

## Online Claim Submission

Code: BUR

Employer: Burns & McDonnell

EmpID: 441881782

EmpName: Way, Michael

Submitted: February 11, 2023

Batch: 30292118

Claim Total: \$7.81

Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	2/4/2023	RX	\$7.81	Provider: Wlagreens. For whom: Andrew.

Walgreens

#06436 1400 E 2ND ST  
EDMOND, OK 73034  
405-216-9672

212 1619 0092 02/04/2023 7:54 PM  
FSA RX 3471352 7.81

TOTAL 7.81  
VISA ACCT 3738 7.81  
AUTH CODE 023730  
CHANGE .00

TOTAL FSA ITEMS 0.00  
TOTAL RX ITEMS 7.81  
TOTAL FSA AND RX ITEMS 7.81  
APPROVED FSA/HRA AMOUNT 0.00

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\*\*\*\*\*

myWalgreens

\$0.92 W CASH REWARDS AVAILABLE

myWalgreens ACCT # \*\*\*\*\*5980

OPENING BALANCE \$0.85  
EARNED THIS VISIT \$0.07  
CLOSING BALANCE \$0.92

\*\*\*\*\*

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TESTS. REMEMBER TO SAVE YOUR RECEIPT AND  
SUBMIT TO YOUR INSURANCE.

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\*\*\*\*\*  
or call toll free  
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within 72 hours to take a short  
survey about this Walgreens visit

SURVEY#  
0643-6921-619

PASSWORD  
7230-2040-326

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