

Exhibit A
to the
Notice re Unavailability of Class Representative
Herbert Anthony Adderley

State of New Jersey
PRESCRIPTION BLANK

000608

KEVIN FLEMING, M.D.
710 STATION AVENUE
HADDON HEIGHTS, NJ 08035
(856) 547-7126

DEA # _____ LIC # 25MA04672000
BATCH # RXP090603506101 NPI # 1508816075

IF PRESCRIPTION IS WRITTEN AT ALTERNATE PRACTICE SITE, CHECK HERE
AND PRINT ALTERNATE ADDRESS AND TELEPHONE NUMBER ON REVERSE SIDE

PATIENT FRAN DELDEKA D.O.B. _____
ADDRESS _____ DATE 10/19/9

Rx Mr. Deldeka, because of
severe L/S spine disease, cannot
travel to San Francisco for the
settlement of his case versus
the NFL Players' Association.
He has intractable pain.

SUBSTITUTION PERMISSIBLE _____ DO NOT SUBSTITUTE
DO NOT REFILL _____ SIGNATURE OF PRESCRIBER
REFILL _____ TIMES

Use separate form for each controlled substance prescription.
THEFT, UNAUTHORIZED POSSESSION AND/OR USE OF THIS FORM INCLUDING ALTERATIONS OR FORGERY, ARE CRIMES PUNISHABLE BY LAW