



IOU DELIVERY SHEET

IHS PHARMACY
504 MCCURD AVE S, STE 7
RAINSVILLE, AL 35986

BATCH NUMBER: 584381

Facility: AD - ALAMOSA(AD) CO DET CTR CO

Patient Name: CHACON, DONOVAN

Medication: BUSPIRONE HCL - 10MG

Fill Date: 2020-01-04

Original Quantity: 56.0

Owed Quantity: 56.0

Pharmacy Tech: hanka