

### Privacy Notice

Your doctor is the controller of your personal information (including but not limited to, device ID and related order information (“**ID Information**”)). Your personal information will be shared with electroCore and its business partners, agents and distributors, together “**electroCore**” in order to a) supply you with gammaCore and b) arrange for you to be provided with training as to how to use gammaCore. electroCore is the controller of any personal information we are provided with (by you or the doctor) in order to administer training (including, but not limited to, your contact details and any ID Information).

Your personal information will only be shared with other third parties if otherwise permitted by applicable law, such as if necessary to protect your vital interests or those of another person or if necessary for the establishment, exercise or defence of legal claims.

Our legal basis for collecting and using your personal information will be consent.

Your information will be stored in the European Economic Area (“**EEA**”).

electroCore will retain your personal information for only as long as we have an ongoing legitimate need to do so, for example, whilst you are receiving gammaCore treatment. The personal information will then be either deleted or anonymised or, if this is not possible (for example, because your personal information has been stored in backup archives), then it will be securely stored until deletion is possible.

You may have the following rights in relation to your personal information: (i) to access, correct, update or request deletion of it; (ii) to object to processing of your personal information; (iii) to ask us to restrict processing of it; (iv) to request portability of it; and (v) to opt-out of marketing communications. You can exercise these rights by contacting us by using the contact details provided below. You can withdraw your consent at any time by written notice us using the contact details provided below. You may have similar rights as regards your doctor and to exercise those you should contact your doctor by your usual means of communication.

You have the right to complain to a data protection authority about our collection and use of your personal information. For more information, please contact your local data protection authority.

If you have any questions or concerns about our use of your personal information, please contact our Data Protection Officer using the following contact details: **DPO@electroCore.com**

**Patient Signature**

**Print Name**

**Date**





**gammaCore**<sup>®</sup>  
activate relief from the outside in™

# Authorisation Form

Please return the completed form to  
**Loxxess Pharma GmbH** on behalf of **electroCore, LLC**  
**Amberger Straße 1-3, D-82538 Geretsried-Gelting**

Hotline: +49 (0) 8171 483 58 300

E-Mail: [auftrag@loxxess-pharma.com](mailto:auftrag@loxxess-pharma.com)

Fax: +49 (0) 8171 483 58 390

**STEP 1 ORDERING PROCESS**  
Must be sent at least one day in advance of first order

## PATIENT INFORMATION

Name

Street

Postal Code

City

Country

Phone (mandatory)

e-mail

## PHYSICIAN AUTHORISATION

Doctor Name

Street

Postal Code

City

Country

Clinic / Hospital

Signature

Date

Stamp (mandatory)

## INTERNAL USE ONLY

Date Form Received

Date Customer Created

Customer ID

Please return the completed form to

**Loxxess Pharma GmbH**  
on behalf of **electroCore, LLC**  
**Amberger Straße 1-3**  
**D-82538 Geretsried-Gelting**

**LOXXESS**  
pharma logistics

Registration Hotline: +49 (0) 8171 483 58 300

Fax: +49 (0) 8171 483 58 390

E-mail: [auftrag@loxxess-pharma.com](mailto:auftrag@loxxess-pharma.com)



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gammaCore.com

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## STEP 2 ORDERING PROCESS

Authorization Form must be sent first

### CONTACT INFORMATION

Patient Name	Country
Street	Phone (mandatory)
Postal Code	e-mail
City	Customer ID#

CATALOGUE #	DESCRIPTION	QUANTITY	PRICE includes VAT and Shipping
10009-10601	<input type="checkbox"/> gammaCore, 31 day		

I understand that my doctor(s) and their staff will disclose my personal information (including, but not limited to, your name and address and other contact details, device ID and related order information (“ID Information”)) to electroCore and its business partners, agents and distributors, together “electroCore”, to be able to a) supply me with gammaCore, and b) arrange for me to be provided with training as to how to use gammaCore.

I consent to my doctor(s) and their staff disclosing my ID Information to electroCore for electroCore to provide me with training.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### PAYMENT OPTION A – Credit Card

Mastercard  VISA Card Number \_\_\_\_\_ Expiration Date (mm/yy) \_\_\_\_\_ CVC (3 digits on back) \_\_\_\_\_

Please charge the stated amount to my credit card (total): € \_\_\_\_\_ Cardholder Name \_\_\_\_\_ Cardholder Signature \_\_\_\_\_

Our customer service call center will be happy to contact you if you prefer to give your Credit Card details over the phone. Please be sure to fill in your phone number.

Best time to call Monday through Friday:  9:00–11:00 hrs  16:00–20:00 hrs **NOTE:** electroCore and its sub-contractors solely use this information for verification and fulfillment.

<b>INTERNAL USE ONLY</b>	Credit Card Clearance _____	Date of Phone Call _____
	Transaction ID _____	<input type="checkbox"/> Processed Amount billed € _____

### PAYMENT OPTION B – Health Insurance Reimbursement

**This payment option is exclusively for orders from Germany and only for patients who have already filed for individual reimbursement with their health insurance.**

Patient ID: _____	Invoicing address: _____
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<b>INTERNAL USE ONLY</b>	Insurance Check _____	<input type="checkbox"/> Address _____	<input type="checkbox"/> Adjusted Invoice address _____
		<input type="checkbox"/> File enclosed _____	

Date: _____	City/ Location: _____	Signature: _____
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## GENERAL

When ordering products from electroCore, the following conditions apply.

## AVAILABILITY

Delivery of gammaCore is determined by our choice for the fastest possible delivery. Delivery time varies depending on product availability, however, if product is available, it will be shipped within 3-5 days of receipt of payment. In the event that there is a delay in delivery, the customer will be informed of the reason for the delay and the new estimated delivery time.

## SUPPLY RISK

electroCore assumes the risk of damage or loss of the goods during shipment from the warehouse to the customer. In case of return of goods, the customer is responsible for the risk of damage or loss.

## PRICES

Price is subject to change.

## PAYMENT

electroCore offers card payment with Visa and Mastercard or bank transfer.

## SUBJECT TO CHANGES

We reserve the right to change prices, final sales, typographical errors, errors in product images and / or inaccurate information caused by technical or human error. We reserve the right to change prices and conditions of sale.

## REPAYMENT OF RETURN

Approved returns are refunded within 10 working days. When the goods have been paid by card the refund will be transferred to the card that was used with the purchase.

## RETURNS POLICY

electroCore will issue a replacement device within 7 days from receipt of returned device. electroCore will issue a replacement device for the products affected by the workmanship. It is important to examine the product carefully when it arrives. Any complaints regarding workmanship should be made within 7 days of product delivery date. Contact our customer service by phone +49 (0) 8171 483 58 300 or via e-mail address [auftrag@loxxess-pharma.com](mailto:auftrag@loxxess-pharma.com). Enter a brief description of the subject, your name and order number for further instructions. electroCore will send the affected device to the manufacturer for a final assessment. In case of any dispute, follow Consumer Complaints Board's recommendations.

## PRIVACY & SECURITY

electroCore and its Partners follow all local privacy laws in the country of sale. electroCore only uses your personal information to fulfill our commitments and communication to you.

## FRAUD ATTEMPT

All attempts at fraud will be prosecuted.

A valid authorisation from a physician

Orders without a physician consultation and validated Authorisation will not be fulfilled by electroCore and its Partners.

## FORCE MAJEURE

electroCore is not responsible for delays in performance (including shipping and warranty action) caused by circumstances beyond electroCore's control. Examples of circumstances beyond electroCore control is - but to be an exhaustive list - labor disputes, power failures, lightning, fire, atmospheric disturbances, legal enactment, government action, war, strikes or similar causes, possible blackouts, disruptions in charge of hosting / server etc.

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### Customer Service Center:

Loxxess Pharma GmbH on behalf of  
electroCore, LLC  
Amberger Straße 1-3  
D-82538 Geretsried-Gelting

Telephone: +49 (0) 8171 483 58 300  
E-mail: [auftrag@loxxess-pharma.com](mailto:auftrag@loxxess-pharma.com)  
Fax: +49 (0) 8171 483 58 390

