

Online Claim Submission

Code: 925
Employer: Contra Costa County
EmplID: 90755
EmpName: Deng, Eva
Submitted: February 10, 2023
Batch: 30283614
Claim Total: \$25.60
Attachments: 2

Line	Service Date(s)	Type	Cost	Notes
1	2/1/2023	RX	\$10.00	Provider: Kaiser Permanente. For whom: Roderick Uribe.
2	2/10/2023	RX	\$15.60	Provider: Kaiser Permanente. For whom: Kaitlyn Chew.



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Berkeley OP Pharmacy
2621 Tenth Street FL 2 RM2505
Berkeley, CA 94710
510-898-4279

2/10/23 4:33 PM
Trans.: 6162 Store: 02910
Reg.: 005 Till: 5004
Cashier: K960752 Sales: K960752

SALE

RX 291000374556 0.00 NY

RX 291000374571 5.60 NY

RX 291000374555 10.00 NY

Subtotal 15.60

Total Sales Tax 0.00

Total 15.60

Credit 15.60

Card: Visa

Account: 6244

Auth: 03605C (A)

Entry: Chip Read

APPROVED

Mode: ISSUER
AID: A0000000031010
TVR: 8080008000
IAD: 06011203A0A000
TSI: 6800
ARC: 00
APP: VISA CREDIT

Total Tender 15.60

Change Due 0.00



02910005616220230210

Y=Health Care Eligible
Healthcare Eligible Amount 15.60

Healthcare summary above includes items
(and tax) that may be eligible for plan
reimbursement. Restrictions may apply.

Customer Copy



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Oakland Main 1st FL Pharmacy
3600 Broadway, 1st Fl
Oakland, CA 94611
510-752-4200

2/1/23 4:49 PM
Trans.: 1324 Store: 02105
Reg.: 005 Till: 005mm
Cashier: S084869 Sales: S084869

SALE

RX 210502603833 10.00 NY

Subtotal 10.00
Total Sales Tax 0.00
Total 10.00

Credit 10.00
Card: Visa
Account: 7667
Auth: 08332C (A)
Entry: Chip Read

APPROVED

Mode: ISSUER
AID: A0000000031010
TVR: 0080008000
IAD: 06010A03A02002
TSI: E800
ARC: 00
APP: CHASE VISA

Total Tender 10.00
Change Due 0.00



02105005132420230201

Y=Health Care Eligible
Healthcare Eligible Amount 10.00

Healthcare summary above includes items
(and tax) that may be eligible for plan
reimbursement. Restrictions may apply.

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