (2) Ensuring written policies and procedures for the procurement, storage, compounding and dispensing of drugs are in place;
  - (3) Ensuring that all staff pharmacists are familiar with and in compliance with the established policies and procedures;
  - (4) Establishing and supervising the recordkeeping system for the purchase, sale, possession, storage, and repackaging of drugs;
  - (5) Maintaining the security of the prescription department and its contents;
  - (6) Determining who will have keys and access to the pharmacy with the exception of security personnel;
  - (7) Establishing quality assurance guidelines to ensure the medication dispensed is in conformance with the prescription received;
  - (8) Prohibiting the presence of adulterated or misbranded drugs in the pharmacy;
  - (9) Ensuring compliance with the provisions of RSA 318 and RSA 318-B and any other state or federal pharmacy-related laws or rules;
  - (10) Supervising personnel in the prescription department; and
  - (11) Ensuring all personnel involved in the preparation and dispensing of prescriptions are properly licensed or registered with the board.

(c) Pharmacists may serve as a pharmacist-in-charge for a maximum of 2 pharmacies, providing that one of these pharmacies shall be in an institution requiring the services of a pharmacist only on a part-time basis.

(d) The corporate entity or permit holder shall be responsible for the following:

- (1) Written policies and procedures for the procurement, storage, compounding and dispensing of drugs;
- (2) Ensuring that all staff pharmacists are familiar with and in compliance with the established policies and procedures;
- (3) Determining which security personnel will have keys and access to the pharmacy and inform the pharmacist in charge;
- (4) Establishing procedures and policies to ensure the security of the pharmacy department when a pharmacist is working alone and needs to leave the licensed area for counseling, immunizations, lunch or rest room breaks;
- (5) Providing online access to the New Hampshire law book, medical reference material and other state and local sites for reference by their pharmacists;
- (6) Assuming all the responsibilities of the pharmacist in charge in an interim period when the pharmacist in charge has been vacated unexpectedly; and
- (7) Supplying adequate staffing to assist the board of pharmacy during scheduled routine inspections to assist with the retrieval of records when hard copy records are not maintained

# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SAM'S EAST, INC." IS DULY QUALIFIED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



3076717 8300

SR# 20173040588

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202477620

Date: 05-03-17

**State of New Hampshire**  
**Department of State**

**CERTIFICATE**

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that SAM'S EAST, INC. is a Delaware Profit Corporation registered to transact business in New Hampshire on October 03, 1996. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 255985



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire.  
this 3rd day of May A.D. 2017.

A handwritten signature in cursive script, appearing to read "Wm Gardner".

William M. Gardner  
Secretary of State

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WAL-MART STORES EAST, LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



3455699 8300

SR# 20173040594

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JWB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202477622

Date: 05-03-17

**State of New Hampshire**  
**Department of State**

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that WAL-MART STORES EAST, LIMITED PARTNERSHIP a Delaware Limited Partnership formed to transact business in New Hampshire on December 17, 2001. I further certify that it has paid the fees required by law and has not dissolved.

Business ID: 388574



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 3rd day of May A.D. 2017.

A handwritten signature in black ink, appearing to read "William M. Gardner".

William M. Gardner  
Secretary of State

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WAL-MART STORES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



732109 8300

SR# 20173040585

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JWB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202477619

Date: 05-03-17