National Organization For Medicines

UNION FORMAT FOR A WHOLESALE DISTRIBUTION AUTHORISATION

Human medicinal products

1. Authorisation Number	:	69927
2. Name of Authorisation Holder	:	ACCESS PHARMA SA
3. Address(es) of Site(s)	:	14o KLM THESSALONIKI-N.MOUDANIA, THERMI-THESSALONIKI, 57001, Greece
4. Legally registered address of Authorisation Holder	:	14o KLM. THESSALONIKI-N.MOUDANIA, THERMI-THESSALONIKI, 57001, Greece
5. Scope of authorisation	:	ANNEX 1
6. Legal basis of authorisation	:	Art. 77(1) of Directive 2001/83/EC
7. Name of responsible officer of the competent authority of the member state granting the wholesale distribution authorisation	:	Confidential, Confidential
8. Signature	:	
9. Date	:	2024-07-03
10. Annexes attached	:	Annex 1 Scope of wholesale distribution authorisation Annex 2 (Optional) Address(es) of contract wholesale distribution sites and their authorisation number Annex 3 (Optional) Name(s) of responsible person(s) Annex 4 (Optional) Date of Inspection on which authorisation was granted Annex 5 (Optional) Additional provisions based on national requirements

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ANNEX 1

SCOPE OF WHOLESALE DISTRIBUTION AUTHORISATION

Name and address of the site: ACCESS PHARMA S.A
, 14o KLM THESSALONIKI-N.MOUDANIA, THERMI-THESSALONIKI, 57001, Greece

Human medicinal products

1. MEDICINAL PRODUCTS

1.1. with a Marketing Authorisation or registration in EEA country(s)

2. AUTHORISED WHOLESALE DISTRIBUTION OPERATIONS

2.1. Procurement
2.2. Holding
2.3. Supply
2.4. Export

3. MEDICINAL PRODUCTS WITH ADDITIONAL REQUIREMENTS

3.1. Narcotic or psychotropic products**
3.2.1. Temperatures between 2 to 8 °C

**Without prejudice to further authorisations as may be required according to national legislation.

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