

Form G

Commonwealth of Australia

Competition and Consumer Act 2010 — subsection 93 (1)

NOTIFICATION OF EXCLUSIVE DEALING

To the Australian Competition and Consumer Commission:

Notice is hereby given, in accordance with subsection 93 (1) of the *Competition and Consumer Act 2010*, of particulars of conduct or of proposed conduct of a kind referred to subsections 47 (2), (3), (4), (5), (6), (7), (8) or (9) of that Act in which the person giving notice engages or proposes to engage.

PLEASE FOLLOW DIRECTIONS ON BACK OF THIS FORM

1. Applicant

- (a) Name of person giving notice:
(Refer to direction 2)

N99652 Mr Jack Gance
("Pharmacist")

- (b) Short description of business carried on by that person:
(Refer to direction 3)

Pharmacist
Central Market Gouger St Pharmacy
Shop 39
34 Gouger St, Adelaide SA 5000

- (c) Address in Australia for service of documents on that person:

C/- Mr P Sayers
Health Partners Limited
Level 4, 101 Pirie Street
ADELAIDE SA 5000

2. Notified arrangement (Refer to direction 4)

- (a) Description of the goods or services in relation to the supply or acquisition of which this notice relates:

The provision by the Pharmacist of goods, other than pharmaceuticals available with a medical practitioner's prescription ("**Non Prescription Goods**").

- (b) Description of the conduct or proposed conduct:
- (i) The Pharmacist supplying or offering to supply Non Prescription Goods at a discount of 20% off its normal price on the condition that the person to whom the Pharmacist supplies or offers or proposes to supply Non Prescription Goods is a member of Health Partners and elects to contribute to its "Extras or Package" tables for general treatment health benefits services ("**Health Partners Extras or Package Members**").
 - (ii) The Pharmacist refusing to supply Non Prescription Goods at a discount of 20% off its normal price, for the reason that the person is not or has not agreed to become a Health Partners Extras or Package Member.

3. Persons, or classes of persons, affected or likely to be affected by the notified conduct

- (a) Class or classes of persons to which the conduct relates:
(*Refer to direction 5*)

Existing and future Health Partners Extras or Package Members.

- (b) Number of those persons:
(*Refer to direction 6*)

- (i) At present time:
In excess of 62,000.
- (ii) Estimated within the next year:
In excess of 62,000.

- (c) Where number of persons stated in item 3(b)(i) is less than 50, their names and addresses:

Not applicable.

4. Public benefit claims

- (a) Arguments in support of notification:
(*Refer to direction 7*)

- (i) Health Partners Extras or Package Members will receive a discount on Non Prescription Goods purchased from the Pharmacist;
 - (ii) Competition is promoted by encouraging competitors to offer similar discounts; and
 - (iii) Costs to Health Partners Extras or Package Members, who are otherwise not able to negotiate comparable discounts, are reduced.
- (b) Facts and evidence relied upon in support of these claims:
- Not applicable.

5. Market definition

Provide a description of the market(s) in which the goods or services described at 2(a) are supplied or acquired and other affected markets including: significant suppliers and acquirers; substitutes available for the relevant goods or services; any restriction on the supply or acquisition of the relevant goods or services (for example geographic or legal restrictions):
(Refer to direction 8)

The market is suppliers of Non Pharmaceutical Goods in South Australia. These may be supplied by pharmacies, supermarkets and general merchants.

6. Public detriments

- (a) Detriments to the public resulting or likely to result from the notification, in particular the likely effect of the notified conduct on the prices of the goods or services described at 2(a) above and the prices of goods or services in other affected markets:
(Refer to direction 9)

There is no likely detriment.

- (b) Facts and evidence relevant to these detriments:
- Not applicable.

7. Further information


- (a) Name, postal address and contact telephone details of the person authorised to provide additional information in relation to this notification:

C/- Mr P Sayers

Health Partners Limited
Level 4, 101 Pirie Street
ADELAIDE SA 5000

DATED

Signed by/on behalf of the applicant

..........
(Signature)

PETER SAYERS
HEALTH PARTNERS LIMITED
CHIEF FINANCIAL OFFICER

DIRECTIONS

1. In lodging this form, applicants must include all information, including supporting evidence that they wish the Commission to take into account in assessing their notification.

Where there is insufficient space on this form to furnish the required information, the information is to be shown on separate sheets, numbered consecutively and signed by or on behalf of the applicant.

2. If the notice is given by or on behalf of a corporation, the name of the corporation is to be inserted in item 1 (a), not the name of the person signing the notice, and the notice is to be signed by a person authorised by the corporation to do so.
3. Describe that part of the business of the person giving the notice in the course of which the conduct is engaged in.
4. If particulars of a condition or of a reason of the type referred to in section 47 of the *Competition and Consumer Act 2010* have been reduced in whole or in part to writing, a copy of the writing is to be provided with the notice.
5. Describe the business or consumers likely to be affected by the conduct.
6. State an estimate of the highest number of persons with whom the entity giving the notice is likely to deal in the course of engaging in the conduct at any time during the next year.
7. Provide details of those public benefits claimed to result or to be likely to result from the proposed conduct including quantification of those benefits where possible.
8. Provide details of the market(s) likely to be affected by the notified conduct, in particular having regard to goods or services that may be substitutes for the good or service that is the subject matter of the notification.
9. Provide details of the detriments to the public which may result from the proposed conduct including quantification of those detriments where possible.

AUTHORITY

Notification: s93 Trade Practices Act

The Pharmacist authorises Health Partners Limited to:

- (a) give notice under s93(1) in the attached form; and
- (b) a copy of this Authority,

to the Australian Competition and Consumer Commission, for the Pharmacist.

"Pharmacist" is/are:

Mr Jack Gance & Partners.....

.....

.....

Together trading as: Central Market Gouger St Pharmacy

..... ACN:.....

Pharmacy trading at: Shop 39, 34 Gouger St , Adelaide SA
5000.....

DATED

Executed by the Pharmacist:

A. COMPANY

EXECUTED by the Pharmacist in accordance with section 127(1) of the Corporations Act 2001 (Cwlth) by:

(1) _____
(Signature)

(2) _____
(Signature)

(Print Name)

(Print Name)

(Print Position)

(Print Position)

and if only one person has signed, that person states that he/she signed in the capacity as sole director or sole company secretary of the Company.

OR

2

B. SOLE TRADER

Signed by the Pharmacist in the presence of:

(Signature)

(Print Name)

JACK GANCE

(Witness Signature)

Lance Vadala
C/O- Building F
44 Raglan Street

(Print Name)

WESTON VIC 3072

OR

C. PARTNERSHIP

(All pharmacists to sign if partnership)

Signed by the Pharmacist in the presence of:

(1) _____
(Signature)

(Print Name)

(Witness Signature)

(Full Name of Witness)

(2) _____
(Signature)

(Print Name)

(Witness Signature)

(Full Name of Witness)

(3) _____
(Signature)

(Witness Signature)

(Print Name)

(Full Name of Witness)

AUTHORITY

Notification: s93 Trade Practices Act

The Pharmacist authorises Health Partners Limited to:

- (a) give notice under s93(1) in the attached form; and
- (b) a copy of this Authority,

to the Australian Competition and Consumer Commission, for the Pharmacist.

"Pharmacist" is/are: VERONICA FERRARO (PHA 0001484105)
RAY RAVALICO

Together trading as: R. RAVALICO + SCAPPER PTY ACN:

Pharmacy trading at: T/A PRICELINE PHARMACY MITCHAM
119 BELAIR RD TORRENS PARK

DATED 20-3-17

Executed by the Pharmacist:

A. COMPANY

EXECUTED by the Pharmacist in accordance with section 127(1) of the Corporations Act 2001 (Cwlth) by:

(1) 
 (Signature)

(2) _____
 (Signature)

(Print Name)

(Print Name)

(Print Position)

(Print Position)

and if only one person has signed, that person states that he/she signed in the capacity as sole director or sole company secretary of the Company.

OR

B. SOLE TRADER

Signed by the Pharmacist in the presence of:

(Signature)

(Witness Signature)

(Print Name)

(Witness Full Name)

OR

C. PARTNERSHIP

(All pharmacists to sign if partnership)

Signed by the Pharmacist in the presence of:

(1) *V Ferraro*
(Signature)

 [Signature]
(Witness Signature)

 V FERRARO
(Print Name)

 Julie-Ann Power
(Full Name of Witness)

(2) *[Signature]*
(Signature)

 [Signature]
(Witness Signature)

 R Ferraro
(Print Name)

 Julie-Ann Power
(Full Name of Witness)

(3) _____
(Signature)

(Witness Signature)

(Print Name)

(Full Name of Witness)

Form G

Commonwealth of Australia

Competition and Consumer Act 2010 — subsection 93 (1)

NOTIFICATION OF EXCLUSIVE DEALING

To the Australian Competition and Consumer Commission:

Notice is hereby given, in accordance with subsection 93 (1) of the *Competition and Consumer Act 2010*, of particulars of conduct or of proposed conduct of a kind referred to subsections 47 (2), (3), (4), (5), (6), (7), (8) or (9) of that Act in which the person giving notice engages or proposes to engage.

PLEASE FOLLOW DIRECTIONS ON BACK OF THIS FORM

1. Applicant

- (a) Name of person giving notice:
(Refer to direction 2)

N99653 Ms Veronica Ferraro
("Pharmacist")

- (b) Short description of business carried on by that person:
(Refer to direction 3)

Pharmacist
Priceline Pharmacy Mitcham
119 Belair Belair Road, Torrens Park SA 5062

- (c) Address in Australia for service of documents on that person:

C/- Mr P Sayers
Health Partners Limited
Level 4, 101 Pirie Street
ADELAIDE SA 5000

2. Notified arrangement (Refer to direction 4)

- (a) Description of the goods or services in relation to the supply or acquisition of which this notice relates:

The provision by the Pharmacist of goods, other than pharmaceuticals available with a medical practitioner's prescription ("**Non Prescription Goods**").

- (b) Description of the conduct or proposed conduct:
- (i) The Pharmacist supplying or offering to supply Non Prescription Goods at a discount of 20% off its normal price on the condition that the person to whom the Pharmacist supplies or offers or proposes to supply Non Prescription Goods is a member of Health Partners and elects to contribute to its "Extras or Package" tables for general treatment health benefits services ("**Health Partners Extras or Package Members**").
 - (ii) The Pharmacist refusing to supply Non Prescription Goods at a discount of 20% off its normal price, for the reason that the person is not or has not agreed to become a Health Partners Extras or Package Member.

3. Persons, or classes of persons, affected or likely to be affected by the notified conduct

- (a) Class or classes of persons to which the conduct relates:
(Refer to direction 5)

Existing and future Health Partners Extras or Package Members.

- (b) Number of those persons:
(Refer to direction 6)

(i) At present time:
In excess of 62,000.

(ii) Estimated within the next year:
In excess of 62,000.

- (c) Where number of persons stated in item 3(b)(i) is less than 50, their names and addresses:

Not applicable.

4. Public benefit claims

- (a) Arguments in support of notification:
(Refer to direction 7)

- (i) Health Partners Extras or Package Members will receive a discount on Non Prescription Goods purchased from the Pharmacist;
 - (ii) Competition is promoted by encouraging competitors to offer similar discounts; and
 - (iii) Costs to Health Partners Extras or Package Members, who are otherwise not able to negotiate comparable discounts, are reduced.
- (b) Facts and evidence relied upon in support of these claims:

Not applicable.

5. Market definition

Provide a description of the market(s) in which the goods or services described at 2(a) are supplied or acquired and other affected markets including: significant suppliers and acquirers; substitutes available for the relevant goods or services; any restriction on the supply or acquisition of the relevant goods or services (for example geographic or legal restrictions):

(Refer to direction 8)

The market is suppliers of Non Pharmaceutical Goods in South Australia. These may be supplied by pharmacies, supermarkets and general merchants.

6. Public detriments

- (a) Detriments to the public resulting or likely to result from the notification, in particular the likely effect of the notified conduct on the prices of the goods or services described at 2(a) above and the prices of goods or services in other affected markets:
(Refer to direction 9)

There is no likely detriment.

- (b) Facts and evidence relevant to these detriments:

Not applicable.

7. Further information

- (a) Name, postal address and contact telephone details of the person authorised to provide additional information in relation to this notification:

C/- Mr P Sayers

Health Partners Limited
Level 4, 101 Pirie Street
ADELAIDE SA 5000

DATED

Signed by/on behalf of the applicant


.....
(Signature)

PETER SAYERS
HEALTH PARTNERS LIMITED
CHIEF FINANCIAL OFFICER

DIRECTIONS

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3. Describe that part of the business of the person giving the notice in the course of which the conduct is engaged in.
4. If particulars of a condition or of a reason of the type referred to in section 47 of the *Competition and Consumer Act 2010* have been reduced in whole or in part to writing, a copy of the writing is to be provided with the notice.
5. Describe the business or consumers likely to be affected by the conduct.
6. State an estimate of the highest number of persons with whom the entity giving the notice is likely to deal in the course of engaging in the conduct at any time during the next year.
7. Provide details of those public benefits claimed to result or to be likely to result from the proposed conduct including quantification of those benefits where possible.
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9. Provide details of the detriments to the public which may result from the proposed conduct including quantification of those detriments where possible.

AUTHORITY

Notification: s93 Trade Practices Act

The Pharmacist authorises Health Partners Limited to:

- (a) give notice under s93(1) in the attached form; and
- (b) a copy of this Authority,

to the Australian Competition and Consumer Commission, for the Pharmacist.

“Pharmacist” is/are: SIMON VALENTINCIC ATF THE
 VALENTINCIC CHURCHILL PHARMACY TRUST

.....
 PRICELINE PHARMACY CHURCHILL
 Together trading as: CENTRE ACN:.....

Pharmacy trading at: SHOPS 22-24, CHURCHILL CENTRE, 400 CHURCHILL RD,
 KILBURN, SA, 5084

DATED ..23-2-17.....

Executed by the Pharmacist:

A. COMPANY

EXECUTED by the Pharmacist in accordance with section 127(1) of the Corporations Act 2001 (Cwlth) by:

(1) _____
 (Signature)

(2) _____
 (Signature)

(Print Name)

(Print Name)

(Print Position)

(Print Position)

and if only one person has signed, that person states that he/she signed in the capacity as sole director or sole company secretary of the Company.

OR

B. SOLE TRADER

Signed by the Pharmacist in the presence of:

Simon Valentincic
(Signature)

SIMON VALENTINCIC
(Print Name)

Connie Rowes
(Witness Signature)

Connie Rowes
(Witness Full Name)

OR

C. PARTNERSHIP

(All pharmacists to sign if partnership)

Signed by the Pharmacist in the presence of:

(1) _____
(Signature)

(Print Name)

(Witness Signature)

(Full Name of Witness)

(2) _____
(Signature)

(Print Name)

(Witness Signature)

(Full Name of Witness)

(3) _____
(Signature)

(Print Name)

(Witness Signature)

(Full Name of Witness)

Form G

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PLEASE FOLLOW DIRECTIONS ON BACK OF THIS FORM

1. Applicant

- (a) Name of person giving notice:
(Refer to direction 2)

N99654 Mr Simon Valentincic
("Pharmacist")

- (b) Short description of business carried on by that person:
(Refer to direction 3)

Pharmacist
Priceline Pharmacy Churchill Centre
Shops 22-24 Churchill Centre
400 Churchill Road, Kilburn SA 5084

- (c) Address in Australia for service of documents on that person:

C/- Mr P Sayers
Health Partners Limited
Level 4, 101 Pirie Street
ADELAIDE SA 5000

2. Notified arrangement

(Refer to direction 4)

- (a) Description of the goods or services in relation to the supply or acquisition of which this notice relates:

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3. Persons, or classes of persons, affected or likely to be affected by the notified conduct

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(Refer to direction 5)

Existing and future Health Partners Extras or Package Members.

- (b) Number of those persons:
(Refer to direction 6)

(i) At present time:
In excess of 62,000.

(ii) Estimated within the next year:
In excess of 62,000.

- (c) Where number of persons stated in item 3(b)(i) is less than 50, their names and addresses:

Not applicable.

4. Public benefit claims

- (a) Arguments in support of notification:
(Refer to direction 7)

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 - (ii) Competition is promoted by encouraging competitors to offer similar discounts; and
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Not applicable.

5. Market definition

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- (a) Detriments to the public resulting or likely to result from the notification, in particular the likely effect of the notified conduct on the prices of the goods or services described at 2(a) above and the prices of goods or services in other affected markets:
- (Refer to direction 9)*

There is no likely detriment.

- (b) Facts and evidence relevant to these detriments:

Not applicable.

7. Further information

- (a) Name, postal address and contact telephone details of the person authorised to provide additional information in relation to this notification:

C/- Mr P Sayers

Health Partners Limited
Level 4, 101 Pirie Street
ADELAIDE SA 5000

DATED

Signed by/on behalf of the applicant


.....
(Signature)

PETER SAYERS
HEALTH PARTNERS LIMITED
CHIEF FINANCIAL OFFICER

DIRECTIONS

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