Fill in this information to identify the case:					
Debtor	Orexigen Therapeutics, Inc.				
United States Ba	ankruptcy Court for the:	District of Delaware (State)			
Case number	18-10518				

Official Form 410

Proof of Claim 04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents**; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

P	Identify the Clair	n	
1.	Who is the current creditor?	ALMAC CLINICAL SERVICES, LLC Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor	
2.	Has this claim been acquired from someone else?	✓ No Yes. From whom?	
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? ALMAC CLINICAL SERVICES, LLC c/o Corporate and Legal Affairs 25 Fretz Road Souderton, PA 18964, USA Contact phone Contact email 001 215 660 8500 chris.diamond@almacgroup.com Uniform claim identifier for electronic payments in chapter 13 (if you use of	Where should payments to the creditor be sent? (if different) Contact phone Contact email
 4. 5. 	Does this claim amend one already filed? Do you know if anyone else has filed a proof of claim for this claim?	 ✓ No ✓ Yes. Claim number on court claims registry (if known) ✓ No ✓ Yes. Who made the earlier filing? 	Filed on

Official Form 410 Proof of Claim

Part 2:	Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the		☑ No
	debtor?	Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How much is the claim?	\$ 33,156.63 Does this amount include interest or other charges?
		✓ No
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8.	What is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
	claim?	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
		Limit disclosing information that is entitled to privacy, such as health care information.
		services performed
9.	Is all or part of the claim	■ No
	secured?	Yes. The claim is secured by a lien on property.
		Nature or property:
		Real estate: If the claim is secured by the debtor's principle residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> .
		Motor vehicle
		Other. Describe:
		Other. Describe.
		Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
		Value of property: \$
		Amount of the claim that is secured: \$
		Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amount should match the amount in line 7.)
		Amount necessary to cure any default as of the date of the petition: \$
		Annual Interest Rate (when case was filed)%
		Fixed
		Variable
10.	Is this claim based on a	☑ No
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.
11.	Is this claim subject to a	☑ No
	right of setoff?	Yes. Identify the property:

Official Form 410 **Proof of Claim**

12. Is all or part of the claim	✓ No		
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Ch	neck all that apply:	Amount entitled to priority
A claim may be partly priority and partly	☐ Dor	mestic support obligations (including alimony and child support) under J.S.C. § 507(a)(1)(A) or (a)(1)(B).	ę
nonpriority. For example, in some categories, the law limits the amount		to \$2,850* of deposits toward purchase, lease, or rental of property or vices for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$
entitled to priority.	☐ Wa	ges, salaries, or commissions (up to \$12,850*) earned within 180 s before the bankruptcy petition is filed or the debtor's business ends, chever is earlier. 11 U.S.C. § 507(a)(4).	\$
	☐ Tax	es or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$
	☐ Cor	ntributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$
	Oth	er. Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$
	* Amou	nts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun	n on or after the date of adjustment.
13. Is all or part of the claim pursuant to 11 U.S.C. § 503(b)(9)?	days be	dicate the amount of your claim arising from the value of any goods receifore the date of commencement of the above case, in which the goods nary course of such Debtor's business. Attach documentation supportin	have been sold to the Debtor in
Part 3: Sign Below			
The person completing this proof of claim must sign and date it. FRBP 9011(b). If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is. A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.	I am the tr I am a gua I understand the the amount of the lawe examine	reditor. reditor's attorney or authorized agent. reditor's attorney or authorized agent. Bankruptcy Rule 3004. reditor's arantor, or their authorized agent. Bankruptcy Rule 3005. reditan authorized signature on this <i>Proof of Claim</i> serves as an acknowled the claim, the creditor gave the debtor credit for any payments received to determine the information in this <i>Proof of Claim</i> and have reasonable belief that the penalty of perjury that the foregoing is true and correct.	ward the debt.
	/s/Michell Signature	e McClelland	
	Print the name	of the person who is completing and signing this claim:	
	Name	<u>Michelle McClelland</u> First name Middle name Last r	name
	Title	<u>Legal Counsel</u>	
	Company	Almac Clinical Services, LLC Identify the corporate servicer as the company if the authorized agent is a servicer	
	Address		
	Contact phone	Fmail	

Official Form 410 Proof of Claim

KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (888) 830-4646 | International (310) 751-2641

19-10518 - Orexigen Therapeutics, Inc. District:	Debtor:		
Creditor: ALMAC CLINICAL SERVICES, LLC clo Corporate and Legal Affairs 25 Fretz Road Based Claim: No Related Claim Filed By: Filing Party: Fax: Email: chris.diamond@almacgroup.com Other Names Used with Debtor: Basis of Claim: services performed Total Amount of Calim: No Has Pointy Claim: No Has Priority Claim: No Has Pected Claim: No Acquired Claim: No Arquired Claim: No Has Priority Claim: No Has Priority Claim: No Based on Lease: No Subalication of So3(b)(9): No Subspict to Right of Setoff: No Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Hite: Legal Counsel Company:	18-10518 - Orexigen Therapeutics, Inc.		
Creditor:	District:		
ALMAC CLINICAL SERVICES, LLC o'o Corporate and Legal Affairs 25 Fretz Road Souderton, PA, 18964 USA Phone: 011215 660 8500 Phone 2: Fax: Email: chris.diamond@almacgroup.com Other Names Used with Debtor: Basis of Claim: services performed No Acquired Claim: No Amends Claim: No Acquired Claim: No Acquired Claim: No Acquired Claim: No Acquired Claim: No Amends Claim: No Arearage Amount: Acquired Claim: Acquired Cla	District of Delaware		
C/o Corporate and Legal Affairs 25 Fretz Road	Creditor:	Has Supporting Docur	mentation:
25 Fretz Road	ALMAC CLINICAL SERVICES, LLC	Yes, supporting	documentation successfully uploaded
Has Related Claim:			
Souderton, PA, 18964 USA	25 Fretz Road		
USA		110001101101101101111111111111111111111	
Phone:			
O01 215 660 8500		Related Claim Filed By	/ :
Phone 2:	1	Filing Party:	
Fax:			
Email: chris.diamond@almacgroup.com Other Names Used with Debtor: Amends Claim: No Acquired Claim: No Basis of Claim: services performed Total Amount of Claim: 33,156.63 Has Priority Claim: No Has Secured Claim: No Submit of 503(b)(9): No Based on Lease: No Subject to Right of Setoff: No Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:	Phone 2:	Ordator	
Chris.diamond@almacgroup.com Other Names Used with Debtor: Amends Claim: No Acquired Claim: No Basis of Claim: services performed Total Amount of Claim: 33,156.63 Has Priority Claim: No Has Secured Claim: No Has Secured Claim: No Has Secured Claim: No Anount of 503(b)(9): Anount of 503(b)(9): Anount of 503(b)(9): Anount of Secured Amount: No Based on Lease: No Basis for Perfection: Subject to Right of Setoff: No Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:	Fax:		
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Basis of Claim:	chris.diamond@almacgroup.com		
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Has Priority Claim: No Has Secured Claim: No No Value of Property: Amount of 503(b)(9): Annual Interest Rate: No Based on Lease: No Basis for Perfection: Subject to Right of Setoff: No Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:	Total Amount of Claim:	Includes Interest or Ch	narges:
Has Secured Claim: No Value of Property: Amount of 503(b)(9): No Based on Lease: No Basis for Perfection: Subject to Right of Setoff: No Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:	33,156.63	No	
Has Secured Claim: No No Value of Property: Amount of 503(b)(9): No Based on Lease: No Based on Lease: No Basis for Perfection: Subject to Right of Setoff: No Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:	Has Priority Claim:	Priority Under:	
No Value of Property: Amount of 503(b)(9): No Annual Interest Rate: No Based on Lease: No Basis for Perfection: Subject to Right of Setoff: No Amount Unsecured: No Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:	No		
Amount of 503(b)(9): No Based on Lease: No Basis for Perfection: Subject to Right of Setoff: No Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:	Has Secured Claim:	Nature of Secured Am	ount:
No Based on Lease: No Basis for Perfection: Subject to Right of Setoff: No Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:	No	Value of Property:	
Based on Lease: No Basis for Perfection: Subject to Right of Setoff: No Amount Unsecured: No Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:		Annual Interest Rate:	
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No Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:	1	basis for Perfection:	
Submitted By: Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:		Amount Unsecured:	
Michelle McClelland on 30-May-2018 12:01:26 p.m. Eastern Time Title: Legal Counsel Company:	-		
Title: Legal Counsel Company:	1	m. Fastorn Timo	
Legal Counsel Company:		.iii. Lasteiii Iiiile	
Company:			
	1		



T: +1 (215) 660 8500 F: +1 (215) 660 8501 www.almacgroup.com

INVOICE

ATTN: ACCOUNTS PAYABLE OREXIGEN THERAPEUTICS, INC. 3344 N TORREY PINES CT SUITE 200 LAJOLLA CA - 92037

Invoice Number:

10072998

Invoice Date:

United States

31-DEC-2017

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37773

Protocol Reference(s):

NaltrexBuprop 1006

Almac Project Reference:

163791

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 140.63

Tax

US\$ 0.00

Invoice Total:

US\$ 140.63

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America.

T +1(215)660 8500 F +1(215)660 8501 Tax ID No: 23-285-7741



T: +1 (215) 660 8500 F: +1 (215) 660 8501 www.almacgroup.com acsbilling@almacgroup.com

Activity Type	Involce Summary Gustoner PO Number	Amount USS
Accountability & Destruction	NA	128.75
Storage	N/A	11.88
		140.63
	Customer PO S N/A	ummary 'US\$ 140.63 US\$ 140.63

Customer PO Number:

N/A

nvoice Line A Number	lmac Ref: Description		UnitiPrice E US\$	xtended Piles IUSS	ĩax
1	4.1 Fee for Ambient Storage in PA Estimates 1/4 pallet x 9 months x \$23.75/quarter-pallet per month Refer to Storage Report below	11.88	1.000	11.88	N
2	17.1 Transportation fees for shipment of Non-Hazardous goods from Almac to 3rd party destruction company in NC (per pallet) Assumes 1 pallet to be transported to a third-party destruction facility in NC Provided By Almac NC	1.00	120.000	120.00	N
3	18.1 Destruction of Non Hazardous goods by weight (lb) in NC Estimate only - per pound destroyed Provided By Almac NC	5.00	1.750	8.75	N
	Total C	ustomer PO No	ımber - N/A	140.63	

Net Sales Total:

US\$ 140.63

Tax

US\$ 0.00

Invoice Total:

US\$ 140.63

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Page

Vati Selling	Pitee Se 1.00	ार्ग्वा		Siorage				
Involce Oil	11.88					Total	11.88	INERS.
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nac Ref Desembition	4.1 Fee for Ambient Storage in PA			mad Site PA	immety?	orage Condition	Ambient	
S.			Į	X	S	ଅ	Ar	

11.88 N/A

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T +1(215)660 8500 F +1(215)660 8501 Tax ID No: 23-285-7741



T: +1 (215) 660 8500 F: +1 (215) 660 8501 www.almacgroup.com

INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10073015/

Invoice Date:

31-DEC-2017

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37852

Protocol Reference(s):

NaltrexBuprop Storage

Almac Project Reference:

165089

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 10,000.42

Tax

US\$ 0.00

Invoice Total:

US\$ 10,000.42

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments:
Almac Clinical Services LLC
Accounts Receivable
25 Fretz Road
Souderton
PA 18964
USA

Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America.

T +1(215)660 8500 F +1(215)660 8501 Tax ID No: 23-285-7741



T: +1 (215) 660 8500 F: +1 (215) 660 8501 www.almacgroup.com acsbilling@almacgroup.com

Activity Type	linvolce Summary Gustomerko Numbe	
Distribution Management	N/A	500.00
Project Management	N/A	562.50
Storage	N/A	8,937,92
		10,000.42

<u>Customer Po</u>	O Summary
N/A	US\$ 10,000.42
	US\$ 10,000.42

Customer PO Number:

N/A

Invoice Line A Number	lmac Ref Description		Unit(Price USS)	Extended Price USS	Tax
1	1.1 Fee for Ambient Storage in PA Refer to Storage Report below	8,605.42	1.000	8,605.42	N
2	2.1 Fee for Ambient Storage in NC Provided By Almac NC Refer to Storage Report below	332.50	1.000	332.50	N
3	3.1 Almac PA Hourly Project Management Fee Project Management work to be completed at Almac PA Refer to Billable Hours Report below	3.75	150.000	562.50	N
4	7.1 Distribution of Pallet under ambient conditions from Almac PA Assumes 6 pallet shipments from Almac PA Refer to Shipment Report below	1.00	500.000	500.00	N

Total Customer PO Number - N/A

10,000.42

Net Sales Total:

US\$ 10,000.42

Tax

US\$ 0.00

Invoice Total:

US\$ 10,000.42

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	nded Price	262.50	300.00	62,50
	Esta Salfac	2	(")	5
	Unit Selling Price	150.00	150.00	49846
	Invoice (euchtisy	1.75	2:00	357/5
	To bate	15-DEC-2017 PS Biliable Comm	15-DEC-2017 PS Billable Shipping	Totali E
Detail 🔭 💮	From Date	06-DEC-2017	06-DEC-2017	

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T+1(215)660 8500 F+1(215)660 8501 Tax ID No: 23-285-7741

it:Selling Extended Customer RolNumber * Price Selling/Price	500.00 N/A	500,000
maciReir Description	7.1 Distribution of Pallet under ambient conditions from Almac PA	

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Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T +1(215)660 8500 F +1(215)660 8501 Tax ID No: 23-285-7741

Invoice No: 10073015

Page 5 of 6

ilings * Extended Customer PONumber Price Selling Price	1.00 8,605.42 N/A	1.00 332.50 N/A	1.0tala
Invoice Qty FunitSe	8,605.42	332.50	
AlmaciRef Description	1.1 Fee for Ambient Storage in PA	2.1 Fee for Ambient Storage in NC	

Total	8605.42	8,605,42
Units Charged	90.5833	Total
:Base(Monthly/Rate per/Storage(ปกีเ≀	95.000	
Summary. Storage Condition	Ambient	

.lotal.	332.50	332.50
Units Charged	14.0000	Total
BaselMonthy/Rate per StoragelUnit	23.750	
Summary. Storage Condition	Ambient	

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T+1(215)660 8500 F+1(215)660 8501 Tax ID No: 23-285-7741

Invoice No: 10073015

Page 6 of 6

ALMAC



T: +1 (215) 660 8500 F: +1 (215) 660 8501 www.almacgroup.com

INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10073237

Invoice Date:

31-DEC-2017

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37771

Protocol Reference(s):

NaltrexBuprop 1003

Almac Project Reference:

163789

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 157.13

Tax

US\$ 0.00

Invoice Total:

US\$ 157.13

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America.

T +1(215)660 8500 F +1(215)660 8501 Tax ID No: 23-285-7741



T: +1 (215) 660 8500 F: +1 (215) 660 8501 www.almacgroup.com acsbilling@almacgroup.com

Activity Type	livoice Summary customer Po Numbers	Amount
Accountability & Destruction	N/A	125.25
Storage	N/A	31,88
		157.13
	Customer PO Sul N/A	mmary US\$ 157:13 US\$ 157:13

Customer PO Number:

N/A

nvolce Lline A Sumber -	imac Ref Description	Quantity	Unit Price E US\$	extended Price US\$	Vax
1	4.1 Fee for Ambient Storage in PA Estimates 1/4 pallet x 9 months x \$23.75/quarter-palle per month Refer to Storage Report below	11.88 t	1.000	11.88	N
2	16.1 Transportation fees for shipment of Non-Hazardous goods from Almac to 3rd party destruction company ir (per pallet) Assumes 1 pallet to be transported to a third-party destruction facility in NC Provided By Almac NC	1.00 NC	120.000	120.00	N
3	17.1 Destruction of Non Hazardous goods by weight (lb) in Estimate only - per pound destroyed Provided By Almac NC	NC 3.00	1.750	5.25	N
4	20.1 Non-Premium Storage Lot Surcharge in PA Added Per Exception - 01-DEC-2017 Refer to Storage Surcharges report below	20.00	1.000	20.00	N
	To	al Customer PO N	lumber - N/A	157.13	

Net Sales Total:

US\$ 157.13

Tax

US\$ 0.00

Invoice Total:

US\$ 157.13

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AlmaciRef. Descript	Description			Invoice	oice Otty Uh	ID Selling Price	Extended Selling Price	Custome
4.1	4.1 Fee for Ambient Storage in PA	orage in PA			11.88	1.00	11.88	11.88 N/A
						Total	11:88	
Almac Site	* PA					\$	Storage:Month	EC = 2017
Summary								
্ঠতান্ত্ৰভূতি উত	ndition	Base Monthly Rate.	<u> Units Charged </u>	Total				
Ambient		47.500	0.2500	11.88				
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ALMAC

Invoice No: 10073237

Gustomer/PO.Number	N/A	
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DEC = 2017	térliót 20.00 Totál:
Storage Month	S Monthly/Ra
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	Storage/Typ
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	Signature Signat
Almac Site	Storage Surcharge Lot Aging [Days] 365 - 729





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INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10073306

Invoice Date:

31-DEC-2017

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37772

Protocol Reference(s):

NaltrexBuprop 1005

Almac Project Reference:

163790

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 140.21

Tax

US\$ 0.00

Invoice Total:

US\$ 140.21

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America.
T+1(215)660 8500 F+1(215)660 8501 Tax ID No: 23-285-7741



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	Involce Summary	
Activity Type	Customer (PO Number)	Amount
Project Management	N/A	112.50
Storage	N/A	27.71
		140.21
	Note that the second	
	<u>Customer PO Sui</u> N/A	mmary U S\$ 140.21
		US\$ 140.21

Customer PO Number:

N/A

10 to 10 to 10	InitiPile Ex	(ended)Price	Tax
0.75	150.000	112.50	N
27.71	1.000	27.71	N
	Quantity 0.75	UnitPlace Ex Quantity USS 0.75 150.000	

Total Customer PO Number - N/A

140.21

Net Sales Total:

US\$ 140.21

Tax

US\$ 0.00

Invoice Total:

US\$ 140.21

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Almac Ref. Description Invoice	1.1 Almac PA Hourly Project Management Fee	

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Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America.

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Guston	N/A	Cipilanto I
Extended Selling Brice	27.71	27.70
Unit/Selling:	1.00	Total
Invoice	27.71	
AlmaciReta Description	4.1 Fee for Ambient Storage in PA	

Storage Month DEC - 2017

	MonthlyRate Units Charged Total:	47.500 0.5833 27.71	Total
Summary.	Storage condition Basell Basell	Ambient	

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T+1(215)660 8500 F +1(215)660 8501 Tax ID No: 23-285-7741

Invoice No: 10073306

LMAC

Page 5 of 5





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INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10075578

Invoice Date:

31-JAN-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37852

Protocol Reference(s):

NaltrexBuprop Storage

Almac Project Reference:

165089

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 9,500.42

Tax

US\$ 0.00

Invoice Total:

US\$ 9,500.42

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments:
Almac Clinical Services LLC
Accounts Receivable
25 Fretz Road
Souderton
PA 18964
USA

Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America.

T +1(215)660 8500 F +1(215)660 8501 Tax ID No: 23-285-7741



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Project Management	Customer PolNumber N/A	USS .
Storage		562.50
Notage	, N/A	
		9,500.42

Customer PO Number:

N/A

	linac Ref Description			⊒xtended/Price US\$	Tax
1	1.1 Fee for Ambient Storage in PA Refer to Storage Report below	8,605.42	1.000	8,605.42	N
2	2.1 Fee for Ambient Storage in NC Provided By Almac NC Refer to Storage Report below	332.50	1.000	332.50	N
3	3.1 Almac PA Hourly Project Management Fee Project Management work to be completed at Almac PA Refer to Billable Hours Report below	3.75	150.000	562.50	N

Total Customer PO Number - N/A

9,500.42

Net Sales Total:

US\$ 9,500.42

Tax

US\$ 0.00

Invoice Total:

US\$ 9,500.42

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ale Refi Description	3.1 Almac PA Hourly Project Management Fee 3.75	

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Detail? From Date	01-JAN-2018	07.00	01-JAN-2018	01-JAN-2018	O O O O O O O O O O O O O O O O O O O		

Almac Cilnical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T +1(215)660 8500 F +1(215)660 8501 Tax ID No: 23-285-7741

Invoice No: 10075578

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	Unitsicharged	90.5833	Tota
	Ease Monthly Rate per Storage Unit	95,000	
Summany*	Storage:Condition	Ambient	

iorage condition Base Mo	thly Rate Unitsi	Charged	Total
Ambient	23.750	14.0000	332.50

Invoice No: 10075578



T: +1 (215) 660 8500 F: +1 (215) 660 8501 www.almacgroup.com

INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10075603

Invoice Date:

31-JAN-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37773

Protocol Reference(s):

NaitrexBuprop 1006

Almac Project Reference:

163791

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 35.83

Tax

US\$ 0.00

Invoice Total:

US\$ 35.83

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com

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T: +1 (215) 660 8500 F: +1 (215) 660 8501 www.almacgroup.com acsbilling@almacgroup.com

Activity Type	linvoice Summary Customer (PO Number 1997) 1997 (1997)	Amount US\$
Storage	N/A	35.83
	-	35.83
	Customer PO Summary N/A	US\$ 35.83 US\$ 35.83

Customer PO Number:

N/A

umber Line: Al	inac Ref - Description		Unit Price Ext		Tax
1	4.1 Fee for Ambient Storage in PA Estimates 1/4 pallet x 9 months x \$23.75/quarter-pallet per month Refer to Storage Report below	15.83	1.000	15.83	N
2	21.1 Non-Premium Storage Lot Surcharge in PA Non-premium surcharge for material stored at Almac PA Refer to Storage Surcharges report below	20.00	1.000	20.00	N
	Total C	ustomer PO No	ımber - N/A	35.83	

Net Sales Total:

US\$ 35.83

Tax

US\$ 0.00

Invoice Total:

US\$ 35.83

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InvoicetOry Unit Selling Extended Customer Pollumber Price Selling Frice Selling Frice 15.83 1.00 15.83 N/A	Storage Month JAN - 2018	arged Trofall 0.3333 15.83 Trofall 583
Almac Ref Description 4.1 Fee for Ambient Storage in PA	Almaci Site PA	Storage condition Base Monthly Rate Units Cha per Storage Unit 47.500 0

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T+1(215)660 8500 F+1(215)660 8500 F+1(215)660 8501 Tax ID No: 23-285-7741

Storage Sureharges Repon

Gustomer PO Number	N/A	
Extended SellingiPrice	20.00	20100
Uniti Selling Price	1.00	Total
Involce ©ty	20.00	
Almacinet Description	21.1 Non-Premium Storage Lot Surcharge in PA	

/Almac/Site

	Lot	20.00	(Fale	(a) 20,000
	o OffiLots Monthly Rate/	1 20	<u>01</u> 0	Grand To
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	ndition	Non Premium		
arges	Storage: Storage:Co	Ambient		
Storage Surch	Lot/Aging [Da	365 - 729		

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T +1(215)660 8500 F +1(215)660 8500 T ax ID No: 23-285-7741

Invoice No: 10075603

Page 5 of 5





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INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10075769

Invoice Date:

31-JAN-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37771

Protocol Reference(s):

NaltrexBuprop 1003

Almac Project Reference:

163789

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 35.83

Tax

US\$ 0.00

Invoice Total:

US\$ 35.83

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com



	Invoice Summary	
Addivity Type	Gustomer PO Number	Amount
Storage	N/A	US\$
	_	35.83
·		The 4-degree of infragrees The Constraint of the 18
	<u>Customer PO Summary</u> N/A	US\$ 35.83
		US\$ 35.83

N/A

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1	4.1 Fee for Ambient Storage in PA Estimates 1/4 pallet x 9 months x \$23.75/quarter-paper month Refer to Storage Report below	15.83 allet	1.000	15.83	N
2	20.1 Non-Premium Storage Lot Surcharge in PA Added Per Exception - 01-DEC-2017 Refer to Storage Surcharges report below	20.00	1.000	20.00	N
		Total Customer PO Nur	nber - N/A	35.83	

Net Sales Total:

US\$ 35.83

Tax

US\$ 0.00

Invoice Total:

US\$ 35.83

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Base Wonthly Rate per.Storage Unite	47.500
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Total	15.83	(588)
Units!Gharged	0.3333	Total
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Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T+1(215)660 8500 F+1(215)660 8501 Tax ID No: 23-285-7741

Invoice No: 10075769

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Minac Ref Description	2004 Non-Dominin Strong 1 of Circhords in DA	ZU. INUIT-FIEITIUTH SICH SUIT STATE OF THE	

Storage Month UAN - 2018
Aimaci Site

	20.00	Total: 20:00 and Total: 20:00
No Of Lots World		
Storage Type * * **	Non Premium	
Storage Condition	Ambient	
Storage Surchargess [Pot/Aging/[Days]]	365 - 729	2001, 20

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T +1(215)660 8501 Tax ID No: 23-285-7741

Invoice No: 10075769





T: +1 (215) 660 8500 F: +1 (215) 660 8501 www.almacgroup.com

INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10075770

Invoice Date:

31-JAN-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37772

Protocol Reference(s):

NaltrexBuprop 1005

Almac Project Reference:

163790

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 23.75

Tax

US\$ 0.00

Invoice Total:

US\$ 23.75

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments:
Almac Clinical Services LLC
Accounts Receivable
25 Fretz Road
Souderton
PA 18964
USA

Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com



Addivityткура	Involce-Summary	
	GUSTOME/120 NUMBER	Ameuni USB
Storage	N/A	23.75
	<u>-</u>	23.75

. <u>C</u> L N/A	istomer PO Summary	US\$ 23,75
y suberrul aldu.		US\$ 23,75

N/A

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4.1 Fee for Ambient Storage in PA Estimates 1/4 pallet x 18 months x \$23.75/quarter-pallet per month Refer to Storage Report below	23.75	1.000	23.75	N

Total Customer PO Number - N/A

23.75

Net Sales Total:

US\$ 23.75

Tay

US\$ 0.00

Invoice Total:

US\$ 23.75

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ng Extended Eustomer Po Number	1.00 23.75 N/A	27.36
Invoice Ety Unit Sellin Pr	23.75	- P
Almac Ref Description	4.1 Fee for Ambient Storage in PA	

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	Total	23.75	28.75
	Units/Gharged	0005'0	मृज्या
	Bese Monthly Rate per Storage Unit	47.500	D. Gallander
Summany	Starrge Condition	Ambient	



T: +1 (215) 660 8500 F: +1 (215) 660 8501 www.almacgroup.com

INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10076297

Invoice Date:

28-FEB-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37852

Protocol Reference(s):

NaltrexBuprop Storage

Almac Project Reference:

165089

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 9,827.92

Tax

US\$ 0.00

Invoice Total:

US\$ 9,827.92

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com



	Involee Summany	
e Activity Type	Gustomer FO Klumber	Amount
Project Management	N/A	937.50
Storage	N/A	8,890.42
		9,827.92
	Customer PO Summary N/A	US\$ 9,827.92 US\$ 9,827.92

N/A

	llmec Ref Description	Quantity	Unff(Price) (USS)	Batended Pillee USS	Tax
1	1.1 Fee for Ambient Storage in PA Refer to Storage Report below	8,557.92	1.000	8,557.92	N
2	2.1 Fee for Ambient Storage in NC Provided By Almac NC Refer to Storage Report below	332.50	1.000	332.50	N
3	3.1 Almac PA Hourly Project Management Fee Project Management work to be completed at Almac PA Refer to Billable Hours Report below	6.25	150.000	937.50	N

Total Customer PO Number - N/A

9,827.92

Net Sales Total:

US\$ 9,827.92

Tax

US\$ 0.00

Invoice Total:

4 US\$ 9,827.92

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GustomerP© Number	N/A	
Illing Extended Pitee Selling Pite	150.00 937.50	Total:
Involce eigy Unit Se	6.25	
Almate Refr Description	3.1 Almac PA Hourly Project Management Fee	

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T +1(215)660 8501 Tax ID No: 23-285-7741

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ිගේ Unit-Selling (Excanded Gustomer/PO)Number - Pides (Selling)Pries (8,557.92 N/A	332.50 1.00 332.50 N/A	1869(4 <u>2)</u>
Almac Ref Description	11 Fee for Ambient Storage in PA 8,5	CNII	3 5

Totel	8557.92	557,82
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Base Monthly/Rate operStorage Unit	95.000	
Summaryii Storrage Condition	Ambient	

जिल्ला	332.50	62,50
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Base Monthly Rate Per Storage Unit	23.750	
Summany Storege Condition	Ambient	

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Invoice No: 10076297

Page 5 of 5



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INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10076763

Invoice Date:

28-FEB-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37771

Protocol Reference(s):

NaitrexBuprop 1003

Almac Project Reference:

163789

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 43.75

Tax

US\$ 0.00

Invoice Total:

US\$ 43.75

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments:
Almac Clinical Services LLC
Accounts Receivable
25 Fretz Road
Souderton
PA 18964
USA

Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com



A Control of the Cont	linvotee Summary	and the Parish Configuration
ActivityType	Customer PO Number	Amount
Storage	N/A	43.75
	- -	43.75
	Customer PO Summary N/A	US\$ 43.75 US\$ 43.75

N/A

Involce Lilite Al Number I		Quantity		ExfendedPrice USS	Tax
1	4.1 Fee for Ambient Storage in PA Estimates 1/4 pallet x 9 months x \$23.75/quarter-pa per month Refer to Storage Report below	23.75 Illet	1.000	23.75	N
2	20.1 Non-Premium Storage Lot Surcharge in PA Added Per Exception - 01-DEC-2017 Refer to Storage Surcharges report below	20.00	1.000	20.00	N
		otal Customer PO Nu	ımber - N/A	43.75	

Net Sales Total:

US\$ 43.75

Tax

US\$ 0.00

Invoice Total:

US\$ 43.75

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Vini Seimg Page	1 00	20:	Total	
Invotee @ly	23.75	2		
Mimaci Ref. Description	4.1 Fee for Ambient Storage in PA			

Summany

Total	23.75	100 TES
Units/Charged	0.2500	Esci.
Base Monthly Rate	95.000	
Storege Condition	Ambient	

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T +1(215)660 8501 Tax ID No: 23-285-7741

Invoice No: 10076763

Page 4 of 5

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NO Of Lots	-
Storagek Type	Non Premium
Storage Conditions	Ambient
Storage Surcharges.	365 - 729

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INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10076764

Invoice Date:

28-FEB-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37772

Protocol Reference(s):

NaltrexBuprop 1005

Almac Project Reference:

163790

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 35.63

Tax

US\$ 0.00

Invoice Total:

US\$ 35.63

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

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Activity πγρα	Invoice Summary Gustamer/PO/Number	Атоллі
Storage	N/A	
	_	35.63
	Customer PO Summary N/A	US\$ 35.63 US\$ 35.63

N/A

invoice Line Almac Number Ref Description	ال Quantity	nit Price (Bx(t (USS)	ended Pideo (USS) Tlax
4.1 Fee for Ambient Storage in PA Estimates 1/4 pallet x 18 months x \$23.75/quarter-pallet per month Refer to Storage Report below	35.63	1.000	35.63 N

Total Customer PO Number - N/A

35.63

Net Sales Total:

US\$ 35.63

Tax

US\$ 0.00

Invoice Total:

US\$ 35!63

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Extended @ustomer.Po.Number Selling:Pares	35.63 N/A	35,03
Unit Selling Price	1.00	Total:
Involce: Qty	35.63	
Almpe Ref Desemblion	4.1 Fee for Ambient Storage in PA	

<u>Ummany.</u> torage Condition	Base Monthly Rate per Storage Unit	
Ambient	47.500	0.2500 11.88
Ambient	95.000	0.2500 23.75
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INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10076765

Invoice Date:

28-FEB-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37773

Protocol Reference(s):

NaltrexBuprop 1006

Almac Project Reference:

163791

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 43.75

Tax

US\$ 0.00

Invoice Total:

US\$ 43.75

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Gheck Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com



	Invoice Summany	
. Activity Type	Gustomer RO Number	Арочи
Storage	N/A	US\$ 43.75
	_	43.75
	<u>Customer PO Summary</u>	
	N/A	US\$ 43.75

N/A

Line: A	llmae Ref Description	Ų Quantiliy	ili Pilee - 国な		
1	4.1 Fee for Ambient Storage in PA Estimates 1/4 pallet x 9 months x \$23.75/quarter-pallet per month Refer to Storage Report below	23.75	1.000	23.75	N
2	21.1 Non-Premium Storage Lot Surcharge in PA Non-premium surcharge for material stored at Almac PA Refer to Storage Surcharges report below	20.00	1.000	20.00	N
<u></u>	Total C	ustomer PO Nun	nber - N/A	43.75	

Net Sales Total:

US\$ 43.75

Tax

US\$ 0.00

Invoice Total:

US\$ 43.75

	ir R© Number		
	Gustom	N/A	
	Extended Selling Price	23.75	28,75
	जुनार डिगोतिह्य निवेहन	1.00	ालहा
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	nn.	ient Storage in PA	
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	mace R	4	

Total	23.75	92 7K
Units/Charged	0.2500	Tatal
Base Monthly Rate per Storage Unit	95.000	
Surangan Storego Condition	Ambient	

Storage Surcharges Report

Invoice Opy Unit Selling Extended Gustomer PO Number Price Sellings Price	PA	20000 September 1995
Scription	Non-Premium Storage Lot Surcharde in PA	
Almaoli	C	

Signage: Montin | 1350-20119

nthiy Rete/Lot)	20.00	20:00 - 20:00
No Orteges Twe	1	
Storage Type	Non Premium	
Storage Condition	Ambient	
Storage Surcharges. Lott Aging [Days]	365 - 729	

Invoice No: 10076765



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INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10077830

Invoice Date:

31-MAR-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37771

Protocol Reference(s):

NaltrexBuprop 1003

Almac Project Reference:

163789

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 43.75

Tax

US\$ 0.00

Invoice Total:

US\$ 43.75

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com



Activity Type	Involce Summary Gustome / PO Number	Amount
Storage	N/A	43.75
		43.75
	Customer PO Summary N/A	US \$ 43.75
		US\$ 43.75

N/A

invoice Teine A Number 1	Imac Ref Description 4.1 Fee for Ambient Storage in PA Estimates 1/4 pallet x 9 months x \$23,75/quarter-p per month	ับก Quantity 23.75	jit Price - Ext	US\$ T	ax N
2	Refer to Storage Report below 20.1 Non-Premium Storage Lot Surcharge in PA Added Per Exception - 01-DEC-2017 Refer to Storage Surcharges report below	20.00	1.000	20.00	N
		Total Customer PO Num	ber - N/A	43.75	

Net Sales Total:

US\$ 43.75

Tax

US\$ 0.00

Invoice Total:

US\$ 43.75

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AlmaciRef	Description	Invoice Oty	Unit Selling Price	Extended# (eustor	ner PO Number
4.1	Fee for Ambient Storage in PA	23.75	1.00	23.75 N/A	
			Total	197.00	

Almae Site

	Totall	23.75	23.75
	Units Charged	0.2500	Total
	Base Monthly Rate per Storage Unit	95.000	
Summany	Storege Condition	Ambient	

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T +1(215)660 8500 F +1(215)660 8500 F +1(215)660 8501 Tax ID No: 23-285-7741

Storace Surcharges Report

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Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T +1(215)660 8500 F +1(215)660 8501 Tax ID No: 23-285-7741

ALMAD



T: +1 (215) 660 8500 F: +1 (215) 660 8501 www.almacgroup.com

INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10077831

Invoice Date:

31-MAR-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37772

Protocol Reference(s):

NaltrexBuprop 1005

Almac Project Reference:

163790

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 35.63

Tax

US\$ 0.00

Invoice Total:

US\$ 35.63

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com

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US\$ 35.63

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torage	- N/A	US 35
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N/A

involce Line Almac Number Ref Description	Quantity	# # # # WELL AND A SECOND SECO	l∋xiended¦Price USS	Tax
4.1 Fee for Ambient Storage in PA Estimates 1/4 pallet x 18 months x \$23.75/quarter-pallet per month Refer to Storage Report below	35.63	1.000	35.63	N

Total Customer PO Number - N/A

35.63

Net Sales Total:

US\$ 35.63

Tax

US\$ 0.00

Invoice Total:

US\$ 35.63

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ndsd Gustomer Po Number Pites	35.63 N/A	-	35,65
7 Vinit-Selling Selling	1.00	22:-	: নুন্দ্রা
Invoice Gry	in PA	THE SAME AND ASSESSED TO SECURIOR STORY OF SAME ASSESSED ASSESSED ASSESSED.	
Almeric Ref. Dessertation	4.1 Fee for Ambient Storage		

Summany.		
Storage Condition	Base Monthly Rate per Storage Unit	* Units charge
Ambient	47.500	0.250
Ambient	95.000	0.250
		Tota

11.88

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INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10077832

Invoice Date:

31-MAR-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37773

Protocol Reference(s):

NaltrexBuprop 1006

Almac Project Reference:

163791

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 43.75

Tax

US\$ 0.00

Invoice Total:

US\$ 43.75

Remittance Details:

Wire Payments:
Bank of America
Account Name: Almac Clinical Services LLC
Account No.: 383006113731
Swift Code: BOFAUS3N
FEDWIRE ABA No.:026009593
ACH/EFT ABA No.: 031202084

Check Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com

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Activity Type	linvolice Summary (Customer PO≀Number	Amornii USS
Storage	N/A	43.75
		43.75
	Customer PO Summary N/A	US\$ 43.75 US\$ 43.75

N/A

THE COLUMN TWO IS NOT THE OWNER.	linec Rei Description	(U) Quantiliy	ii(tRilbe Ekt US\$	ended Price US\$
1	4.1 Fee for Ambient Storage in PA Estimates 1/4 pallet x 9 months x \$23.75/quarter-pallet per month Refer to Storage Report below	23.75	1.000	23.75 N
2	21.1 Non-Premium Storage Lot Surcharge in PA Non-premium surcharge for material stored at Almac PA Refer to Storage Surcharges report below	20.00	1.000	20.00 N
	Total C	ustomer PO Num	ıber - N/A	43.75

Net Sales Total:

US\$ 43.75

Tax

US\$ 0.00

Invoice Total:

US\$ 43.75

Sellingi Bates Customer Pol Number 23.75 N/A			
Gustome N/A	- 20/18		
Extended Ellingi Erice 23.75	Storage Months #MAR-2018		
Selling: Firee S. 1.00 Total	Storage		
Involce @by @		10tal 23.75 23.75	
		00	
		Units Charged 0.2500 Total	
		forage Unit	
torage in PA		Base Monthly R per Storagel	
Almac/Ref Description	V		
nacker Des	Almae Site FA	natov. 190 Condition 11	
Almac	Almac	Storage (Storage (Ambient	

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Storage Surcharges Report

AlmaciRef	Description	Invoice Qty	UnitiSelling Price	Extended Selling Price	Gustomer Po Number
21.1	21.1 Non-Premium Storage Lot Surcharge in PA	70.00 J	00.1	20.02	V/P
	A DESCRIPTION OF THE PROPERTY		Total	20,000	

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		CREATE CHINES

Almac Clinical Services LLC is a member of the Almac Group. Reg Office: 25 Fretz Road, Souderton, PA 18964, United States Of America. T +1(215)660 8500 F +1(215)660 8501 Tax ID No: 23-285-7741

Invoice No: 10077832

Page 5 of 5



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INVOICE

ATTN: ACCOUNTS PAYABLE
OREXIGEN THERAPEUTICS, INC.
3344 N TORREY PINES CT
SUITE 200
LAJOLLA
CA - 92037
United States

Invoice Number:

10078114

Invoice Date:

31-MAR-2018

Payment Terms:

Net Due in 30 Days

Notes:

N/A

Quote Number:

37852

Protocol Reference(s):

NaltrexBuprop Storage

Almac Project Reference:

165089

Customer Contract Ref:

N/A

Customer PO Number(s):

N/A

Net Sales Total:

US\$ 8,937.92

Tax

US\$ 0.00

Invoice Total:

US\$ 8,937.92

Remittance Details:

Wire Payments: Bank of America

Account Name: Almac Clinical Services LLC

Account No.: 383006113731 Swift Code: BOFAUS3N FEDWIRE ABA No.:026009593 ACH/EFT ABA No.: 031202084

Check Payments: Almac Clinical Services LLC Accounts Receivable 25 Fretz Road Souderton PA 18964 USA Queries? If you have a query relating to this invoice please email;

acsbilling@almacgroup.com

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AetivityType	Involce Summany Gristomer Po Number	Amount
Storage	N/A	
	Customer PO Summary	
	N/A	US\$ 8,937,92 US\$ 8,937,92

N/A

	dinac iRef Description	الالا Quantity U		exterioled Prioder US\$	Tax
1	1.1 Fee for Ambient Storage in PA Refer to Storage Report below	8,605.42	1.000	8,605.42	N
2	Fee for Ambient Storage in NC Provided By Almac NC Refer to Storage Report below	332.50	1.000	332.50	N
		Total Customer PO Numb	er - N/A	8,937.92	

Net Sales Total:

US\$ 8,937.92

10

US\$ 0.00

Invoice Total:

US\$,8,937.92

Gustomer PO Number	N/A	A/N	
Selling Pates	8,605.42	332.50	8,937,92
Uhiti Selling Price	1.00	1.00	<u>। जिल्ह</u> ा
Invoice @iy	8,605.42	332.50	
Almac Refi Description	1.1 Fee for Ambient Storage in PA	2.1 Fee for Ambient Storage in NC	

age Condition Base Mo	ntifily Rate torage Diniti	nits Charged	Total
ent	95.000	90.5833	8605 42

	Total	332.50	382,50
	Control Charged	14.0000	Total
	BaselMonthly/Rate	23.750	
Summary:	Storage Condition	Ambient	

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Page 4 of 4

ment of A	Account	OREXIGEN THERAPEUTICS, INC. Statement of Account as of 29May2018	The second secon	•
osl	OS Number P	Protocol Number	\$ Amount Outstanding	Comments
37	37773 Naltr	NaltrexBuprop 1006	\$ 140.63	Pre-Petition
378	37852 Naltr	NaltrexBuprop Storage	\$ 10,000.42	Pre-Petition
37771		NaltrexBuprop 1003	\$ 157.13	Pre-Petition
37772		NaltrexBuprop 1005	\$ 140.21	Pre-Petition
37852		NaltrexBuprop Storage	\$ 9,500.42	Pre-Petition
37773		NaltrexBuprop 1006	\$ 35.83	Pre-Petition
37771		NaltrexBuprop 1003	\$ 35.83	Pre-Petition
37772		NaltrexBuprop 1005	\$ 23.75	Pre-Petition
37852		NaltrexBuprop Storage	\$ 9,827.92	Pre-Petition
37771		NaltrexBuprop 1003	\$ 43.75	Pre-Petition
37772		NaltrexBuprop 1005	\$ 35.63	Pre-Petition
37773		NaitrexBuprop 1006	\$ 43.75	Pre-Petition
37771		NaltrexBuprop 1003	\$ 15.31	Balance due before 13Mar2018
37772		NaltrexBuprop 1005	\$ 12.47	Balance due before 13Mar2018
37773		NaltrexBuprop 1006	\$ 15.31	Balance due before 13Mar2018
37852		NaltrexBuprop Storage	\$ 3,128.27	Balance due before 13Mar2018
			\$ 33,156.63	