2014/11/10 09:49:30

Message to Prescriber

1300 N MAIN ST

NEWTON, KS 671141916 Tel: 316-281-9356 Fax: 316-281-9335

Date: 11/10/2014 Time: 9:49 AM

Prescriber Information:

Physician: **DERRICK JONES** Address: 2925 SKYWAY CIR N

Fax: 972-675-7310 IRVING, TX 750383510

DEA#: MJ3217331

Phone: 972-675-7313

Message:

patient aaron jackson (dob 11/23/73) has requested an rx for xanax 1mg #60 sig- tk 1 t po bid, this was lasted filled 10/10/14. please send a new rx. thanks!

In accordance with state regulations, a generic will be substituted unless otherwise indicated.

☐ Dispense as Written/Brand Medically Necessary

Please fax back to Walgreens at:

316-281-9335

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