



NEW KALETRA
(lopinavir/ritonavir) tablets



Strength	Package Size	NDC	WAC/Each*	List/Each**
200/50 mg	120 tablets	0074-6799-22	\$637.01	\$670.54

* Wholesale Acquisition Cost (WAC) is the price for this drug submitted to First Data Bank and Red Book on October 26, 2005 for publication and does not include prompt pay discounts or other discounts, rebates or reductions in price. The actual price paid by wholesalers and other customers and retail price paid by consumers at a pharmacy may vary.

** List Price is the price for this drug as of October 26, 2005 for customers, other than wholesalers, who purchase less than one case and does not include prompt pay discounts or other discounts, rebates or reductions in price. The actual price paid by customers and retail price paid by consumers at a pharmacy may vary.

Important Information

- KALETRA is sold by 103 Abbott sales representatives.
- Physician-level sales calls for KALETRA tablets begin immediately.
- No refrigeration required.
- This offer is made only to retail pharmacies for their own use in dispensing and is not applicable to contract purchases or purchases made for resale.

KALETRA Tablets Quick Ship Allowances and Recommended Stocking Quantity Per Pharmacy

- 1 x 120 KALETRA 200/50 mg tablets.
- \$40.00 for each retail store stocked with recommended stocking quantities by 11/23/05.
 - Max allowance per pharmacy is \$80.00.
- Purchase must be made on a single invoice.

KALETRA Tablets 200/50 mg	Bottle	Case
Quantity	1 bottle	24 bottles
Weight	6.72 oz	10 lbs, 11 oz
Dimensions		
W	1.93"	11.88"
L	2.67"	12.19"
H	4.77"	5.56"
Cube	24.58"	805.04"

To Order

- Contact your wholesaler, OR call Abbott Laboratories at 1-800-255-5162.



Fill out the information below and attach a copy of this sheet to the invoice as proof of performance. Please circle KALETRA tablet items on the invoice.

Send proof of performance to: Incentive Marketing Plus, P.O. Box 351569, Jacksonville, FL 32235-1569

Pharmacy Name: _____

Street Address, City, State, Zip: _____

Ship Date: _____

Quantity Received (bottles): _____

Retail Pharmacy Claim Must Be Received by 12/31/05.

