

## Online Claim Submission

Code: AOO

Employer: Scarborough School Dept

EmpID: 000003715

EmpName: Keay, Erica

Submitted: January 23, 2023

Batch: 29990663

Claim Total: \$15.00

Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	9/27/2022	RX	\$15.00	Provider: Hannaford Pharmacy. For whom: Devan Keay.

# Hannaford

99 Main Street - Gorham ME 04038  
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## PHARMACY

RX COPAY - CASH	0.00	#
RX COPAY - CASH	15.00	#
2 BALANCE DUE	15.00	
Debit Card	\$15.00	

MID: 0101508  
RRN: 362466

## SALE

XXXXXXXXXXXX3391  
US DEBIT Entry Method: Chip  
09/27/2022 16:49:23  
INVOICE: 362466  
Account Type: Primary  
Trace #: 00000178 Lane #: 36  
Total: USD\$ 15.00  
APPROVED 114798  
US DEBIT AID: A000000980840  
TSI: 8000048000  
6800

CHANGE 0.00

\*\*\*\*\*  
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10 winners each quarter  
See website for complete rules.

PIN: 0927835000362652

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FSA Eligible Total \$15.00

STORE: 08350 REGISTER: 036 CASHIER: 0280  
TICKET#: 2652 27SEP2022 16:49:28

Thanks for shopping at Hannaford!

Dave Cole Store Manager

Questions or comments?

E-mail [dccole@hannaford.com](mailto:dccole@hannaford.com)

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