**Statement of Work**

1. **Services**: The contractor shall provide medication take back services for the collection and destruction of damaged, expired, returned, recalled, unused, or otherwise unwanted prescribed (controlled and non-controlled) medications.
   1. Provide toll free number and email address to which direct questions about medication receptacle system can be asked
   2. Provide pharmacy with medication receptacle at one-time fee
   3. Provide pharmacy with install hardware, instructions for install, 3 sets of keys, sign and shelf
   4. \_\_\_\_\_\_\_\_ facility is responsible for install
   5. Provide instructions on the install and use of medication receptacle to the pharmacy staff
   6. Make available to the pharmacy, electronically, documentation of the treatment of all appropriate materials collected
   7. The pharmacy may purchase additional liners; the cost includes the liner, shipping & destruction fees.

1. **Period of Performance**: Approximately one year from award date

Approvals

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