DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION INVOICE FOR FREEDOM OF INFORMATION REQUEST

1. Invoice Number

01202200095

2. Date 02/16/2022

3. REQUEST RECEIVED FROM

N/A MUCKROCK NEWS DEPT MR 122436 411A HIGHLAND AVE SOMERVILLE, MA 02144-2516 US

ATTN: SHAWN MUSGRAVE

617-299-1832

122436-46291222@REQUESTS.MUCKROCK.COM

4. COMMENTS

FIRM CHARGES FOR THE MONTH OF JANUARY 2022

5. BILLING INFORMATION

Attach Check or Money Order Here

Item	Amount		
a.Reproduction	\$ 0.00		
b. Search Time	\$ 5.75		
c. Review Time	\$ 0.00		
d. Microfiche	\$ 0.00		
e. Other	\$ 61.00		
MAKE CHECKS PAYABLE TO:	T-4-1	Φ.(()	
FOOD AND DRUG ADMINISTRATION	Total	\$ 66.	

Payment can be forwarded to FDA by one of the following methods:

1. Online Payment:

The preferred payment method is online using electronic check (Automated Clearing House(ACH) also known as eCheck) or credit card. Make an online payment at https://userfees.fda.gov/pay.

ALL PAYMENTS MUST BE MADE WITH US CURRENCY

For more help, see the 'Step-By-Step Instructions.'

2. If checks are sent by U.S. Mail, send to:

Food and Drug Administration P.O Box 979107

St. Louis, MO 63197-9000

3. If checks are to be sent by a courier that requires a street address, the courier can deliver the checks to:

U.S.Bank

ATTN: Government Lockbox 979107

1005 Convention Plaza St. Louis, MO 63101

Note: This address is for courier delivery only. Contact the

U.S. Bank at 314-418-4013 if you have any questions concerning courier

delivery

6. FOI CONTACT

Freedom of Information Staff

7. Contact Information

301-796-3900 FOIABilling@fda.hhs.gov

FORM FDA 2846

PREVIOUS EDITION IS OBSOLETE

PART 3-FOI STAFF(HFI-35)

Charge for the month of JANUARY

Invoice #: 01202200095

Requester Name: N/A

Control No	Signature	Action	Repro	Search	Review	Fiche	Other	Total Fees Total Paid	
2022-53	Shawn Musgrave	01/25/2022	\$ 0.00	\$ 5.75	\$ 0.00	\$ 0.00	\$ 61.00	\$ 66.75 \$ 0.00	
All reports of adverse events and/or side effects for Vimpat (aka lacosamide)									

Please return this page with your remittance.

Invoice #: **01202200095**

Invoice Amount: \$ 66.75

Payment may also be made by wire transfer of funds. The following account identifying information is provided for firms who prefer to wire user fee payments:

FDA Deposit Account Number: 75060099

NY Federal Reserve Bank's routing/transit number: 021030004

Reference: Cite the invoice number

To expedite this process, please review this invoice carefully. If there are any discrepancies, please contact Freedom of Information Staff by email FOIABilling@fda.hhs.gov or telephone number 301-796-3900. Thank you for your cooperation and expeditious payment of invoice.

Note: Payment is due within 30 days after receipt of this invoice. Failure to submit payment may jeopardize processing of future requests.

Notice to Customers Making Payment by Personal Check

If you send us a personal check, it will be converted into an electronic funds transfer (EFT). This means we will copy your check and use the account information on it to electronically debit your account for the amount of the check. The debit from your account will usually occur within 24 hours. and will be shown on your regular account statement.

You will not receive your original check back. We will destroy your original check, but we will keep the copy of it. If the EFT cannot be processed for technical reasons, you authorize us to process the copy in place of your original check. If the EFT cannot be completed because of insufficient funds, we may try to make the transfer up to 2 times.