

Exhibit A

UNITED STATES BANKRUPTCY COURT District of Delaware		PROOF OF CLAIM
Name of Debtor: GRACEWAY PHARMACEUTICALS, LLC		Case Number: 11-13036
<i>NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.</i>		
Name of Creditor (the person or other entity to whom the debtor owes money or property): 3M Company		☐ Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____
Name and address where notices should be sent: Eric A. Komorowski, Financial Risk Analyst 3M Center, 224-5N-41 St. Paul, MN 55144-1000		
Telephone number: (651) 733-8325		
Name and address where payment should be sent (if different from above): Eric A. Komorowski, Financial Risk Analyst 3M Center, 224-5N-41 St. Paul, MN 55144-1000		☐ Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. ☐ Check this box if you are the debtor or trustee in this case.
Telephone number: (651) 733-8325		
1. Amount of Claim as of Date Case Filed: \$ <u>5,568,098.06</u> If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. ☐ Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim. ☐ Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). ☐ Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier – 11 U.S.C. § 507 (a)(4). ☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5). ☐ Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7). ☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8). ☒ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(2). Amount entitled to priority: \$ <u>930,644.54</u> *Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
2. Basis for Claim: <u>goods sold</u> (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: <u>8050</u> 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other Describe: Value of Property: \$ _____ Annual Interest Rate _____ % Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____		
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.		
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain:		
Date: 11/09/2011		FOR COURT USE ONLY
Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. Alan E. Brown, Esq., Special Counsel to 3M		

Customer Name	Customer ID	Item	Accounting Date	Due	Orig Item Amt	Item Balance	PO	Bill of Lading
PRODUCT INVOICES								
GRACEWAY PHARMACEUTICALS	GC18050	KG21747	8/31/2011	9/30/2011	\$267,632.64	\$267,632.64	4500009525	7N 472905
GRACEWAY PHARMACEUTICALS	GC18050	KG22234	9/2/2011	10/3/2011	\$20,974.39	\$20,974.39	R&D HELIOS - PUMPS	
GRACEWAY PHARMACEUTICALS	GC18050	KG22235	9/2/2011	10/3/2011	\$10,236.68	\$10,236.68	R&D HELIOS - SACHET	
GRACEWAY PHARMACEUTICALS	GC18050	KG22236	9/2/2011	10/3/2011	\$751.10	\$751.10	R&D HELIOS - TUBES	
GRACEWAY PHARMACEUTICALS	GC18050	KG21833	9/19/2011	10/19/2011	\$136,673.28	\$136,673.28	4500009524	7N 473056
GRACEWAY PHARMACEUTICALS	GC18050	KG21505	9/27/2011	10/27/2011	\$140,400.00	\$140,400.00	4500008853	7N 473141
GRACEWAY PHARMACEUTICALS	GC18050	KG21748	9/27/2011	10/27/2011	\$180,835.20	\$180,835.20	4500009565	7N 473141
GRACEWAY PHARMACEUTICALS	GC18050	KG21749	9/27/2011	10/27/2011	\$161,697.60	\$161,697.60	4500010096	7N 473141
SUPPLY AGREEMENT MINIMUM ORDER REQUIREMENTS					SUBTOTAL	\$919,200.89		
GRACEWAY PHARMACEUTICALS	GC18050	NT17387	9/28/2011	10/28/2011	\$4,297,738.00	\$4,297,738.00	2011 MAP	
					SUBTOTAL	\$4,297,738.00		

3M SINGAPORE (invoiced in GBP, converted US\$1.60/GBP)

PRODUCT INVOICES								
GRACEWAY PHARMACEUTICALS		TZ10002183	8/30/2011		£25,075.44	\$40,120.70		
GRACEWAY PHARMACEUTICALS		TZ10002283	9/16/2011		£39,869.28	\$63,790.85		
GRACEWAY PHARMACEUTICALS		TZ10002352	9/27/2011		£89,897.76	\$143,836.42		
GRACEWAY PHARMACEUTICALS		TZ10002358	9/28/2011		£15,606.00	\$24,969.60		
GRACEWAY PHARMACEUTICALS		TZ10002361	9/28/2011		£15,762.00	\$25,219.20		
GRACEWAY PHARMACEUTICALS		TZ10002363	9/28/2011		£33,264.00	\$53,222.40		
					SUBTOTAL	\$351,159.17		
					TOTAL	\$5,568,098.06		

Case No.:	11-13036
District:	District of Delaware

Petition Date	9/29/2011
Administrative Claim Date:	9/9/2011

Total Proof of Claim:	\$5,568,098.06
\$503(b)(9) Admin Claim:	\$930,644.54

3M Invoice

PAGE 1 OF 1
 DIRECT INQUIRIES TO:
 CUSTOMER SERVICE DEPT.
 375-3E-10
 ST PAUL MN 55144-1000

PURCHASE ORDER..4500009525
 ** ELECTRONIC EIPP INVOICE **
 ORDER DATE 04/01/2011
 SHIP DATE.....08/31/2011

INVOICE NO..... KG21747
 TYPE..... ORIGINAL
 DATE..... 08/31/2011
 TERMS OF SALE
 NET 30 DAYS
 TERMS DATE.....08/31/2011
 SALES REP..... V4H20-6

KATHY KAREL
 PHONE NO...651-736-6021
 FAX NO....651-737-5265

PARTIAL ORDER..... NO

ACCOUNT NO.
 CHARGE TO: GC18050
 SHIP TO: GC17854

KG21747

GRACEWAY PHARMACEUTICALS
 C/O LEITNER PHARMACEUTIC
 881 MOUNTAIN VW DR
 PINEY FLATS TN 37686-4913

GRACEWAY PHARMACEUTICALS
 INC ATTN ACCOUNT PAYABLE
 340 MLK BLVD
 BRISTOL TN 37620-4081

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
V 52272	EACH	30089030202 MINITRAN .2MG/HR. GW 30'S B33203 LOT NUMBER(S) 110376	P 5.12	267,632.64
*** SHPD 08/31 FROM-PHARM; NRTHRID VIA-XXXX B/L-7N 472905 6,796-LBS 1,089-PCS				

TOTAL MUST BE RECEIVED BY: 09/30/2011 INVOICE TOTAL 267,632.64

Please see reverse side for terms and conditions of sale and address change form.

10089175 708 21 490/00 / 08/31/11 CrBr:CM OrdWr:KG InvBr:RQ AdmCd:KG
 54 6098

DETACH AND RETURN WITH PAYMENT

REMIT PAYMENT TO
 3M
 2807 PAYSHERE CIR
 CHICAGO IL 60674-0000

INVOICE NO..... KG21747
 INVOICE DATE..... 08/31/2011
 TERMS DATE..... 08/31/2011

GC18050
 GRACEWAY PHARMACEUTICALS
 INC ATTN ACCOUNT PAYABLE
 340 MLK BLVD
 BRISTOL TN 37620-4081

TOTAL MUST BE RECEIVED BY: 09/30/2011
 INVOICE TOTAL 267,632.64

AMOUNT ENCLOSED
 KG21747

3M Invoice

PAGE 1 OF 1

DIRECT INQUIRIES TO:
CUSTOMER SERVICE DEPT.
375-3E-10
ST PAUL MN

55144-1000

PURCHASE ORDER..R&D HELIOS - PUMPS

** ELECTRONIC EIPP INVOICE **
ORDER DATE 09/02/2011
SHIP DATE 09/02/2011
INVOICE NO..... KG22234
TYPE..... ORIGINAL
DATE..... 09/02/2011
TERMS OF SALE
NET 30 DAYS
TERMS DATE..... 09/02/2011
SALES REP..... V4H20-6

KATHY KAREL
PHONE NO...651-736-6021
FAX NO...651-737-5265

PARTIAL ORDER..... NO

ACCOUNT NO.
CHARGE TO: GC18050

KG22234

GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

QUANTITY UNIT DESCRIPTION UNIT PRICE TOTAL AMOUNT

SEE LETTER DATED 9/2/11 RE PUMP
S EFFORTS
V 1 EACH Imiquimod Programs P 20974.39 20,974.39

*** SHPD 09/02 FROM-MISC :MAPLEWOOD VIA-
*** B/L -
*** -LBS -PCS

TOTAL MUST BE RECEIVED BY: 10/03/2011 INVOICE TOTAL 20,974.39

Please see reverse side for terms and conditions of sale and address change form.

10164663 709 21 1 / / 09/02/11 CrBr:CM OrdWr:KG InvBr:ZZL AdmCd:KG
54 6098

DETACH AND RETURN WITH PAYMENT

GC18050
GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

REMIT PAYMENT TO
3M
2807 PAYSHERE CIR
CHICAGO IL 60674-0000

INVOICE NO..... KG22234
INVOICE DATE..... 09/02/2011
TERMS DATE..... 09/02/2011

TOTAL MUST BE RECEIVED BY: 10/03/2011
INVOICE TOTAL 20,974.39

AMOUNT ENCLOSED

KG22234

3M Invoice

PAGE 1 OF 1
DIRECT INQUIRIES TO:
CUSTOMER SERVICE DEPT.
375-3E-10
ST PAUL MN 55144-1000
KATHY KAREL
PHONE NO. 651-736-6021
FAX NO. 651-737-5265
ACCOUNT NO.
CHARGE TO: GC18050

PURCHASE ORDER..R&D HELIOS - SACHET
** ELECTRONIC EIPP INVOICE **
ORDER DATE 09/02/2011
SHIP DATE 09/02/2011
PARTIAL ORDER..... NO
KG22235

INVOICE NO..... KG22235
TYPE..... ORIGINAL
DATE..... 09/02/2011
TERMS OF SALE
NET 30 DAYS
TERMS DATE..... 09/02/2011
SALES REP..... V4H20-6

GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
SEE LETTER DATED 9/2/11 RE SACH ET EFFORTS				
V 1	EACH	Imiquimod Programs	P 10236.68	10,236.68
*** SHPD 09/02 FROM-MISC ;MAPLEWOOD VIA- *** B/L - *** -LBS -PCS				
TOTAL MUST BE RECEIVED BY: 10/03/2011				INVOICE TOTAL 10,236.68

Please see reverse side for terms and conditions of sale and address change form.

10164671 709 21 1 / / 09/02/11 CrBr:CM OrdWr:KG InvBr:ZZL AdmCd:KG
54 6098

DETACH AND RETURN WITH PAYMENT

GC18050 GRACEWAY PHARMACEUTICALS INC ATTN ACCOUNT PAYABLE 340 MLK BLVD BRISTOL TN 37620-4081	REMIT PAYMENT TO 3M 2807 PAYSHERE CIR CHICAGO IL 60674-0000	INVOICE NO..... KG22235 INVOICE DATE..... 09/02/2011 TERMS DATE..... 09/02/2011
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TOTAL MUST BE RECEIVED BY: 10/03/2011
INVOICE TOTAL 10,236.68

AMOUNT ENCLOSED
KG22235

3M Invoice

PAGE 1 OF 1
PURCHASE ORDER..R&D HELIOS - TUBES
INVOICE NO..... KG22236
TYPE..... ORIGINAL
DATE..... 09/02/2011
DIRECT INQUIRIES TO: ** ELECTRONIC EIPP INVOICE **
CUSTOMER SERVICE DEPT.
375-3E-10
ST PAUL MN
ORDER DATE 09/02/2011
SHIP DATE.....09/02/2011
TERMS OF SALE
NET 30 DAYS
TERMS DATE.....09/02/2011
SALES REP..... V4H20-6
55144-1000
KATHY KAREL
PHONE NO...651-736-6021
FAX NO....651-737-5265
PARTIAL ORDER..... NO
ACCOUNT NO. KG22236
CHARGE TO: GC18050

GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
SEE LETTER DATED 9/2/11 RE TUBE				
S EFFORTS				
V 1	EACH	Imiquimod Programs	P 751.10	751.10
*** SHPD 09/02 FROM-MISC ;MAPLEWOOD VIA-				
*** B/L -				
*** -LBS -PCS				
TOTAL MUST BE RECEIVED BY: 10/03/2011				INVOICE TOTAL 751.10

Please see reverse side for terms and conditions of sale and address change form.

10164689 709 21 1 / / 09/02/11 CrBr:CM OrdWr:KG InvBr:ZZL AdmCd:KG
6098

DETACH AND RETURN WITH PAYMENT
REMIT PAYMENT TO
3M
2807 PAYSPIRE CIR
CHICAGO IL 60674-0000
GC18050
GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081
INVOICE NO..... KG22236
INVOICE DATE..... 09/02/2011
TERMS DATE..... 09/02/2011

TOTAL MUST BE RECEIVED BY: 10/03/2011
INVOICE TOTAL 751.10

AMOUNT ENCLOSED
KG22236

3M Invoice

PAGE 1 OF 1
DIRECT INQUIRIES TO:
CUSTOMER SERVICE DEPT.
375-3E-10
ST PAUL MN 55144-1000

1 PURCHASE ORDER 4500009524
** ELECTRONIC EIPP INVOICE **
ORDER DATE 04/01/2011
SHIP DATE 09/19/2011

INVOICE NO. KG21833
TYPE ORIGINAL
DATE 09/19/2011
TERMS OF SALE
NET 30 DAYS
TERMS DATE 09/19/2011
SALES REP V4H20-6

KATHY KAREL
PHONE NO. 651-736-6021
FAX NO. 651-737-5265

PARTIAL ORDER YES

ACCOUNT NO. KG21833
CHARGE TO: GC18050
SHIP TO: GC17854

GRACEWAY PHARMACEUTICALS
C/O LEITNER PHARMACEUTIC
881 MOUNTAIN VW DR
PINEY FLATS TN 37686-4913

GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
V 9216	EACH	PART NUMBER 110002 MAXAIR A/H 400 TRD, GW US LOT NUMBER(S) 110391	P 14.83	136,673.28
*** SHPD 09/19 FROM-PHARM; NRTHRID VIA-XXXX				
*** B/L-7N 473056				
*** 1,574-LBS 192-PCS				

TOTAL MUST BE RECEIVED BY: 10/19/2011
INVOICE TOTAL 136,673.28

Please see reverse side for terms and conditions of sale and address change form.

10138899 715 21 720/00 / 09/19/11 CrBr:CM OrdWr:KG InvBr:RQ AdmCd:KG
54 6098

DETACH AND RETURN WITH PAYMENT

REMIT PAYMENT TO
3M
2807 PAYSHERE CIR
CHICAGO IL 60674-0000

INVOICE NO. KG21833
INVOICE DATE 09/19/2011
TERMS DATE 09/19/2011

GC18050
GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

TOTAL MUST BE RECEIVED BY: 10/19/2011
INVOICE TOTAL 136,673.28

AMOUNT ENCLOSED
KG21833

3M Invoice

PAGE 1 OF 1
DIRECT INQUIRIES TO:
CUSTOMER SERVICE DEPT.
375-3E-10
ST PAUL MN 55144-1000
PURCHASE ORDER 4500008853
** ELECTRONIC EIPP INVOICE **
ORDER DATE 02/02/2011
SHIP DATE 09/27/2011
INVOICE NO. KG21505
TYPE ORIGINAL
DATE 09/27/2011
TERMS OF SALE
NET 30 DAYS
TERMS DATE 09/27/2011
SALES REP V4H20-6

KATHY KAREL
PHONE NO. 651-736-6021
FAX NO. 651-737-5265
PARTIAL ORDER NO

ACCOUNT NO. KG21505
CHARGE TO: GC18050
SHIP TO: QES2476

ALVOGEN INC
% DDN PHARMA LOGISTICS
4850 S MENDENHALL
MEMPHIS TN 38141-8211
GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
V 18720	EACH	NITROGLYCERIN 0.1 GW US 30'S	7.50	140,400.00
NDC 4778129603 PO NUMBER AOLVOGEN #4500032345 PART NUMBER 110040 LOT NUMBER(S) 110353 / EXP: JUL 14 SHPD 09/27 FROM-PHARM; NRTHRID VIA-XXXX B/L-7N 473141 2,234-LBS 390-PCS				

TOTAL MUST BE RECEIVED BY: 10/27/2011
INVOICE TOTAL 140,400.00

Please see reverse side for terms and conditions of sale and address change form.

10116879 713 21 210/00 / 09/27/11 CrBr:CM OrdWr:KG InvBr:RQ AdmCd:KG
54 6098

DETACH AND RETURN WITH PAYMENT
GC18050
GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081
REMIT PAYMENT TO
3M
2807 PAYSHERE CIR
CHICAGO IL 60674-0000
INVOICE NO. KG21505
INVOICE DATE 09/27/2011
TERMS DATE 09/27/2011

TOTAL MUST BE RECEIVED BY: 10/27/2011
INVOICE TOTAL 140,400.00

AMOUNT ENCLOSED
KG21505

3M Invoice

PAGE 1 OF 1

DIRECT INQUIRIES TO:
CUSTOMER SERVICE DEPT.
375-3E-10
ST PAUL MN

55144-1000

PURCHASE ORDER..4500009565

** ELECTRONIC EIPP INVOICE **
ORDER DATE 04/01/2011
SHIP DATE.....09/27/2011

INVOICE NO..... KG21748
TYPE..... ORIGINAL
DATE..... 09/27/2011
TERMS OF SALE
NET 30 DAYS
TERMS DATE.....09/27/2011
SALES REP..... V4H20-6

KATHY KAREL
PHONE NO...651-736-6021
FAX NO...651-737-5265

PARTIAL ORDER..... NO

ACCOUNT NO.
CHARGE TO: GC18050
SHIP TO: QES2476

KG21748

ALVOGEN INC
% DDN PHARMA LOGISTICS
4850 S MENDENHALL
MEMPHIS TN 38141-8211

GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

QUANTITY UNIT DESCRIPTION UNIT PRICE TOTAL AMOUNT

NDC #4778129703
PO NUMBER ALVOGEN # 4500033039
PART NUMBER 110041
V 46368 EACH NITROGLYCERIN 0.2 GW US 30'S P 3.90 180,835.20
LOT NUMBER(S)
110377 / JUL 14

*** SHPD 09/27 FROM-PHARM; NRTHRID VIA-XXXX
*** B/L-7N 473141
*** 6.002-LBS 966-PCS

TOTAL MUST BE RECEIVED BY: 10/27/2011 INVOICE TOTAL 180,835.20

Please see reverse side for terms and conditions of sale and address change form.

10116887 713 21 490/00 / 09/27/11 CrBr:CM OrdWr:KG InvBr:RQ AdmCd:KG
54 6098 6683

DETACH AND RETURN WITH PAYMENT

GC18050
GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

REMIT PAYMENT TO
3M
2807 PAYSHERE CIR
CHICAGO IL 60674-0000

INVOICE NO..... KG21748
INVOICE DATE..... 09/27/2011
TERMS DATE..... 09/27/2011

TOTAL MUST BE RECEIVED BY: 10/27/2011
INVOICE TOTAL 180,835.20

AMOUNT ENCLOSED

KG21748

3M Invoice

PAGE 1 OF 1
DIRECT INQUIRIES TO:
CUSTOMER SERVICE DEPT.
375-3E-10
ST PAUL MN 55144-1000

ORDER DATE 04/01/2011
SHIP DATE 09/27/2011

INVOICE NO. KG21749
TYPE ORIGINAL
DATE 09/27/2011
TERMS OF SALE
NET 30 DAYS
TERMS DATE 09/27/2011
SALES REP V4H20-6

KATHY KAREL
PHONE NO. 651-736-6021
FAX NO. 651-737-5265

PARTIAL ORDER NO.

ACCOUNT NO. KG21749
CHARGE TO: GC18050
SHIP TO: QES2476

ALVOGEN INC
% DDN PHARMA LOGISTICS
4850 S MENDENHALL
MEMPHIS TN 38141-8211

GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
V 28368	EACH	NITROGLYCERIN 0.4 GW US 30'S	5.70	161,697.60
NDC # 4778129803 PO NUMBER ALVOGEN # 4500033040 PART NUMBER 110042 LOT NUMBER(S) 110378 / EXP: AUG 14				
*** SHPD 09/27 FROM-PHARM; NRTHRID VIA-XXXX				
*** B/L-7N 473141				
*** 4,517-LBS 591-PCS				

TOTAL MUST BE RECEIVED BY: 10/27/2011 INVOICE TOTAL 161,697.60

Please see reverse side for terms and conditions of sale and address change form.

10116895 713 21 270/00 / 09/27/11 CrBr:CM OrdWr:KG InvBr:RQ AdmCd:KG
54 6098 6683

DETACH AND RETURN WITH PAYMENT

REMIT PAYMENT TO

3M
2807 PAYSPIRE CIR
CHICAGO IL 60674-0000

INVOICE NO. KG21749
INVOICE DATE 09/27/2011
TERMS DATE 09/27/2011

TOTAL MUST BE RECEIVED BY: 10/27/2011
INVOICE TOTAL 161,697.60

AMOUNT ENCLOSED

KG21749

3M Invoice

PAGE 1 OF 1
DIRECT INQUIRIES TO:
CUSTOMER SERVICE DEPT.
375-3E-10
ST PAUL MN 55144-1000

PURCHASE ORDER..2011 MAP
** ELECTRONIC EIPP INVOICE **
ORDER DATE 09/15/2011
SHIP DATE.....09/15/2011

INVOICE NO..... NT17387
TYPE..... ORIGINAL
DATE..... 09/28/2011
TERMS OF SALE
NET 30 DAYS
TERMS DATE.....09/28/2011
SALES REP..... V0001-7

KATHY KAREL
PHONE NO...651-736-6021
FAX NO....651-737-5265

PARTIAL ORDER..... NO

ACCOUNT NO.
CHARGE TO: GC18050

NT17387

GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	EACH	Misc Charges	4297738.00	4297,738.00

PURSUANT TO SECTION 5.5 OF THE SUPPLY AGREEMENT
3M IS REQUESTING PAYMENT FOR AN AMOUNT EQUAL TO
60% OF THE DIFFERENCE BETWEEN THE MINIMUM ANNUAL
PURCHASE FOR PRODUCT (\$20,000,000) AND THE
AMOUNT OF PRODUCT ACTUALLY ORDERED FOR
DELIVERY (\$12,837,103)

SHPD 09/15 FROM-MISC :MAPLEWOOD VIA-UPS

B/L -
-LBS
-PCS

Cntrl: 5 Acct: 009750 Proj: 0014130000 Amt: 4297,738.00

TOTAL MUST BE RECEIVED BY: 10/28/2011 INVOICE TOTAL 4,297,738.00

Please see reverse side for terms and conditions of sale and address change form.

10093722 718 21 1 / / 09/28/11 CrBr:CM OrdWr:SP InvBr:ZZL AdmCd:NT
54 65

DETACH AND RETURN WITH PAYMENT

REMIT PAYMENT TO
3M
2807 PAYSHERE CIR
CHICAGO IL 60674-0000

INVOICE NO..... NT17387
INVOICE DATE..... 09/28/2011
TERMS DATE..... 09/28/2011

GC18050
GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

TOTAL MUST BE RECEIVED BY: 10/28/2011
INVOICE TOTAL 4,297,738.00

AMOUNT ENCLOSED
NT17387

3M Tax Invoice

3M Innovation Singapore Pte Ltd
1 Yishun Avenue 7, Singapore 768823
Tel : 64508888 Fax : 65522113
www.3M.com.sg
CRN:200802267C
VAT # : GB 975055791

CUSTOMER PURCHASE ORDER NUMBER 4500010415		ORDER DATE 20/07/11	PAYMENT TERMS 45	BORDER CODE 0	ORDER TYPE O	RESP CSR KAITLYN	CSR CONTACT # 65-6450-7254	SALESPERSON Generic Salesman	WAREHOUSE DC	PAGE Page 1 of 1	QUOTE THIS NUMBER WHEN CORRESPONDING INVOICE # TZ 10002183 DATE : 30/08/11 TIME : 19:02:05 CURRENCY : GBP
CHARGE TO: GRACEWAY PHARMACEUTICALS LLC ATTN ACCOUNTS PAYABLE 340 MARTIN LUTHER KING JR. BLVD BRISTOL, TN, 37620. UNITED STATES OF A (US) ACCOUNT NO : 83621						SHIP TO: MONTALVO & MONTALVO EDIFICIO AGENTES ADJANALES LOCALES 3, 4 Y 5 MEXICO					
CUSTOMER NOTES: ORDER NOTES:											
LINE NO	CPO LINE	ITEM NUMBER	DESCRIPTION / CUSTOMER X-REFERENCE / LINE NOTES			WHSE	UOM	ORDER QTY	SHIP QTY	UNIT PRICE	NET AMOUNT
001	1	GH620417580	HIPREX TABLET 16 20 MEXICO Harmonized Code : 30049000 VAT %			DC	EA	10152	10152	2.4700	25075.44
			410000			Lot Details *****					
						GMF072D --- 360					
						GMF124C --- 6884					
						GMH022A --- 2808					
			(Exchange Rate GBP 1 to SGD @ 1.9642)			Order Total			S\$	49253.18	GBP 25075.44
			VAT exempted export - art 146 Council Directive 2006/112/EC			VAT @ 0%			S\$	.00	GBP .00
			Payment Terms : 45 days from invoice date			Order Total with VAT			S\$	49253.18	GBP 25075.44
THIS IS A COMPUTER GENERATED TAX INVOICE. NO SIGNATURE IS REQUIRED.						RECEIPT WILL NOT BE SENT UPON PAYMENT UNLESS REQUESTED					
TERMS AND CONDITIONS OF SALE:						PLEASE PAY THIS AMOUNT OR IGNORE IF PAYMENT HAS BEEN MADE					
The following is made in lieu of all warranties, express or implied. Seller shall not be liable for any injury, loss or damage direct or consequential, arising out of the use of, or the inability to use, the product. Before using, user shall determine the suitability of the product for his intended use, and user assumes all risk and liability whatsoever in connection herewith. The foregoing may not be changed except by an agreement signed by an officer of seller. Unless otherwise agreed by written agreement, the sale of all goods and services shall be subject to 3M's Conditions of Sale for Goods and Services, copy available on request.											
ACCOUNTS COPY											

3M Tax Invoice

3M Innovation Singapore Pte Ltd
1 Yishun Avenue 7, Singapore 768923
Tel : 64508888 Fax : 65522113
www.3m.com.sg
CRN:200802267C
VAT # : GB 975055791

CUSTOMER PURCHASE ORDER NUMBER 4500009736	ORDER DATE 3/05/11	PAYMENT TERMS 45	BORDER CODE 0	ORDER TYPE O	RESP CSR KAITLYN	CSR CONTACT # 65-6450-7254	SALESPERSON Generic Salesman	WAREHOUSE DC	PAGE Page 1 of 1	QUOTE THIS NUMBER WHEN CORRESPONDING INVOICE #
CHARGE TO: GRACEWAY PHARMACEUTICALS LLC ATTN ACCOUNTS PAYABLE 340 MARTIN LUTHER KING JR. BLVD BRISTOL, TN, 37620, UNITED STATES OF A (US) ACCOUNT NO : 83621					SHIP TO: GRACEWAY PHARMACEUTICALS C/O LEITNER PHARMACEUTICALS 881 MT VIEW ROAD PINEY FLATS TN 37686 U.S.A.					
CUSTOMER NOTES :					ORDER NOTES :					

TZ 10002283
DATE : 16/09/11
TIME : 22:30:21
CURRENCY : GBP

LINE NO	CPO LINE	ITEM NUMBER	DESCRIPTION / CUSTOMER X-REFERENCE / LINE NOTES	WHSE	UOM	ORDER QTY	SHIP QTY	UNIT PRICE	NET AMOUNT
001	1	GH620412789	ZYCLARA SAMPLE 3.75% CREAM USA GRACEWAY Harmognized Code: 30049000 VAT %	DC	EA	40272	40272	.9900	39869.28
***** Lot Details ***** --- MFO30B --- 40272									
200012 ZYCLARA CREAM 3.75% SAMPLE									
VAT exempted export - art 146 Council Directive 2006/112/EC (Exchange Rate GBP 1 to SGD @ 1.9693) Order Total S\$ 78517.76 GBP 39869.28 Payment Terms : 45 days from invoice date VAT @ 0% S\$.00 GBP .00 Order Total with VAT S\$ 78517.76 GBP 39869.28									
THIS IS A COMPUTER GENERATED TAX INVOICE. NO SIGNATURE IS REQUIRED. RECEIPT WILL NOT BE SENT UPON PAYMENT UNLESS REQUESTED. PLEASE PAY THIS AMOUNT OR IGNORE IF PAYMENT HAS BEEN MADE									

TERMS AND CONDITIONS OF SALE:
The following is made in lieu of all warranties, express or implied. Seller shall not be liable for any injury, loss or damage, direct or consequential, arising out of the use of, or the inability to use, the product. Before using, user shall determine the suitability of the product for his/her intended use. The foregoing may not be changed except by an agreement signed by an officer of seller. Unless otherwise agreed by written agreement, the sale of all goods and services shall be subject to 3M's Conditions of Sale for Goods and Services, copy available on request.

ACCOUNTS COPY

3M Innovation Singapore Pte Ltd
1 Yishun Avenue 7, Singapore 768923
Tel: 64508888 Fax: 65522113
www.3M.com.sg
CRN:200802267C
VAT #: GB 975055791

arising out of the use of, or the inability to use, the product. Before using, user shall accept by an agreement signed by an officer of sales.

3M Innovation Singapore Pte Ltd
1 Yishun Avenue 7, Singapore 758923
Tel: 64508888 Fax: 65522113
www.3M.com.sg
CRN:200802267C
VAT #: GB 975055791

The following is made in lieu of all warranties, express or implied:
Seller's only obligation shall be to repair or replace defective product returned to be defective. Seller shall not be liable for any injury, loss or damage, direct or consequential, arising out of the use of, or the inability to use, the product. Before using, user shall read and understand the instructions for use and user assumes all risk and liability whatsoever in connection herewith. The foregoing may not be changed except by an agreement signed by an officer of seller and the user. All other warranties, express or implied, are hereby disclaimed. The sale of all goods and services shall be subject to 3M's Conditions of Sale for Goods and Services; copy available on request.

3M Innovation Singapore Pte Ltd
1 Yishun Avenue 7, Singapore 768923
Tel: 64508888 Fax: 65522113
www.3M.com.sg
CRN: 200802267C
VAT #: GB 975055791

arising out of the use of, or the inability to use, the product. Before using, user shall accept by an agreement signed by an officer of seller.

3M Tax Invoice

3M Innovation Singapore Pte Ltd
1 Yishun Avenue 7, Singapore 768923
Tel : 64508888 Fax : 65522113
www.3m.com.sg
CRN:200802267C
VAT # : GB 975055791

CUSTOMER PURCHASE ORDER NUMBER 4500009737	ORDER DATE 3/05/11	PAYMENT TERMS 45	B/ORDER CODE 0	ORDER TYPE O	RESP. CSR KAITLYN	CSR CONTACT # 65-6450-7254	SALESPERSON Generic Salesman	WAREHOUSE DC	PAGE Page 1 of 1	QUOTE THIS NUMBER WHEN CORRESPONDING INVOICE # TZ 10002363 DATE : 28/09/11 TIME : 16:33:17 CURRENCY : GBP
CHARGE TO: GRACEWAY PHARMACEUTICALS LLC ATTN ACCOUNTS PAYABLE 340 MARTIN LUTHER KING JR BLVD BRISTOL, TN, 37620.					SHIP TO: GRACEWAY PHARMACEUTICALS C/O LEITNER PHARMACEUTICALS 881 MT VIEW ROAD PINEY FLATS TN 37686 U.S.A.					
UNITED STATES OF A (US) ACCOUNT NO : 83621					ORDER NOTES:					

LINE NO	CPO LINE	ITEM NUMBER	DESCRIPTION / CUSTOMER X-REFERENCE / LINE NOTES	WHSE	UOM	ORDER QTY	SHIP QTY	UNIT PRICE	NET AMOUNT
001	1	GH620412789	ZYCLARA SAMPLE 3.75% CREAM USA GRACEWAY Harmonized Code: 30049000 VAT % .0000	DC	EA	33600	33600	.9900	33264.00
			200012 ZYCLARA CREAM 3.75% SAMPLE	***** Lot Details ***** ----- MFO30C ----- ----- 33600					
VAT exempted export - art 146 Council Directive 2006/112/EC (Exchange Rate GBP 1 to SGD @ 1.9693) Order Total Payment Terms : 45 days from invoice date Order Total with VAT \$S 65509.46									33264.00
THIS IS A COMPUTER GENERATED TAX INVOICE. NO SIGNATURE IS REQUIRED. RECEIPT WILL NOT BE SENT UPON PAYMENT UNLESS REQUESTED. PLEASE PAY THIS AMOUNT OR IGNORE IF PAYMENT HAS BEEN MADE									33264.00

TERMS AND CONDITIONS OF SALE:
The following is made in lieu of all warranties, express or implied. Seller shall not be liable for any injury, loss or damage, direct or consequential, arising out of the use of, or the inability to use, the product. Before using, user shall determine the suitability of the product for his intended use, and user assumes all risk and liability whatsoever in connection therewith. The foregoing may not be subject to an agreement signed by an officer of seller. Unless otherwise agreed by written agreement, the sale of all goods and services shall be subject to 3M's Conditions of Sale for Goods and Services, copy available on request.

ACCOUNTS COPY

Proof of 503(b)(9) Claim Form

Graceway Pharmaceuticals, LLC, et al., Case No. 11-13036, Chapter 11 Jointly Administered

11 U.S.C. § 503(b)(9) provides that "[a]fter notice and a hearing, there shall be allowed administrative expenses . . . including . . . the value of any goods received by the debtor within 20 days before the date of commencement of a [bankruptcy case] in which the goods have been sold to the debtor in the ordinary course of such debtor's business." Your receipt of this form does not mean you hold a claim that is entitled to Section 503(b)(9) treatment.

Claimants should submit a signed original Proof of 503(b)(9) Claim form asserting such 503(b)(9) Claim, together with accompanying documentation, by mail, hand delivery, or overnight courier, to the following address:

If by Mail:

BMC Group, Inc.
Attn: Graceway Claims Processing
PO Box 3020
Chanhassen, MN 55317-3020

If by Hand Delivery or Overnight Courier:

BMC Group, Inc.
Attn: Graceway Claims Processing
18750 Lake Drive East
Chanhassen, MN 55317

With copies to:

- (a) Latham & Watkins LLP, 233 South Wacker Drive, Suite 5800, Chicago, Illinois 60606 (Attn: Josef S. Athanas, Esq. and Matthew L. Warren, Esq.);
(b) Young Conaway Stargatt & Taylor, LLP, The Brandywine Building, 1000 West Street, 17th Floor, P.O. Box 391, Wilmington, Delaware 19899 (Attn: Kara Hammond Coyle, Esq.); and
(c) Graceway Pharmaceuticals, LLC, c/o John A. A. Bellamy, Executive Vice President & General Counsel, 340 Martin Luther King Jr. Blvd., Suite 500, Bristol, TN 37620.

Debtor against which claim is asserted: (Check Only One)

- ☐ Graceway Pharma Holding Corp. Case No. 11-13037
☐ Graceway Holdings, LLC Case No. 11-13038
☒ Graceway Pharmaceuticals, LLC Case No. 11-13036
☐ Chester Valley Holdings, LLC Case No. 11-13039

- ☐ Chester Valley Pharmaceuticals, LLC Case No. 11-13041
☐ Graceway Canada Holdings, Inc. Case No. 11-13042
☐ Graceway International, Inc. Case No. 11-13043

NOTE: This form must be served upon BMC Group, Inc., at one of the above-referenced addresses on or prior to December 16, 2011. The form may be submitted in person or by courier service, hand delivery or mail. Facsimile, email or electronic submissions will not be accepted. Requests shall be deemed filed when actually received by BMC Group, Inc.

Name of Creditor:

(the person or other entity to whom the debtor owes money or property)

3M COMPANY

Name and Address Where Notices Should Be Sent:

Eric Komorowski, Financial Risk Analyst
3M Center, 224-5N-41
St. Paul, MN 55144
Telephone No.: 651-733-8325

☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach a copy of statement giving particulars.

☐ Check box if you have asserted a reclamation demand for any of the Goods referenced on this claim form. Attach statement identifying any such goods.

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: 8050

Check here if this claim: ☐ replaces ☐ amends
a previously filed claim, dated: _____

1. TOTAL AMOUNT OF SECTION 503(b)(9) CLAIM: \$930,644.54.

2. DATE OF DELIVERY OF GOODS: 9/16/11, 9/19/11, 9/27/11, 9/28/11

Attach proof of delivery of such goods. Goods were picked up in all instances by the Debtor on invoice date; no PODs

3. BRIEF DESCRIPTION OF CLAIM AND GOODS: SEE ATTACHED

Attach particular invoices for which any of the amounts described in this form was applied.

4. SUPPORTING DOCUMENTS: Attach copies of supporting documents, such as invoices, receipts, bills of lading, promissory notes, purchase orders, itemized statements of running accounts, or contracts. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. Any attachments must be 8-1/2" by 11".

5. DATE-STAMPED COPY: To receive an acknowledgement of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

6. ORDINARY COURSE CERTIFICATION: By signing this claim form, you are certifying that the goods, for which payment is sought hereby, were sold to the debtor in the ordinary course of the debtor's business and were received by the debtor within twenty days prior to September 29, 2011 as required by 11 U.S.C. § 503(b)(9).

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

11/9/11

Date

Print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any)

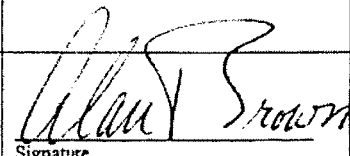
ALAN E. BROWN

Name

SPECIAL COUNSEL TO 3M

Title

Signature



3M Invoice

PAGE 1 OF 1
 PURCHASE ORDER 4500009524
 INVOICE NO. KG21833
 TYPE ORIGINAL
 DATE 09/19/2011
 ORDER DATE 04/01/2011
 SHIP DATE 09/19/2011
 TERMS OF SALE
 NET 30 DAYS
 TERMS DATE 09/19/2011
 SALES REP V4H20-6

KATHY KAREL
 PHONE NO. 651-736-6021
 FAX NO. 651-737-5265
 PARTIAL ORDER YES

ACCOUNT NO. KG21833
 CHARGE TO: GC18050
 SHIP TO: GC17854

GRACEWAY PHARMACEUTICALS
 C/O LEITNER PHARMACEUTIC
 881 MOUNTAIN VW DR
 PINEY FLATS TN 37686-4913
 GRACEWAY PHARMACEUTICALS
 INC ATTN ACCOUNT PAYABLE
 340 MLK BLVD
 BRISTOL TN 37620-4081

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
V 9216	EACH	PART NUMBER 110002 MAXAIR A/H 400 TRD, GW US LOT NUMBER(S) 110391	P 14.83	136,673.28
*** SHPD 09/19 FROM-PHARM; NRTHRID VIA-XXXX B/L-7N 473056 192-PCS *** 1,574-LBS				

TOTAL MUST BE RECEIVED BY: 10/19/2011 INVOICE TOTAL 136,673.28

Please see reverse side for terms and conditions of sale and address change form.

10138899 715 21 720/00 / 09/19/11 CrBr:CM OrdWr:KG InvBr:RQ AdmCd:KG
 54 6098

DETACH AND RETURN WITH PAYMENT
 REMIT PAYMENT TO
 3M
 2807 PAYSHERE CIR
 CHICAGO IL 60674-0000

TOTAL MUST BE RECEIVED BY: 10/19/2011
 INVOICE TOTAL 136,673.28

AMOUNT ENCLOSED
 KG21833

3M Invoice

PAGE 1 OF 1
DIRECT INQUIRIES TO:
CUSTOMER SERVICE DEPT.
375-3E-10
ST PAUL MN 55144-1000

PURCHASE ORDER 4500008853
** ELECTRONIC EIPP INVOICE **
ORDER DATE 02/02/2011
SHIP DATE 09/27/2011

INVOICE NO. KG21505
TYPE ORIGINAL
DATE 09/27/2011
TERMS OF SALE
NET 30 DAYS
TERMS DATE 09/27/2011
SALES REP V4H20-6

KATHY KAREL
PHONE NO. 651-736-6021
FAX NO. 651-737-5265

PARTIAL ORDER NO

ACCOUNT NO. KG21505
CHARGE TO: GC18050
SHIP TO: QES2476

ALVOGEN INC
% DDN PHARMA LOGISTICS
4850 S MENDENHALL
MEMPHIS TN 38141-8211

GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
V 18720	EACH	NITROGLYCERIN 0.1 GW US 30'S LOT NUMBER(S) 110353 / EXP: JUL 14	7.50	140,400.00

*** SHPD 09/27 FROM-PHARM; NRTHRID VIA-XXXX
*** B/L-7N 473141
*** 2,234-LBS 390-PCS

TOTAL MUST BE RECEIVED BY: 10/27/2011 INVOICE TOTAL 140,400.00

Please see reverse side for terms and conditions of sale and address change form.

10116879 713 21 210/00 / 09/27/11 CrBr:CM OrdWr:KG InvBr:RQ AdmCd:KG
54 6098

DETACH AND RETURN WITH PAYMENT

REMIT PAYMENT TO
3M
2807 PAYSHERE CIR
CHICAGO IL 60674-0000

INVOICE NO. KG21505
INVOICE DATE 09/27/2011
TERMS DATE 09/27/2011

TOTAL MUST BE RECEIVED BY: 10/27/2011
INVOICE TOTAL 140,400.00

AMOUNT ENCLOSED
KG21505

3M Invoice

PAGE 1 OF 1

DIRECT INQUIRIES TO:
CUSTOMER SERVICE DEPT.
375-3E-10
ST PAUL MN 55144-1000

1 PURCHASE ORDER..4500009565
** ELECTRONIC EIPP INVOICE **
ORDER DATE 04/01/2011
SHIP DATE.....09/27/2011
INVOICE NO..... KG21748
TYPE..... ORIGINAL
DATE..... 09/27/2011
TERMS OF SALE
NET 30 DAYS
TERMS DATE.....09/27/2011
SALES REP..... V4H20-6

KATHY KAREL
PHONE NO...651-736-6021
FAX NO.....651-737-5265

PARTIAL ORDER..... NO

ACCOUNT NO.
CHARGE TO: GC18050
SHIP TO: QES2476

KG21748

ALVOGEN INC
% DDN PHARMA LOGISTICS
4850 S MENDENHALL
MEMPHIS TN 38141-8211

GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
V 46368	EACH	NITROGLYCERIN 0.2 GW US 30'S LOT NUMBER(S) 110377 / JUL 14	3.90	180,835.20
*** SHPD 09/27 FROM-PHARM; NRTHRID VIA-XXXX				
*** B/L-7N 473141				
*** 6.002-LBS 966-PCS				

TOTAL MUST BE RECEIVED BY: 10/27/2011 INVOICE TOTAL 180,835.20

Please see reverse side for terms and conditions of sale and address change form.

10116887 713 21 490/00 / 09/27/11 CrBr:CM OrdWr:KG InvBr:RQ AdmCd:KG
54 6098 6683

DETACH AND RETURN WITH PAYMENT
REMIT PAYMENT TO
3M
2807 PAYSHERE CIR
CHICAGO IL 60674-0000
INVOICE NO..... KG21748
INVOICE DATE..... 09/27/2011
TERMS DATE..... 09/27/2011

GC18050
GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

TOTAL MUST BE RECEIVED BY: 10/27/2011
INVOICE TOTAL 180,835.20

AMOUNT ENCLOSED
KG21748

3M Invoice

PAGE 1 OF 1
 DIRECT INQUIRIES TO:
 CUSTOMER SERVICE DEPT.
 375-3E-10
 ST PAUL MN 55144-1000

PURCHASE ORDER 4500010096
 ** ELECTRONIC EIPP INVOICE **
 ORDER DATE 04/01/2011
 SHIP DATE 09/27/2011

INVOICE NO. KG21749
 TYPE ORIGINAL
 DATE 09/27/2011
 TERMS OF SALE
 NET 30 DAYS
 TERMS DATE 09/27/2011
 SALES REP V4H20-6

KATHY KAREL
 PHONE NO. 651-736-6021
 FAX NO. 651-737-5265

PARTIAL ORDER NO

ACCOUNT NO. KG21749
 CHARGE TO: GC18050
 SHIP TO: QES2476

ALVOGEN INC
 % DDN PHARMA LOGISTICS
 4850 S MENDENHALL
 MEMPHIS TN 38141-8211

GRACEWAY PHARMACEUTICALS
 INC ATTN ACCOUNT PAYABLE
 340 MLK BLVD
 BRISTOL TN 37620-4081

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
V 28368	EACH	NITROGLYCERIN 0.4 GW US 30'S LOT NUMBER(S) 110378 / EXP: AUG 14 NDC # 4778129803 PO NUMBER ALVOGEN # 4500033040 PART NUMBER 110042	5.70	161,697.60
SHPD 09/27 FROM-PHARM; NRTHRID VIA-XXXX				
			B/L-7N 473141	591-PCS
			4,517-LBS	

TOTAL MUST BE RECEIVED BY: 10/27/2011 INVOICE TOTAL 161,697.60

Please see reverse side for terms and conditions of sale and address change form.

10116895 713 21 270/00 / 09/27/11 CrBr:CM OrdWr:KG InvBr:RQ AdmCd:KG
 54 6098 6683

DETACH AND RETURN WITH PAYMENT

REMIT PAYMENT TO
 3M
 2807 PAYSHERE CIR
 CHICAGO IL 60674-0000

INVOICE NO. KG21749
 INVOICE DATE 09/27/2011
 TERMS DATE 09/27/2011

TOTAL MUST BE RECEIVED BY: 10/27/2011
 INVOICE TOTAL 161,697.60

AMOUNT ENCLOSED
 KG21749

3M Invoice

PAGE 1 OF 1

DIRECT INQUIRIES TO:
CUSTOMER SERVICE DEPT.
375-3E-10
ST PAUL MN

55144-1000

PURCHASE ORDER 2011 MAP

** ELECTRONIC EIPP INVOICE **

ORDER DATE 09/15/2011
SHIP DATE 09/15/2011

INVOICE NO. NT17387
TYPE ORIGINAL
DATE 09/28/2011
TERMS OF SALE
NET 30 DAYS
TERMS DATE 09/28/2011
SALES REP V0001-7

KATHY KAREL
PHONE NO. 651-736-6021
FAX NO. 651-737-5265

PARTIAL ORDER NO.

ACCOUNT NO.
CHARGE TO: GC18050

NT17387

GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

QUANTITY UNIT DESCRIPTION UNIT PRICE TOTAL AMOUNT

1 EACH Misc Charges P 4297738.00 4297,738.00
PURSUANT TO SECTION 5.5 OF THE SUPPLY AGREEMENT
3M IS REQUESTING PAYMENT FOR AN AMOUNT EQUAL TO
60% OF THE DIFFERENCE BETWEEN THE MINIMUM ANNUAL
PURCHASE FOR PRODUCT (\$20,000,000) AND THE
AMOUNT OF PRODUCT ACTUALLY ORDERED FOR
DELIVERY (\$12,837,103)

*** SHPD 09/15 FROM-MISC MAPLEWOOD VIA-UPSN
*** B/L-
*** -LBS -PCS

Cntrl: 5 Acct: 009750 Proj: 0014130000 Amt: 4297,738.00

TOTAL MUST BE RECEIVED BY: 10/28/2011 INVOICE TOTAL 4,297,738.00

Please see reverse side for terms and conditions of sale and address change form.

10093722 718 21 1 / / 09/28/11 CrBr:CM OrdWr:SP InvBr:ZZL AdmCd:NT
54 65

DETACH AND RETURN WITH PAYMENT

GC18050
GRACEWAY PHARMACEUTICALS
INC ATTN ACCOUNT PAYABLE
340 MLK BLVD
BRISTOL TN 37620-4081

REMIT PAYMENT TO
3M
2807 PAYSHERE CIR
CHICAGO IL 60674-0000

INVOICE NO. NT17387
INVOICE DATE 09/28/2011
TERMS DATE 09/28/2011

TOTAL MUST BE RECEIVED BY: 10/28/2011
INVOICE TOTAL 4,297,738.00

AMOUNT ENCLOSED

NT17387

3M Tax Invoice

3M Innovation Singapore Pte Ltd
1 Yishun Avenue 7, Singapore 768923
Tel : 64508888 Fax : 65522113
www.3m.com.sg
CRN:200802267C
VAT # : GB 975055791

CUSTOMER PURCHASE ORDER NUMBER 4500009736	ORDER DATE 3/05/11	PAYMENT TERMS 45	BORDER CODE 0	ORDER TYPE O	RESP. CSR KAITLYN	CSR CONTACT # 65-6450-7254	SALESPERSON Generic Salesman	WAREHOUSE DC	PAGE Page 1 of 1	QUOTE THIS NUMBER WHEN CORRESPONDING INVOICE # TZ 10002283 DATE : 16/09/11 TIME : 22:30:21 CURRENCY : GBP
CHARGE TO: GRACEWAY PHARMACEUTICALS LLC ATTN ACCOUNTS PAYABLE 340 MARTIN LUTHER KING JR BLVD BRISTOL, TN, 37620, UNITED STATES OF A (US) ACCOUNT NO : 83621					SHIP TO: GRACEWAY PHARMACEUTICALS C/O LEITNER PHARMACEUTICALS 881 MT VIEW ROAD PINEY FLATS TN 37686 U.S.A.		COFS # 415706			

CUSTOMER NOTES : ORDER NOTES :

LINE NO	CHQ LINE	ITEM NUMBER	DESCRIPTION / CUSTOMER X-REFERENCE / LINE NOTES	WHSE	UOM	ORDER QTY	SHIP QTY	UNIT PRICE	NET AMOUNT
001	1	GH620412789	ZYCLARA SAMPLE 3.75% CREAM USA GRACEWAY Harmonized Code: 30049000 VAT % .0000	DC	EA	40272	40272	.9900	39869.28
200012 ZYCLARA CREAM 3.75% SAMPLE				MFO30B					
(Exchange Rate GBP 1 to SGD @ 1.9693) Order Total								78517.76	39869.28
VAT exempted export - art 146 Council Directive 2006/112/EC								.00	.00
Payment Terms : 45 days from invoice date								78517.76	39869.28
THIS IS A COMPUTER GENERATED TAX INVOICE. NO SIGNATURE IS REQUIRED.								GBP	39869.28

RECEIPT WILL NOT BE SENT UPON PAYMENT UNLESS REQUESTED. PLEASE PAY THIS AMOUNT OR IGNORE IF PAYMENT HAS BEEN MADE

The following is made in lieu of all warranties, express or implied
Seller's only obligation shall be to replace such quantity of the product proved to be defective. Seller shall not be liable for any injury, loss or damage, direct or consequential, arising out of the use of, or the inability to use, the product. Before using, user shall determine the suitability of the product for his intended use, and user assumes all risk and liability whatsoever in connection herewith. The foregoing may not be changed except by an agreement signed by an officer of seller.
Unless otherwise agreed by written agreement, the sale of all goods and services shall be subject to 3M's Conditions of Sale for Goods and Services, copy available on request.

TERMS AND CONDITIONS OF SALE:
ACCOUNTS COPY

3M Innovation Singapore Pte Ltd
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CRN: 200802267C
VAT # : GB 975055791

arising out of the use of, or the inability to use, the product. Before using, user shall accept the product and any copies thereof on the basis of the information supplied by an agreement signed by an officer of said user.

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3M Tax Invoice

3M Innovation Singapore Pte Ltd
1 Yishun Avenue 7, Singapore, 768923
Tel: 64508888 Fax: 63522113
www.3m.com.sg
CRN: 200802267C
VAT #: GB 975055791

CUSTOMER PURCHASE ORDER NUMBER 4500010412		ORDER DATE 21/07/11	PAYMENT TERMS 45	ORDER TYPE O	RESP. CSR KAITLYN	CSR CONTACT # 65-8450-7254	SALESPERSON Generic Salesman	WAREHOUSE DC	PAGE Page 1 of 1	QUOTE THIS NUMBER WHEN CORRESPONDING INVOICE # TZ 10002358 DATE : 28/09/11 TIME : 15:35:07 CURRENCY : GBP
CHARGE TO: GRACEWAY PHARMACEUTICALS LLC ATTN ACCOUNTS PAYABLE 340 MARTIN LUTHER KING JR BLVD BRISTOL, TN, 37620.		SHIP TO: EGALA S.A. APARTADO POSTAL 0302-00388 LOCAL 7-B EDIFICIO #4 CALLE 13 ZONA LIBRE DE COLON COLON, PANAMA								
UNITED STATES OF A (US)		ACCOUNT NO : 83621								
ORDER NOTES NDA NO: 20-723 MANUFACTURING LICENCE NUMBER: 011517 UK NATIONAL LABELER CODE: 0115170610 PHARMA PROD: CREAM FOR EXTERNAL GENITAL WARTS DOES NOT CONTAIN ANIMAL OR ANIMAL BY-PROD										
LINE NO	ITEM NUMBER	DESCRIPTION / CUSTOMER X-REFERENCE / LINE NOTES	WHSE	UOM	ORDER QTY	SHIP QTY	UNIT PRICE	NET AMOUNT		
001	GH620400149	ALDARA CREAM 12 SALE VENEZUELA Harmonized Code: 30049000 VAT % 0.0000	DC	EA	3060	3060	5.1000	15606.00		
		400007			Lot Details *****					
				GMG121D	---		3060			
		(Exchange Rate GBP 1 to SGD @ 1.9693)			Order Total		S\$ 30734.14	GBP		15606.00
		VAT exempted export - art 146 Council Directive 2006/112/EC			VAT @ 0%		S\$.00	GBP		.00
		Payment Terms : 45 days from invoice date			Order Total with VAT		S\$ 30734.14	GBP		15606.00
THIS IS A COMPUTER GENERATED TAX INVOICE. NO SIGNATURE IS REQUIRED.								PLEASE PAY THIS AMOUNT OR IGNORE IF PAYMENT HAS BEEN MADE		
TERMS AND CONDITIONS OF SALE: The following is made in lieu of all warranties, express or implied. Seller's only obligation shall be to replace such quantity of the product proved to be defective. Seller shall not be liable for any injury, loss or damage, direct or consequential, arising out of the use of, or the inability to use, the product. determine the suitability of the product for his intended use, and user assumes all risk and liability whatsoever in connection herewith. The foregoing may not be changed except by an agreement signed by an officer of seller. Unless otherwise agreed by written agreement, the sale of all goods and services shall be subject to 3M's Conditions of Sale for Goods and Services, copy available on request.								Before using, user shall		
ACCOUNTS COPY										

3M Tax Invoice

3M Innovation Singapore Pte Ltd
1 Yishun Avenue 7, Singapore 768923
Tel : 64508886 Fax : 65522113
www.3m.com.sg
CRN 200802267C
VAT # : GB 975055791

CUSTOMER PURCHASE ORDER NUMBER : 4500010327		ORDER DATE : 7/07/11	PAYMENT TERMS : 45	BORDER CODE : 0	ORDER TYPE : O	RESP CSR : KAITLYN	CSR CONTACT # : 65-6450-7254	SALESPERSON : Generic Salesman	WAREHOUSE : DC	PAGE : Page 1 of 1	QUOTE THIS NUMBER WHEN CORRESPONDING INVOICE # : TZ 10002361	
CHARGE TO : GRACEWAY PHARMACEUTICALS LLC ATTN ACCOUNTS PAYABLE 340 MARTIN LUTHER KING JR BLVD BRISTOL, TN, 37620, UNITED STATES OF A (US) ACCOUNT NO : 83621		SHIP TO : EGALA S.A APARTADO POSTAL 0302-00388 LOCAL 7-B, EDIFICIO #4 CALLE 13 ZONA LIBRE DE COLON COLON, PANAMA			COPIES # : 433600			DATE : 28/09/11 TIME : 16:03:00 CURRENCY : GBP				
ORDER NOTES :												

LINE NO	CPO LINE	ITEM NUMBER	DESCRIPTION / CUSTOMER X-REFERENCE / LINE NOTES	WHSE	UOM	ORDER QTY	SHIP QTY	UNIT PRICE	NET AMOUNT
001	1	GH620400099	TAMBOCOR TABLETS 25'S 100MG LA TIN AMERIC Harmonized Code : 30049000 VAT % 400012	DC	EA	8520	8520	1.8500	15762.00
						Lot Details		***	
						GM1059B		--	8520
VAT exempted export - art 146 Council Directive 2006/112/EC (Exchange Rate GBP 1 to SGD @ 1.9693) Order Total \$ 31041.37 GBP 15762.00 Payment Terms : 45 days from invoice date VAT @ 0% \$.00 GBP .00 Order Total with VAT \$ 31041.37 GBP 15762.00									
THIS IS A COMPUTER GENERATED TAX INVOICE. NO SIGNATURE IS REQUIRED. RECEIPT WILL NOT BE SENT UPON PAYMENT UNLESS REQUESTED. PLEASE PAY THIS AMOUNT OR IGNORE IF PAYMENT HAS BEEN MADE									GBP 15762.00

TERMS AND CONDITIONS : The following is made in lieu of all warranties, express or implied. Seller shall not be liable for any injury, loss or damage, direct or consequential, arising out of the use of, or the inability to use, the product. Before using, user shall determine the suitability of the product for his intended use, and user assumes all risk and liability whatsoever in connection herewith. The foregoing may not be changed except by an agreement signed by an officer of seller. Unless otherwise agreed by written agreement, the sale of all goods and services shall be subject to 3M's Conditions of Sale for Goods and Services, copy available on request.

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3M Tax Invoice

3M Innovation Singapore Pte Ltd
1 Yishun Avenue 7, Singapore 768923
Tel : 64508888 Fax : 65522113
www.3m.com.sg
CRN:200802267C
VAT # : GB 975055791

CUSTOMER PURCHASE ORDER NUMBER: 4500009737	ORDER DATE: 3/05/11	PAYMENT TERMS: 45	BORDER CODE: 0	ORDER TYPE: O	RESP CSR: KAITLYN	CSR CONTACT #: 65-6450-7254	SALESPERSON: Generic Salesman	WAREHOUSE: DC	PAGE: Page 1 of 1	QUOTE THIS NUMBER WHEN CORRESPONDING INVOICE #
CHARGE TO: GRACEWAY PHARMACEUTICALS LLC ATTN ACCOUNTS PAYABLE 340 MARTIN LUTHER KING JR. BLVD BRISTOL, TN, 37620.					SHIP TO: GRACEWAY PHARMACEUTICALS C/O LEITNER PHARMACEUTICALS 881 MT VIEW ROAD PINEY FLATS TN 37686 U.S.A.				COFS #: 415703	TZ 10002363 DATE : 28/09/11 TIME : 16:33:17 CURRENCY : GBP
UNITED STATES OF A (US) ACCOUNT NO : 83621										

ORDER NOTES :

CUSTOMER NOTES :

LINE NO	CPO LINE	ITEM NUMBER	DESCRIPTION / CUSTOMER X-REFERENCE / LINE NOTES	WHSE	UOM	ORDER QTY	SHIP QTY	UNIT PRICE	NET AMOUNT
001	1	GH620412789	ZYCLARA SAMPLE 3.75% CREAM USA GRACEWAY Harmonized Code: 30049000 VAT % 0.0000	DC	EA	33600	33600	9900	33264.00
200012 ZYCLARA CREAM 3.75% SAMPLE				----	----	----	Lot Details	----	----
				MFO30C	----	----	----	33600	----
(Exchange Rate GBP 1 to SGD @ 1.9693) Order Total								\$S 65509.46	GBP 33264.00
VAT exempted export - art 146 Council Directive 2006/112/EC								\$S 0.00	GBP 0.00
Payment Terms : 45 days from invoice date								\$S 65509.46	GBP 33264.00
THIS IS A COMPUTER GENERATED TAX INVOICE. NO SIGNATURE IS REQUIRED.								PLEASE PAY THIS AMOUNT OR IGNORE IF PAYMENT HAS BEEN MADE	GBP 33264.00

TERMS AND CONDITIONS OF SALE:

The following is made in lieu of all warranties, express or implied. Seller shall not be liable for any injury, loss or damage, direct or consequential, arising out of the use of, or the inability to use, the product. Before using, user shall determine the suitability of the product for his intended use, and user assumes all risk and liability whatsoever in connection herewith. The foregoing may not be changed except by an agreement signed by an officer of seller. Unless otherwise agreed by written agreement, the sale of all goods and services shall be subject to 3M's Conditions of Sale for Goods and Services, copy available on request.

ACCOUNTS COPY

Alan E. Brown, Esq.
Special Counsel to 3M Company

3M Legal Affairs
Office of General Counsel

P.O. Box 33428
St. Paul, MN 55133-3428 USA
Phone: (651) 736-6739
Fax: (651) 736-9469
Email: arbrown@mmm.com



November 9, 2011

VIA U.S. MAIL

BMC Group, Inc.
Attn: Graceway Pharmaceuticals Claims Processing
P.O. Box 3020
Chanhassen, MN 55317-3020

**Re: In re Graceway Pharmaceuticals, LLC
Bankr. D. Del. Case No. 11-13036
Proof of Claim for 3M Company**

Dear Sir or Madam:

Enclosed for filing, please find 3M's proof of claim, and 503(b)(9) proof of claim in the above-referenced matter.

Thank you for your assistance.

Sincerely,

A handwritten signature in black ink, appearing to read "Alan E. Brown".

Alan E. Brown

Enc.