## Online Claim Submission

Code: SWB

Employer: WA State SEBB

EmpID: 532483824

EmpName: REPP, GERRY

Submitted: February 10, 2023

Batch: 30282523

Claim Total: \$216.66

Attachments: 2

Line	Service Date(s)	Type	Cost	Notes
1	2/9/2023	RX	\$216.66	Provider: Fred Meyer. For whom: Self.

SAVE THIS RECEIPT FOR REFUNDS OR ADJUSTMENTS



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PICK-UP: 02/07 03:25PM

# **ORANGE - 317**

### REPP, **GERRY C**

Loyalty:

Prescriber: WHEELER, ANNE

02/06/2023 (NWC - UNIFORM) Patient Pay Amount: \$216.66

Prescription qualifies for points. Check register receipt for point balance.

REFILL

DOB: 10/31/1954 Rx # 6678739

ESTRING 2 MG VAGINAL RING Patient Pay Amount: \$216.66 Day Supply: 90 Quantity: 1

#### **Directions:**

PLACE ONE RING VAGINALLY ONE TIME ONLY FOR ONE DOSE --FOLLOWING PACKAGE INSTRUCTIONS

Allergies:

SULFA (SULFONAMIDE ANTIBI **PENICILLINS** CEPHALOSPORINS OPIOIDS - MORPHINE ANALOG Codeine Phosphate (Bulk)



Ship By: 8:59 PM Filled By:PCF

701-424

**VWC - UNIFORM MED** Rx# **ERRY C REPP** Signature not required Safety Caps 6678739 Insurance 02/06/2023 'Refill\* <u></u> by

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