



**701 Philadelphia St.
Indiana, PA 15701
(724) 349-4200
www.gattirx.com**

FREE GENERIC DRUG VOUCHER*

Prescriber: Please check the appropriate medicine box and provide the patient with a new prescription. *Offer applies only to the list of drugs below:

- | | | |
|-------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> AMLODIPINE | <input type="checkbox"/> LISINOPRIL | <input type="checkbox"/> OMEPRAZOLE |
| <input type="checkbox"/> CARVEDILOL | <input type="checkbox"/> LISINOPRIL/HCTZ | <input type="checkbox"/> SIMVASTATIN |
| <input type="checkbox"/> CITALOPRAM | <input type="checkbox"/> MELOXICAM | <input type="checkbox"/> ZOLPIDEM |
| <input type="checkbox"/> GABAPENTIN | <input type="checkbox"/> METOPROLOL TARTRATE | |

This voucher may be redeemed for a free 30 days supply of medicine checked, with a written prescription from your doctor. This offer applies only to a NEW prescription of medicine you have not been previously taking. This offer does not apply to medication refills or medication transferred from another pharmacy, and may not be used with any other offers. Vouchers may not be used against any co-pay or in conjunction with any Medicaid or Medicare Plan. This voucher is valid at :
Gatti Pharmacy 701 Philadelphia St. Indiana, PA 15701

Patient: By presenting this voucher, I am certifying that I have not been prescribed this medication in the past year and I am requesting that my insurance not be billed for any part of this prescription

Form G



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