COST OR PRICING DATA CERTIFICATION

Contract or Purchase Requisition No. $\underline{4400015328}$

Date:	<u> April 7, 2021</u>	
<u>Ge</u> (Co	<u>Hardin</u> (Individual's Name), hereby certify neral Manager(Title) for <u>Change Healthcontractor's Name)</u> and that I am authorized Contractor's Name). I hereby certify that t	are Pharmacy Solutions, Inc. ed to make this Certification on behalf of
	Established catalog prices (copies of the established catalog prices are enclosed	e applicable catalog pages showing the l).
	Established market prices (the amounts of contract prices offered to othe Contractor customers and the name of the Contractor customers are enclosed).	
	Statute or regulation (the citation for the statute or regulation and the date and short description of its provisions are enclosed).	
	Submitted cost or pricing data. To the extent that the contract price is based upon submitted cost or pricing data, I certify, on behalf of the Contractor, that to the best of my knowledge and belief, the cost or pricing data submitted is accurate, complete, and current as of the date specified above. The Contractor, understands that in addition to any other remedies or criminal penalties, the contract price shall be adjusted to exclude any significant sums by which the Commonwealth finds that the price was increased because the cost or pricing data furnished by the Contractor was inaccurate, incomplete, or not current as of the date specified above.	
I under Section	rstand that any misrepresentation in this C n 4904 of Title 18 P.C.S.A.	ertification shall be punishable under
(Signat	Ure of Certifying Officer)	<u>Dan Hardin</u> (Contractor's Name)
(Name	of Certifying Officer)	(Contractor's Address)
(Title of Certifying Officer)		(Contractor's Address)