

## Online Claim Submission

Code: CRO  
Employer: CrowdStrike Inc.  
EmplID: 464611691  
EmpName: Puzas, David  
Submitted: January 16, 2023  
Batch: 29891558  
Claim Total: \$303.91  
Attachments: 4

**\* OFFSET \***

Line	Service Date(s)	Type	Cost	Notes
1	4/1/2022	RX	\$303.91	Provider: Publix Pharmacy. For whom: Denise Puzas, David Puzas. **OFFSET OFFSET OFFSET** 04/11/2022, \$303.91, PAY* ENVISIONPHYSSERV These are to be used to offset the \$1,000 in addition to the other 2 that were sent



# Pharmacy

Enterprise Pharmacy System  
Customer Statement  
Version 1.0

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Patient Name: DENISE PUZAS  
Street Address: 4718 ANDROMEDA LN  
City: HOCHSTON  
State: GA  
Zip: 30548  
Birthdate: 02/28/1969

Pharmacy Name: 0108  
Street Address: 2095 HWY 211 NW  
City: BRASELTON  
State: GA  
Zip: 30537  
Phone No: (878) 425-6256  
Fax No: (878) 363-4403  
Federal Tax ID: 590324412

Phone No: (770) 313-8261

Prescriber Name

Ad Date	Store #	Rx #	Fill #	Product	NDC #	Qty	Unit	Days	Prescriber Name	PT Pay Amt Total	Primary TP Name	Prior Auth	LOF
07/10/2022	01042222	0969	220046	HYDROCODONE-ACETAMIN 7/3.25(30)	2788-028-03	90.000	EA	30	WFLA, PATEL	8.14	INFORMED RX		N
12/29/2021	01042222	0969	644829	HYDROCODONE-ACETAMIN 7/3.25(30)	44802-018-00	100.000	GM	25	WFLA, PATEL	8.47	INFORMED RX	9999	N
02/05/2022	02050222	0969	326271	HYDROCODONE-ACETAMIN 7/3.25(30)	2788-028-03	90.000	EA	30	WFLA, PATEL	8.14	INFORMED RX		N
07/19/2022	02050222	0969	644810	HYDROCODONE-ACETAMIN 7/3.25(30)	44802-018-00	100.000	GM	25	WFLA, PATEL	10.49	INFORMED RX	9999	N
02/09/2022	02050222	0969	644815	HYDROCODONE-ACETAMIN 7/3.25(30)	44802-018-00	100.000	GM	25	WFLA, PATEL	10.49	INFORMED RX	9999	N
07/06/2022	02050222	0969	220040	HYDROCODONE-ACETAMIN 7/3.25(30)	2788-028-03	90.000	EA	30	WFLA, PATEL	8.14	INFORMED RX		N
04/05/2022	04050222	0969	220041	HYDROCODONE-ACETAMIN 7/3.25(30)	2788-028-03	90.000	EA	30	WFLA, PATEL	8.49	INFORMED RX	9999	N
03/17/2022	04050222	0969	609020	HYDROCODONE-ACETAMIN 7/3.25(30)	44802-018-00	100.000	GM	25	PATRIC ALABO	10.49	INFORMED RX	9999	N
04/02/2022	04050222	0704	601061	ACETAMINOPHEN 325 MG TAB	6942-0171-3	6.000	EA	5	WALBEC BATH	3.54	INFORMED RX		N
04/02/2022	04050222	0969	609020	HYDROCODONE-ACETAMIN 7/3.25(30)	44802-018-00	100.000	GM	25	PATRIC ALABO	11.90	INFORMED RX	9999	N
05/04/2022	05050222	0969	226143	HYDROCODONE-ACETAMIN 7/3.25(30)	2788-028-03	90.000	EA	30	PATRIC ALABO	9.91	INFORMED RX		N
05/05/2022	05050222	0969	601919	WALBEC BATH	59746-001-03	21.000	EA	6	ALEXANDER DEAN	3.79	INFORMED RX		N
05/05/2022	05050222	0969	601919	WALBEC BATH	59746-001-03	21.000	EA	7	ALEXANDER DEAN	6.11	INFORMED RX		N
05/15/2022	05050222	0969	601403	HYDROCODONE-ACETAMIN 7/3.25(30)	44802-018-00	100.000	GM	25	WFLA, PATEL	11.90	INFORMED RX	9999	N

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Date Range From: 01/01/2022 To: 12/31/2022

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Phone No: (770) 313-8261

Prescriber Name

Ad Date	Store #	Rx #	Fill #	Product	NDC #	Qty	Unit	Days	Prescriber Name	PT Pay Amt Total	Primary TP Name	Prior Auth	LOF
08/15/2022	08150222	0969	603707	HYDROCODONE-ACETAMIN 7/3.25(30)	2788-028-03	100.000	GM	25	WFLA, PATEL	12.38	INFORMED RX		N
08/16/2022	08160222	0969	603703	HYDROCODONE-ACETAMIN 7/3.25(30)	44802-018-00	2.000	EA	2	ALEXANDER DEAN	2.90	INFORMED RX		N
08/16/2022	08160222	0969	603703	HYDROCODONE-ACETAMIN 7/3.25(30)	44802-018-00	21.000	EA	6	ALEXANDER DEAN	3.95	INFORMED RX		N
08/16/2022	08160222	0969	603703	HYDROCODONE-ACETAMIN 7/3.25(30)	44802-018-00	21.000	EA	7	ALEXANDER DEAN	6.39	INFORMED RX		N
10/03/2022	10030222	0969	644810	HYDROCODONE-ACETAMIN 7/3.25(30)	44802-018-00	100.000	GM	25	WFLA, PATEL	12.94	INFORMED RX	9999	N
10/03/2022	10030222	0969	644810	HYDROCODONE-ACETAMIN 7/3.25(30)	44802-018-00	100.000	GM	25	WFLA, PATEL	10.78	INFORMED RX		N
11/03/2022	11030222	0969	220042	HYDROCODONE-ACETAMIN 7/3.25(30)	2788-028-03	90.000	EA	30	WFLA, PATEL	10.78	INFORMED RX		N
12/03/2022	12030222	0969	220042	HYDROCODONE-ACETAMIN 7/3.25(30)	2788-028-03	90.000	EA	30	WFLA, PATEL	8.14	INFORMED RX		N
12/04/2022	12040222	0704	602140	PREDNISONE 20 MG TAB	69219-1708-01	9.500	EA	3	LEELEY ALBERT	1.57	INFORMED RX		N

Date Range: From: 01/01/2022 To: 12/31/2022

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State: GA Zip: 30517  
Fax No: (678) 358-4403

PT Pay	Primary TP Name	Prior Auth	LOF
Amt Total			

[illegible]

Age	Gender	Time (min)	SE
10	Male	10.0	0.1
10	Female	10.0	0.1
15	Male	10.0	0.1
15	Female	10.0	0.1
20	Male	10.0	0.1
20	Female	10.0	0.1
25	Male	10.0	0.1
25	Female	10.0	0.1
30	Male	10.0	0.1
30	Female	10.0	0.1
35	Male	10.0	0.1
35	Female	10.0	0.1
40	Male	10.0	0.1
40	Female	10.0	0.1
45	Male	10.0	0.1
45	Female	10.0	0.1
50	Male	10.0	0.1
50	Female	10.0	0.1
55	Male	10.0	0.1
55	Female	10.0	0.1
60	Male	10.0	0.1
60	Female	10.0	0.1
65	Male	10.0	0.1
65	Female	10.0	0.1
70	Male	10.0	0.1
70	Female	10.0	0.1
75	Male	10.0	0.1
75	Female	10.0	0.1
80	Male	10.0	0.1
80	Female	10.0	0.1
85	Male	10.0	0.1
85	Female	10.0	0.1
90	Male	10.0	0.1
90	Female	10.0	0.1
95	Male	10.0	0.1
95	Female	10.0	0.1
100	Male	10.0	0.1
100	Female	10.0	0.1

0.01 THE CONTACT NO. 46

Year	Infected Rx	9.01
2000	100	100
2001	100	100
2002	100	100
2003	100	100
2004	100	100
2005	100	100
2006	100	100
2007	100	100
2008	100	100
2009	100	100
2010	100	100
2011	100	100
2012	100	100
2013	100	100
2014	100	100
2015	100	100
2016	100	100
2017	100	100
2018	100	100
2019	100	100
2020	100	100
2021	100	100
2022	100	100
2023	100	100
2024	100	100
2025	100	100
2026	100	100
2027	100	100
2028	100	100
2029	100	100
2030	100	100
2031	100	100
2032	100	100
2033	100	100
2034	100	100
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2036	100	100
2037	100	100
2038	100	100
2039	100	100
2040	100	100
2041	100	100
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2043	100	100
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2091	100	100
2092	100	100
2093	100	100
2094	100	100
2095	100	100
2096	100	100
2097	100	100
2098	100	100
2099	100	100
2100	100	100

11.80	INFORMED RX	IN
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12.35	WPCOMC02.DX	1999	16
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10.26 THE CORRELATION COEFFICIENT

5.00 IN-CANAL RICE

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State: GA Zip: 30517  
Fax No: (678) 368-4403

Amt Total

01/02/2023 14:34







Pharmacy

Patient Name:

DAVID L PUZAS

Street Address:

4716 ARDMORE LANE

City:

HOSCHTON

Birthdate:

12/31/1968

Phone No:

(770) 313-8259

Pharmacy Name:

2095 HWY 211 NW

Street Address:

BRASELTON

City:

(678) 425-6206

Phone No:

590324412

Federal Tax ID:

State: GA

Fax No:

Zip: 30517

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EnterpriseRx Pharmacy System  
Customer Statement  
version 1.0

Adj Date	Sold	Store #	Rx #	Fill #	Product	NDC #	Qty	Unit	Days	Prescriber Name	PT Pay	Primary TP Name	Prior Auth	LOF
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01/05/2022	0108	6796011	00	LOSARTAN 50 MG TAB[1]	00054-0124-22	15.000	EA	30		GARY DALEY	11.44	BCBS COMMERCIAL		N
01/27/2022	0108	6800307	00	ATORVASTATIN 10 MG TAB[1]	63304-0827-05	30.000	EA	30		GARY DALEY	0.00	BCBS COMMERCIAL		N
01/27/2022	0108	6800307	00	LOSARTAN 50 MG TAB[1]	00054-0124-22	15.000	EA	30		GARY DALEY	11.44	BCBS COMMERCIAL		N
01/27/2022	0108	6800307	00	LOSARTAN 50 MG TAB[1]	00054-0124-22	15.000	EA	30		GARY DALEY	11.44	BCBS COMMERCIAL		N
02/16/2022	0108	6803889	00	ATORVASTATIN 10 MG TAB[1]	63304-0827-05	90.000	EA	90		WESLEY FIELD	0.00	BCBS COMMERCIAL		N
02/16/2022	0108	6803889	00	LOSARTAN 50 MG TAB	65862-0202-99	45.000	EA	90		WESLEY FIELD	27.96	BCBS COMMERCIAL		N
04/11/2022	0108	6813048	00	AZITHROMYCIN 250 MG TAB	69452-0171-73	6.000	EA	5		ANAMARIA MCCLAUDE	6.30	BCBS COMMERCIAL	9996	N
04/11/2022	0108	6813047	00	PREDNISONE 10 MG DSPK	00603-5338-15	21.000	EA	6		ANAMARIA MCCLAUDE	15.00	BCBS COMMERCIAL	9996	N
04/25/2022	0108	6803890	01	LOSARTAN 50 MG TAB[1]	64380-0934-08	45.000	EA	90		WESLEY FIELD	13.39	AMERISAVE RX DC		N
05/18/2022	0108	6803889	01	ATORVASTATIN 10 MG TAB[1]	63304-0827-05	90.000	EA	90		WESLEY FIELD	0.00	BCBS COMMERCIAL		N
05/18/2022	0108	6803890	02	LOSARTAN 50 MG TAB[1]	64380-0934-08	45.000	EA	90		WESLEY FIELD	13.39	AMERISAVE RX DC		N
08/18/2022	0108	6835491	00	METOPROLOL TART 50 MG	52817-0361-00	180.000	EA	90		LAURA VOGT	7.50	AMERISAVE RX DC	9996	N
08/18/2022	0108	6835490	00	ELIQUIS 5 MG TAB[1]	00003-0894-21	74.000	EA	12		LAURA VOGT	0.00	ELIQUIS COPAY	9996	N
08/18/2022	0108	6835489	00	ATORVASTATIN 40 MG TAB[1]	72205-0024-05	90.000	EA	90		LAURA VOGT	16.65	AMERISAVE RX DC	9996	N
09/03/2022	0108	6803890	03	LOSARTAN 50 MG TAB[1]	64380-0934-08	45.000	EA	90		WESLEY FIELD	13.39	AMERISAVE RX DC		N
09/12/2022	0108	6835490	01	ELIQUIS 5 MG TAB[1]	00003-0894-21	80.000	EA	30		LAURA VOGT	25.00	INFORMED RX		N

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