

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION REGISTERED ESTABLISHMENTS' REPORT OF PRIVATE LABEL DISTRIBUTORS	FOR FDA USE		REPORTING FIRM										REPORTING FIRM NDC CODE							
	CONTROL NO.		NAME (As shown on Form FDA 2656, Line 2, Columns 61-100)										ESTABLISHMENT REGISTRATION NO.				LABELER		PRODUCT	
	1	5	272/27										311	312/20		321	251/79		318	

LINE	SITE ADDRESS										RPRT DATE						
	NUMBER AND STREET					CITY					STATE	ZIP CODE		FOREIGN COUNTRY		MO.	YR.
2	101					138 139					158	159 161 165 166		175		14	100

LINE	MAILING ADDRESS (If different from Line 2)														
	NUMBER AND STREET					CITY					STATE	ZIP CODE		FOREIGN COUNTRY	
3	176					213 214					233	234 236 240 241		250	

LINE	RECORD ID		SEC	S	U	TRADE NAME OR ESTABLISHED NAME UNDER WHICH PRODUCT IS MARKETED BY ANOTHER FIRM										83
	6	11 12 15	16 17 18 19 20	0	1											

LINE	NDC CODE		SHORT NAME			FIRM NAME ON LABEL					SEC	PACKAGE CODE					ZIP CODE
	LABELER	PRODUCT	46	60	61	100	16	17	0	3	1	2	3	4	5		
5	40/84	90 93															

LINE	RECORD ID		SEC	S	U	TRADE NAME OR ESTABLISHED NAME UNDER WHICH PRODUCT IS MARKETED BY ANOTHER FIRM										83
	6	11 12 15	16 17 18 19 20	0	1											

LINE	NDC CODE		SHORT NAME			FIRM NAME ON LABEL					SEC	PACKAGE CODE					ZIP CODE
	LABELER	PRODUCT	46	60	61	100	16	17	0	3	1	2	3	4	5		
7	40/84	90 93															

LINE	RECORD ID		SEC	S	U	TRADE NAME OR ESTABLISHED NAME UNDER WHICH PRODUCT IS MARKETED BY ANOTHER FIRM										83
	6	11 12 15	16 17 18 19 20	0	1											

LINE	NDC CODE		SHORT NAME			FIRM NAME ON LABEL					SEC	PACKAGE CODE					ZIP CODE
	LABELER	PRODUCT	46	60	61	100	16	17	0	3	1	2	3	4	5		
9	40/84	90 93															

LINE	RECORD ID		SEC	S	U	TRADE NAME OR ESTABLISHED NAME UNDER WHICH PRODUCT IS MARKETED BY ANOTHER FIRM										83
	6	11 12 15	16 17 18 19 20	0	1											

LINE	NDC CODE		SHORT NAME			FIRM NAME ON LABEL					SEC	PACKAGE CODE					ZIP CODE
	LABELER	PRODUCT	46	60	61	100	16	17	0	3	1	2	3	4	5		
11	40/84	90 93															

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to:

Food and Drug Administration
CDER/Drug Registration and Listing (HFD-337)
5600 Fishers Lane
Rockville, MD 20857

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

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Please fold form where indicated, place in a window envelope, and return to address indicated.

Food and Drug Administration
CDER/Drug Registration and Listing (HFD-337)
5600 Fishers Lane
Rockville, MD 20857

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If using Federal Express, DHL or any special carrier to return this form, please use the following address:

(Please refer to the Drug Registration and Listing Instruction booklet.)

When completing this form, please refer to the Drug Registration and Listing Instruction Booklet for assistance.

PLEASE PRINT IN ENGLISH USING BLACK INK.

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