## Online Claim Submission

Code: BJ8

Employer: Brebeuf Jesuit Preparatory School

EmpID: 350800596

EmpName: Hampton, Ted

Submitted: January 17, 2023

Batch: 29909757

Claim Total: \$73.55

Attachments: 2

Line	Service Date(s)	Type	Cost	Notes				
1	1/16/2023 RX \$73.55 Provider: Empower Pharmacy. For		Provider: Empower Pharmacy. For whom:					
			Theodore Hampton.					

## **Empower Pharmacy**

7601 N. Sam Houston Parkway W. Houston, TX 77064 RETURN SERVICE REQUESTED

Payment by:			
Check Mastercard	Visa Discover American E.		
Credit Card		Expiration Date	Ī
Signature		CVV/CVC	-
	Amount Due	\$ 0.00	=
	Payor ID	205566342	_

Billing Profile ID

TH

CARMEL, IN 46280

PLEASE RETURN TOP PORTION WITH YOUR PAYMENT AND KEEP BOTTOM PORTION FOR YOUR RECORDS

Please Remit To:

**Empower Pharmacy** 

Houston, TX 77064

7601 N. Sam Houston Parkway W.

Empower Pharmacy 7601 N. Sam Houston Parkway W. Houston, TX 77064

For Billing Questions Call(832)678-4417 Email Billing@empowerpharmacy.com Payment #63887582 TX Status: This transaction has been approved.

\$ 0.00

Date	Order	Rx	Patient	Description	Doctor	Qty	Unit Price	Discount/ Item	Amount
01/16/2023	63899490	23377534	Н, Т	RX 23377534	TATEM, ALEXANDER	1	\$ 0.00		\$ 0.00
01/16/2023	63899490	23377535	H, T	RX 23377535	TATEM, ALEXANDER	1	\$ 61.05		\$ 61.05
01/16/2023	63899490			UPS Priority 2-Day		1	\$ 12.50		\$ 12.50
								Subtotal	\$73.55
								TOTAL CHARGES	\$ 73.55
01/16/2023				American_Express 1004 - TX Ref. Number: 64157268360		1	\$ 73.55		(\$ 73.55)
								CHANGE DUE	\$ 0.00
								ACCOUNT BALANCE	\$ 0.00

Please Note: Compounded prescriptions are made specially for you and cannot be returned.

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