Online Claim Submission

Code: SWB

Employer: WA State SEBB

EmpID: 538156457

EmpName: Drobnicki-Girdhar, Megan

Submitted: February 11, 2023

Batch: 30292239

Claim Total: \$1.07

Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	1/26/2023	RX	\$1.07	Provider: Rite Aid. For whom: Saleem Girdhar.

