Online Claim Submission

Code: OYT

Employer: County of Tulare

EmpID: 585635440

EmpName: Brooks, ERIN

Submitted: February 11, 2023

Batch: 30292377

Claim Total: \$30.00

Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	12/3/2022	RX	\$30.00	Provider: Walgreens. For whom: Erin Brooks.
				Rx copay



#06683 5328 W CYPRESS AVE VISALIA, CA 93277 AVE 559-741-9583

805

0271 0041 12/03/2022 3:59 PM

FSA RX 2153822 FSA RX 2134848 FSA RX 2153818 FSA RX 2153180

TOTAL
VISA ACCT 04\3
AUTH CODE
EXPRESS PAY
CHANGE
30.00
30.00
30.00

TOTAL FSA ITEMS 0.00
TOTAL RX ITEMS 30.00
TOTAL FSA AND RX ITEMS 30.00

APPROVED FSA/HRA AMOUNT 0.00

THANK YOU FOR SHOPPING AT WALGREENS

REDEEM \$20 WALGREENS CASH REWARDS ON YOUR NEXT PURCHASE! WALGREENS CASH REWARDS CANNOT BE REDEEMED ON SOME ITEMS. FOR FULL DETAILS SEE MYWALGREENS.COM

RFN# 0668-3410-2719-2212-0303
