Fill in this information to identify the case:

Debtor 1 Apertor Pharmaceuticals, Inc.

Debtor 2 (Spouse, if filing) _____

United States Bankruptcy Court for the: District of Delaware

Case number 25-12201

☑ Date Stamped Copy Returned
☐ No self addressed stamped envelope
☐ No copy to return

Official Form 410

Proof of Claim

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached 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. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to $500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) **that you received.**

Part 1: Identify the Claim

1. **Who is the current creditor?**

Bio-Rad Laboratories, Inc.
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor _____

2. **Has this claim been acquired from someone else?**

☑ No
☐ Yes. From whom? _____

3. **Where should notices and payments to the creditor be sent?**
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?

Bio-Rad Laboratories, Inc.
Name

1000 Alfred Nobel Dr.
Number Street

Hercules CA 94547
City State ZIP Code

Contact phone 510-724-7000

Contact email bankruptcy_notices@bio-rad.com

Where should payments to the creditor be sent? (if different)

Name

Number Street

City State ZIP Code

Contact phone _____

Contact email _____

RECEIVED
JAN 21 2026
VERITA GLOBAL

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

_ _

4. **Does this claim amend one already filed?**

☑ No
☐ Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY

5. **Do you know if anyone else has filed a proof of claim for this claim?**

☑ No
☐ Yes. Who made the earlier filing? _____



Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?

- ☐ No
- ☑ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 7 3 5 4

7. How much is the claim? $ 4,137.34 . **Does this amount include interest or other charges?**

- ☑ No
- ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim?

Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.

Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).

Limit disclosing information that is entitled to privacy, such as health care information.

Goods sold

9. Is all or part of the claim secured?

- ☑ No
- ☐ Yes. The claim is secured by a lien on property.

Nature of property:

- ☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim.*
- ☐ Motor vehicle
- ☐ Other. Describe: _____

Basis for perfection: _____

Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: $_____

Amount of the claim that is secured: $_____

Amount of the claim that is unsecured: $_____ (The sum of the secured and unsecured amounts should match the amount in line 7.)

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JAN 21 2026
VERITA GLOBAL

Amount necessary to cure any default as of the date of the petition: $_____

Annual Interest Rate (when case was filed)_____%

- ☐ Fixed
- ☐ Variable

10. Is this claim based on a lease?

- ☑ No
- ☐ Yes. **Amount necessary to cure any default as of the date of the petition.** $_____

11. Is this claim subject to a right of setoff?

- ☑ No
- ☐ Yes. Identify the property: _____

12. **Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?**

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☑ No

☐ Yes. *Check one:*

	Amount entitled to priority
☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	$_____
☐ Up to $3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	$_____
☐ Wages, salaries, or commissions (up to $15,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	$_____
☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	$_____
☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	$_____
☐ Other. Specify subsection of 11 U.S.C. § 507(a)(__) that applies.	$_____

* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to $500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐ I am the creditor.

☑ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 01/14/2026
MM / DD / YYYY

SP Gerard
Signature

Print the name of the person who is completing and signing this claim:

Name: SP Gerard
First name | Middle name | Last name

Title: Paralegal

Company: Bio-Rad Laboratories, Inc.
Identify the corporate servicer as the company if the authorized agent is a servicer.

RECEIVED
JAN 21 2026
VERITA GLOBAL

Address: 1000 Alfred Nobel Dr.
Number Street

Hercules | CA | 94547
City | State | ZIP Code

Contact phone: 510-724-7000

Email: bankruptcy_notices@bio-rad.com

BIO-RAD

Bio-Rad Laboratories, Inc.

Corporate Offices
1000 Alfred Nobel Drive
Hercules, California 94547
Phone: 510-724-7000
Fax: 510-741-5815

January 16, 2026

Apple Tree Claims Processing Center
c/o KCC dba Verita
222 N. Pacific Coast Highway, Suite 300
El Segundo, CA 90245

Via Federal Express
Airbill 8879 7954 1668

Re: Apertor Pharmaceuticals, Inc. (administered with Apple Tree)
US Bankruptcy Court for the District of Delaware
Case no: 25-12201
Proof of Claim

Dear Sirs:

Please file the enclosed Proof of Claim in the above-entitled case and return a filed endorsed copy to me in the return FedEx envelope provided.

If you have any questions, please contact me by email at Shannon_Gerard@bio-rad.com.

Sincerely,

Shannon P. Gerard
Paralegal

encl.

Customer Statement

REMIT TO:
BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES, California 90084-9740, USA

Accounts Receivable Contact: 510-741-6892
John Petersen

APERTOR PHARMACEUTICALS INC
1640 S Loop Rd Ste 200
ALAMEDA CA 94502
USA

Customer Number: 1087354

Statement Date 12/17/2025

TRANSACTION DATE	P.O.NUMBER	CHARGES	CREDITS	AMOUNT DUE	CURR	INVOICE NO.
04-11-2025	5401	360.48	0.00	360.48	USD	0908170059
04-29-2025	5479	322.61	0.00	322.61	USD	0908210200
05-14-2025	5525	83.24	0.00	83.24	USD	0908249414
05-15-2025	5530	889.32	0.00	889.32	USD	0908252996
05-16-2025	5540	221.68	0.00	221.68	USD	0908257185
05-28-2025	5573	901.57	0.00	901.57	USD	0908283891
05-28-2025	5574	417.31	0.00	417.31	USD	0908283892
06-04-2025	5594	322.61	0.00	322.61	USD	0908303065
06-13-2025	5600	175.16	0.00	175.16	USD	0908330908
06-13-2025	5601	221.68	0.00	221.68	USD	0908330909
06-17-2025	5604	221.68	0.00	221.68	USD	0908338770

Customer Statement

REMIT TO:
BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES, California 90084-9740, USA

Accounts Receivable Contact: 510-741-6892
John Petersen

APERTOR PHARMACEUTICALS INC
1640 S Loop Rd Ste 200
ALAMEDA CA 94502
USA

Customer Number: 1087354

Statement Date 12/17/2025

0-30	31-60	61-90	OVER 90	TOTAL BALANCE DUE	CURR
0.00	0.00	0.00	4,137.34	4,137.34	USD

BIO-RAD

INVOICE : 908170059

Ship To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
In suite del onl,2nd fl
Alameda,CA 94502 US

Bio-Rad Laboratories, Inc.
1000 Alfred Nobel Drive
Hercules CA 94547

PLEASE REMIT TO

BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES CA 90084-9740
FEIN : 94-1381833

Bill To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

CUSTOMER NO.	INVOICE NO.	INVOICE DATE	CARRIER	FREIGHT
1087354	908170059	04-11-2025	UPS	DAP

PURCHASE ORDER ID	SHIP FROM	PAYMENT TERMS
5401	Richmond,CA	Net 30 Days

Sales Order: 1008746790 Order Date: 04-09-2025 Contact Name: JAMES O'BLENES

MATERIAL NUMBER BATCH S/N	QUANTITY ORDERED	QUANTITY SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
5671044	5	5	EA	12% Criterion TGX Gel 18 well 30 µl	17.10	85.50
64662861				QUOTE ID : UQ660489-CPQ25		
5671084	12	12	EA	4-15% Criterion TGX Gel 18W 30 µl	17.10	205.20
64671112				QUOTE ID : UQ660489-CPQ25		

Subtotal :	290.70
Tax :	31.89
Freight Charge :	31.89
Handling Charge :	6.00
Total USD :	360.48

Please state Invoice number with your payment: 908170059

For Credit or Invoice question call:

510-741-6892

This order is subject to Bio-Rad's standard terms and conditions of sale which can be accessed at www.bio-rad.com/terms-conditions

To place an order or schedule service call:
800-2BioRad (800) 224-6723

BIO-RAD

INVOICE : 908210200

Ship To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

Bio-Rad Laboratories, Inc.
1000 Alfred Nobel Drive
Hercules CA 94547

PLEASE REMIT TO

BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES CA 90084-9740
FEIN : 94-1381833

Bill To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

CUSTOMER NO.	INVOICE NO.	INVOICE DATE	CARRIER	FREIGHT
1087354	908210200	04-29-2025	UPS	DAP

PURCHASE ORDER ID	SHIP FROM	PAYMENT TERMS
5479	Richmond,CA	Net 30 Days

Sales Order: 1008788851 Order Date: 04-25-2025 Contact Name: Cameron Craig
Contact Phone Number: 8887109996

MATERIAL NUMBER BATCH S/N	QUANTITY ORDERED	QUANTITY SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
5671084	10	10	EA	4-15% Criterion TGX Gel 18W 30 µl	17.10	171.00
64672125				QUOTE ID : UQ660489-CPQ25		
5671044	5	5	EA	12% Criterion TGX Gel 18 well 30 µl	17.10	85.50
64664088				QUOTE ID : UQ660489-CPQ25		

Subtotal :	256.50
Tax :	28.22
Freight Charge :	31.89
Handling Charge :	6.00
Total USD :	322.61

Please state Invoice number with your payment: 908210200

For Credit or Invoice question call:
510-741-6892
This order is subject to Bio-Rad's standard terms and conditions of sale which can be accessed at www.bio-rad.com/terms-conditions

To place an order or schedule service call:
800-2BioRad (800) 224-6723

BIO-RAD

INVOICE : 908249414

Ship To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

Bio-Rad Laboratories, Inc.
1000 Alfred Nobel Drive
Hercules CA 94547

PLEASE REMIT TO

BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES CA 90084-9740
FEIN : 94-1381833

Bill To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

CUSTOMER NO.	INVOICE NO.	INVOICE DATE	CARRIER	FREIGHT
1087354	908249414	05-14-2025	UPS	DAP

PURCHASE ORDER ID	SHIP FROM	PAYMENT TERMS
5525	Richmond,CA	Net 30 Days

Sales Order: 1008831858 Order Date: 05-12-2025 Contact Name: Andrew Thornell
Contact Phone Number: 888-710-9996

MATERIAL NUMBER BATCH S/N	QUANTITY ORDERED	QUANTITY SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1610781 64657911	1	1	EA	10% Tween 20, 1 L	52.00	52.00

Subtotal :	52.00
Tax :	5.59
Freight Charge :	25.65
Total USD :	83.24

Please state Invoice number with your payment: 908249414

For Credit or Invoice question call:
510-741-6892
This order is subject to Bio-Rad's standard terms and conditions of sale which can be accessed at www.bio-rad.com/terms-conditions

To place an order or schedule service call:
800-2BioRad (800) 224-6723

BIO-RAD

INVOICE : 908252996

Ship To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd Do not leave packages outside
Alameda,CA 94502 US

Bio-Rad Laboratories, Inc.
1000 Alfred Nobel Drive
Hercules CA 94547

PLEASE REMIT TO

BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES CA 90084-9740
FEIN : 94-1381833

Bill To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

CUSTOMER NO.	INVOICE NO.	INVOICE DATE	CARRIER	FREIGHT
1087354	908252996	05-15-2025	UPS	DAP

PURCHASE ORDER ID	SHIP FROM	PAYMENT TERMS
5530	Richmond,CA	Net 30 Days

Sales Order: 1008838576 Order Date: 05-14-2025 Contact Name: Nicole Femino

MATERIAL NUMBER BATCH S/N	QUANTITY ORDERED	QUANTITY SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1704271 64677748	2	2	EA	Trans-Blot Turbo RTA Midi NC 40 blots PROMO CODE : RTA30OFF Ready-to-assemble transfer kit includes 40 midi-sized 0.2 µm nitrocellulose membranes (8.5 x 13.5 cm), 80 transfer stacks, 2 L 5x tr ansfer buffer, and 2 gel trays for wetting and equilibrating membranes and transfer stacks	387.10	774.20

Subtotal :	774.20
Tax :	83.23
Freight Charge :	31.89
Total USD :	889.32

Please state Invoice number with your payment: 908252996

For Credit or Invoice question call:
510-741-6892
This order is subject to Bio-Rad's standard terms and conditions of sale which can be accessed at www.bio-rad.com/terms-conditions

To place an order or schedule service call:
800-2BioRad (800) 224-6723

BIO-RAD

INVOICE : 908257185

Ship To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

Bio-Rad Laboratories, Inc.
1000 Alfred Nobel Drive
Hercules CA 94547

PLEASE REMIT TO

BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES CA 90084-9740
FEIN : 94-1381833

Bill To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

CUSTOMER NO.	INVOICE NO.	INVOICE DATE	CARRIER	FREIGHT
1087354	908257185	05-16-2025	UPS	DAP

PURCHASE ORDER ID	SHIP FROM	PAYMENT TERMS
5540	Richmond,CA	Net 30 Days

Sales Order: 1008839395 Order Date: 05-14-2025 Contact Name: NICOLE FEMINO
Contact Phone Number: (888)710-9996

MATERIAL NUMBER BATCH S/N	QUANTITY ORDERED	QUANTITY SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
5671084	10	10	EA	4-15% Criterion TGX Gel 18W 30 µl	17.10	171.00
64675840						
				QUOTE ID : UQ660489-CPQ25		

Subtotal :	171.00
Tax :	19.03
Freight Charge :	25.65
Handling Charge :	6.00
Total USD :	221.68

Please state Invoice number with your payment: 908257185

For Credit or Invoice question call:
510-741-6892

This order is subject to Bio-Rad's standard terms and conditions of sale which can be accessed at www.bio-rad.com/terms-conditions

To place an order or schedule service call:
800-2BioRad (800) 224-6723

BIO-RAD

INVOICE : 908283891

Ship To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

Bio-Rad Laboratories, Inc.
1000 Alfred Nobel Drive
Hercules CA 94547

PLEASE REMIT TO

BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES CA 90084-9740
FEIN : 94-1381833

Bill To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

CUSTOMER NO.	INVOICE NO.	INVOICE DATE	CARRIER	FREIGHT
1087354	908283891	05-28-2025	UPS	DAP

PURCHASE ORDER ID	SHIP FROM	PAYMENT TERMS
5573	Richmond,CA	Net 30 Days

Sales Order: 1008866879 Order Date: 05-23-2025 Contact Name: Cameron Craig

MATERIAL NUMBER BATCH S/N	QUANTITY ORDERED	QUANTITY SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1704271	2	2	EA	Trans-Blot Turbo RTA Midi NC 40 blots	392.63	785.26
64677748						
				QUOTE ID : QQ683436-CPQ25		

Subtotal :	785.26
Tax :	84.42
Freight Charge :	31.89
Total USD :	901.57

Please state Invoice number with your payment: 908283891

For Credit or Invoice question call:

510-741-6892

This order is subject to Bio-Rad's standard terms and conditions of sale which can be accessed at www.bio-rad.com/terms-conditions

To place an order or schedule service call:
800-2BioRad (800) 224-6723

BIO-RAD

INVOICE : 908283892

Ship To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

Bio-Rad Laboratories, Inc.
1000 Alfred Nobel Drive
Hercules CA 94547

PLEASE REMIT TO

BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES CA 90084-9740
FEIN : 94-1381833

Bill To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

CUSTOMER NO.	INVOICE NO.	INVOICE DATE	CARRIER	FREIGHT
1087354	908283892	05-28-2025	UPS	DAP

PURCHASE ORDER ID	SHIP FROM	PAYMENT TERMS
5574	Richmond,CA	Net 30 Days

Sales Order: 1008869897 Order Date: 05-26-2025 Contact Name: Robert Gray

Contact Phone Number: 8887109996

MATERIAL NUMBER BATCH S/N	QUANTITY ORDERED	QUANTITY SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
5671084	10	10	EA	4-15% Criterion TGX Gel 18W 30 µl	17.10	171.00
64677245				QUOTE ID : UQ660489-CPQ25		
5671044	10	10	EA	12% Criterion TGX Gel 18 well 30 µl	17.10	171.00
64674700				QUOTE ID : UQ660489-CPQ25		

Subtotal :	342.00
Tax :	37.42
Freight Charge :	31.89
Handling Charge :	6.00
Total USD :	417.31

Please state Invoice number with your payment: 908283892

For Credit or Invoice question call:

510-741-6892

This order is subject to Bio-Rad's standard terms and conditions of sale which can be accessed at www.bio-rad.com/terms-conditions

To place an order or schedule service call:
800-2BioRad (800) 224-6723

BIO-RAD

INVOICE : 908303065

Ship To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

Bio-Rad Laboratories, Inc.
1000 Alfred Nobel Drive
Hercules CA 94547

PLEASE REMIT TO

BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES CA 90084-9740
FEIN : 94-1381833

Bill To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

CUSTOMER NO.	INVOICE NO.	INVOICE DATE	CARRIER	FREIGHT
1087354	908303065	06-04-2025	UPS	DAP

PURCHASE ORDER ID	SHIP FROM	PAYMENT TERMS
5594	Richmond,CA	Net 30 Days

Sales Order: 1008888453 Order Date: 06-02-2025 Contact Name: MEGHAN WILSON

MATERIAL NUMBER BATCH S/N	QUANTITY ORDERED	QUANTITY SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
5671084	15	15	EA	4-15% Criterion TGX Gel 18W 30 µl	17.10	256.50
64677245						
				QUOTE ID : UQ660489-CPQ25		

Subtotal :	256.50
Tax :	28.22
Freight Charge :	31.89
Handling Charge :	6.00
Total USD :	322.61

Please state Invoice number with your payment: 908303065

For Credit or Invoice question call:

510-741-6892

This order is subject to Bio-Rad's standard terms and conditions of sale which can be accessed at www.bio-rad.com/terms-conditions

To place an order or schedule service call:
800-2BioRad (800) 224-6723

BIO-RAD

INVOICE : 908330908

Ship To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

Bio-Rad Laboratories, Inc.
1000 Alfred Nobel Drive
Hercules CA 94547

PLEASE REMIT TO

BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES CA 90084-9740
FEIN : 94-1381833

Bill To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

CUSTOMER NO.	INVOICE NO.	INVOICE DATE	CARRIER	FREIGHT
1087354	908330908	06-13-2025	UPS	DAP

PURCHASE ORDER ID	SHIP FROM	PAYMENT TERMS
5600	Richmond,CA	Net 30 Days

Sales Order: 1008915104 Order Date: 06-11-2025 Contact Name: Andrew Thornell
Contact Phone Number: 8887109996

MATERIAL NUMBER BATCH S/N	QUANTITY ORDERED	QUANTITY SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1610772 64679924	1	1	EA	10x Tris/Glycine/SDS 5L	135.00	135.00

Subtotal :	135.00
Tax :	14.51
Freight Charge :	25.65
Total USD :	175.16

Please state Invoice number with your payment: 908330908

For Credit or Invoice question call:

510-741-6892

This order is subject to Bio-Rad's standard terms and conditions of sale which can be accessed at www.bio-rad.com/terms-conditions

To place an order or schedule service call:
800-2BioRad (800) 224-6723

BIO-RAD

INVOICE : 908330909

Ship To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

Bio-Rad Laboratories, Inc.
1000 Alfred Nobel Drive
Hercules CA 94547

PLEASE REMIT TO

BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES CA 90084-9740
FEIN : 94-1381833

Bill To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

CUSTOMER NO.	INVOICE NO.	INVOICE DATE	CARRIER	FREIGHT
1087354	908330909	06-13-2025	UPS	DAP

PURCHASE ORDER ID	SHIP FROM	PAYMENT TERMS
5601	Richmond,CA	Net 30 Days

Sales Order: 1008915143 Order Date: 06-11-2025 Contact Name: Andrew Thornell

MATERIAL NUMBER BATCH S/N	QUANTITY ORDERED	QUANTITY SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
5671044	10	10	EA	12% Criterion TGX Gel 18 well 30 µl	17.10	171.00
64674700						
				QUOTE ID : UQ660489-CPQ25		

Subtotal :	171.00
Tax :	19.03
Freight Charge :	25.65
Handling Charge :	6.00
Total USD :	221.68

Please state Invoice number with your payment: 908330909

For Credit or Invoice question call:

510-741-6892

This order is subject to Bio-Rad's standard terms and conditions of sale which can be accessed at www.bio-rad.com/terms-conditions

To place an order or schedule service call:
800-2BioRad (800) 224-6723

BIO-RAD

INVOICE : 908338770

Ship To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

Bio-Rad Laboratories, Inc.
1000 Alfred Nobel Drive
Hercules CA 94547

PLEASE REMIT TO

BIO-RAD LABORATORIES, INC
P.O. Box 849740
LOS ANGELES CA 90084-9740
FEIN : 94-1381833

Bill To:

Customer # 1087354
APERTOR PHARMACEUTICALS INC
1640,Ste 200 S Loop Rd
Alameda,CA 94502 US

CUSTOMER NO.	INVOICE NO.	INVOICE DATE	CARRIER	FREIGHT
1087354	908338770	06-17-2025	UPS	DAP

PURCHASE ORDER ID	SHIP FROM	PAYMENT TERMS
5604	Richmond,CA	Net 30 Days

Sales Order: 1008927092 Order Date: 06-16-2025 Contact Name: Andrew Thornell
Contact Phone Number: 8887109996

MATERIAL NUMBER BATCH S/N	QUANTITY ORDERED	QUANTITY SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
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