

Finished Lead Edge

52083-900-90

Dietary Supplement

VENALIV

MICRONIZED DIOSMIN 900 MG
HESPERIDIN METHYL CHALCONE 100 MG
STANDARDIZED GRAPE SEED EXTRACT 100 MG

HELPS SUPPORT LEG VEIN HEALTH*

NET CONTENTS: 90 CAPLETS

Supplement Facts		
Serving Size: 1 Caplet		% DV
Servings per Container: 90		
Amount per Serving		
Micronized Diosmin	900 mg	*
Hesperidin Methyl Chalcone	100 mg	*
Standardized Grape Seed Extract	100 mg	*

*Percent Daily Value (DV) are based on a diet of other people's misdeeds. **Daily Value not established.

Other Ingredients: Stearic acid, Dibutyl phosphate, Magnesium stearate, Croscarmellose, Cellulose, Croscarmellose sodium, Silica, Pharmaceutical grade, Talc.

Uses: Venaliv helps promote a healthy venous circulation. * Helps maintain leg vein health**.

Directions: Adults and children 12 years of age and over, take one caplet daily with food or as prescribed by a physician. Children under 12 years of age, consult a doctor.

Warning: If you are under a physician's care or taking medication contact your physician before using this product.

If pregnant or breast-feeding, ask a health professional before use. **Keep out of reach of children.** In case of overdose, get medical help or contact a Poison Control Center right away.

Store at controlled room temperature: 15°-30°C (59°-86°F). Do not use if cello-band around bottle neck is torn, broken or missing.

Manufactured in the USA for Kramer Novis, San Juan PR 00917.

1(787) 767-2072. www.kramernovis.com

* These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure or prevent any disease.

Lot #:
Exp. Date

52083 90090 7

DION Label Printing
539 North Rd, Westfield, MA 01085
Tel: 413-568-3713 Fax: 413-562-8361

☐ CUSTOMER PROOF ☐ PRESS PROOF ☐ ART FILE ☐ COLOR STANDARD

Please review your first proof very carefully and apply ALL anticipated alterations:

Prep Charge Policy:

- **1st Proof:** Included on original quote
- **2nd Proof:** Included if changes are minor
- Proofs provided beyond the initial set of revisions are billable @ \$65 per hour (minimum \$35 per item)

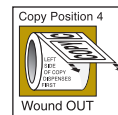
Customer: Bactolac Pharmaceutical, Inc. Archive Name: BPH_018595 Die No.: HP0049 Die Size: 2.25 ac x 6.25 ar, .125 cr Substrate: #607 Mast. 60# White Semi. NOTE:	<table><tr><th>QTY</th><th>PROOF TYPE</th><th>PROOFREAD</th></tr><tr><td>UNCOATED</td><td><input type="radio"/> CRM</td><td><input type="radio"/> COMPARATOR</td></tr><tr><td>HP DIGITAL PROOF</td><td><input type="radio"/> 075</td><td><input checked="" type="radio"/> HUMAN</td></tr><tr><td>COATED HP DIGITAL PROOF + UV or LAM</td><td><input type="radio"/> linear</td><td></td></tr><tr><td>Laser_NOT Color ACCURATE</td><td></td><td><input type="checkbox"/> BARCODE CHECK</td></tr></table>	QTY	PROOF TYPE	PROOFREAD	UNCOATED	<input type="radio"/> CRM	<input type="radio"/> COMPARATOR	HP DIGITAL PROOF	<input type="radio"/> 075	<input checked="" type="radio"/> HUMAN	COATED HP DIGITAL PROOF + UV or LAM	<input type="radio"/> linear		Laser_NOT Color ACCURATE		<input type="checkbox"/> BARCODE CHECK
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018595_02_r01_H Venaliv - 90 Caplets																
07/08/10 bb r01 97264 _Arrangement change in "Other ingredients"																
07/02/10 bb r00a 97264 _Proofing correction																
07/02/10 bb r00 97264 _New item, first proof																

HP DIGITAL TICKET

DIGITAL MATCHES:

INK NOTE	ACT	REQ	INK COLOR
	<input type="checkbox"/>	<input type="checkbox"/>	WHITE / GREEN
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PRO YEL
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	MAGENTA
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	CYAN
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	MAGENTA 1
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ORANGE
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BLACK
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	VIOLET

DIE LINE
DOES NOT PRINT



☐ LAMINATION REQUIRED

☒ VARNISH REQUIRED

☐ UV GLOSS VARNISH ☒ OVERALL
☐ SELECTIVE PLATE REQ'd

NO PLATE NEW EXIST MASTER

COLOR STRATEGY:

- ☒ HPI ☒ CMYK
- ☐ CMYKV
 - ☐ CMYKO
 - ☐ CMYKOV
 - ☐ CMYKOVG
 - ☐ CMYKOG
 - ☐ CMYKG
 - ☐ CMYKGV
 - ☐ LEGACY

HP WORKFLOW:

- ☐ 4 color RIP
- ☐ 7 color RIP
- ☐ 7 PreSePs

"APPROVED AS IS" BY:

"APPROVED WITH REVISIONS" BY:

"REPROOF REQUIRED" BY:

SPECIAL INSTRUCTIONS: