Lupin Pharmaceuticals, Inc.

RECALL

Quinapril Tablets USP, 20mg & 40mg (90's count)

Retail Level

12/2/2022

Please fill out this form completely. By doing so, this will acknowledge that you have read and understand the recall instructions and have taken the appropriate action.

Customer Name:	DEA#:

DEA # is required, if it is not provided, the processing of your form will be delayed.

Address:		
City:	State:	Zip:
Contact Name (Please Print):		
Telephone#:	Email:	
Contact Signature:	Date:	
DEBIT MEMO# (If unsure, leave blank):		

Wholesaler Information if not directly purchased from Lupin:

Wholesaler Name:	DEA#:	
City:	State:	Zip:

I have checked my stock and:

_____I do not have any stock of the recalled items.

OR

I have quarantined and listed in the box below the quantity of recalled units and I will be returning to Inmar, as soon as possible. Upon receipt of this Response Form, Inmar, will issue return authorization label(s) Please indicate the # of needed box labels_____.

Item Description	NDC#	Lot#	Exp Date	Full Bottle Count	Partial Bottle Count	Total Bottle Count
Quinapril Tablets USP, 40mg (90's count)	68180-554-09	G100533	12/31/2022			
Quinapril Tablets USP, 40mg (90's count)	68180-554-09	G100534	12/31/2022			
Quinapril Tablets USP, 40mg (90's count)	68180-554-09	G203071	3/31/2024			
Quinapril Tablets USP, 20mg (90's count)	68180-558-09	G102929	4/30/2023			

If you have any questions regarding this form or product return please contact Inmar at 877-538-8445
Office hours 9am to 5pm EST Mon thru Fri.

Please fax this form to: 1-817-868-5362 or E-mail rxrecalls@inmar.com