## Online Claim Submission

Code: N4N

Employer: Neo4j, Inc.

EmpID: 079780645

EmpName: Lovitz, Jeffrey

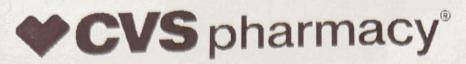
Submitted: February 10, 2023

Batch: 30281458

Claim Total: \$82.81

Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	2/10/2023	RX	\$82.81	Provider: CVS. For whom: Jeffrey Lovitz.



STAMFORD, CT 06902 203 323 1293

REG#13 TRN#4509 CSHR#2101291 STR#2258

Helped by: BRITHI

F 1 RX #: \*\*\*\*8750030 F 1 RX #: \*\*\*\*6560010 F 1 RX #: \*\*\*\*6520030 10.00N 22.81N 50.00N

3 ITEMS

7 1317 2056 523 93

TUTAL CHARGE **82.81** 

\*\*\*\*\*\*\*\*\*\*\*\*\*

\*\*\*\*\*\*\*\*\*\*

VISA CREDIT APPROVED# 010134

REF# 135099

TRAN TYPE: SALE
TC: C8002CAA4DFF88ED
NO SIGNATURE REQUIRED

AID: A0000000031010 TERMINAL# 84790404

NO SIGNATURE REQUIRE TVR(95): 8080008000 CVM: 5E0000 TSI(9B): 6800

CHANGE

.00



3502 2583 0414 5091 33
State law may prohibit the return of prescriptions. Please consult your pharmacist.

Returns with receipt, subject to CVS Return Policy, thru 04/11/2023 Refund amount is based on price after all coupons and discounts.

FEBRUARY 10, 2023

12:29 PM

