

MAE528755A

ADDRESS ^(Street) 15/178 ^(Surname) Queen St, St. Marys 27620

Prescriber No.

Block letters please

42678324AA

Patient's Medicare no.

3353-70597-1 Patient's Ref no. 2

Patient's full name

Ben Spokes

Patient's address

182-186 High St, Bendigo
VIC Postcode 3550

Entitlement no.

[Empty grid for entitlement number]

PBS Safety Net entitlement cardholder

Concessional or dependant, RPBS beneficiary or PBS Safety Net concession cardholder

(Tick appropriate boxes)

PBS

RPBS

Brand substitution not permitted

Pharmacist/patient copy

Quetiapine 300mg Tab

1 Tab x Nocte

10 tab x NO Repeat

Dr M N Arfeen
Provider: 548566BK
Prescriber: 3012659

[Handwritten signature]

Privacy notice on reverse

Doctor's signature

Date 11/21/21

I declare that I have received this/these medicine(s) and the information relating to any entitlement to a pharmaceutical benefit is correct.

Patient's or agent's signature

Date of supply

Agent's address

1/1