

### Letter of Commitment

Member listed below is committed to fully implementing Vaxelis vaccine at all listed practice locations. By executing this Letter of Commitment with **Primary Care Alliance, Inc. (PCA)**, the undersigned member is declaring the intent to participate in the Vaxelis Performance Offer by direct purchases made through Sanofi Pasteur’s online ordering website: [www.vaccineshoppe.com](http://www.vaccineshoppe.com). The member is committing to purchases of Vaxelis equal to or greater than 75% of the total Vaxelis, Pediarix and Pentacel purchases. The administrative fees paid by Sanofi Pasteur to PCA, are in part contingent on participating PCA members achieving an aggregate market share of greater than or equal to 75%, and it is a semi-annual market share measurement period.

Pricing will be effective at program initiation. A ramp-up period of no more than 5 months will be provided to the member. Furthermore, it is understood by the member that member will receive up-front discounts on Vaxelis vaccine. The member agrees to comply with the Anti-Kickback statute, including disclosure of any discounts received from participation in the Performance Offer as applicable under federal or state law. If the facility listed below, at any time, is determined not to meet the market share level specified above, then PCA shall have the right to promptly terminate the undersigned member from the Vaxelis Performance Offer. PCA shall notify Sanofi Pasteur that such member is excluded from Vaxelis Performance Offer pricing.

**Please complete the two steps below:**

1. Complete this Letter of Commitment (LOC) and submit it to PCA at [abulllock@primarycarealliance.com](mailto:abulllock@primarycarealliance.com) or call Amy at 801.369.3933. PCA will submit your request to Sanofi Pasteur on your behalf.
2. Provide the information requested below to PCA.

**Member / Customer Name (Full Legal Name)** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**DEA or HIN** \_\_\_\_\_

**Sanofi Pasteur Account Number (if known)** \_\_\_\_\_

**Printed Name** \_\_\_\_\_

**Title** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Signature (electronic is acceptable)** \_\_\_\_\_

**Date** \_\_\_\_\_

Submission of your request to PCA is preferred. The Letter of Commitment can also be processed by providing this completed form to your Sanofi Pasteur Representative. Your representative will then submit the Letter of Commitment on your behalf. Eligibility will be reviewed and confirmed by PCA. Upon approval by PCA, Sanofi Pasteur will add member to the Vaxelis Performance Offer. PCA will notify you when this has been completed.