Online Claim Submission

Code: MEK

Employer: Mektec International Corporation

EmpID: 602523876

EmpName: Hoar, Joanne

Submitted: February 11, 2023

Batch: 30292326

Claim Total: \$10.48

Attachments: 3

Line	Service Date(s)	Type	Cost	Notes
1	1/20/2023	RX	\$10.48	Provider: Walmart pharmacy. For whom:
				Aaric Hoar.

otal: \$5.00 Total RX: 1

Signature Required: N

Counsel: N

RX: 6927609

Patient Pay: \$5.00



Cash: \$93.23

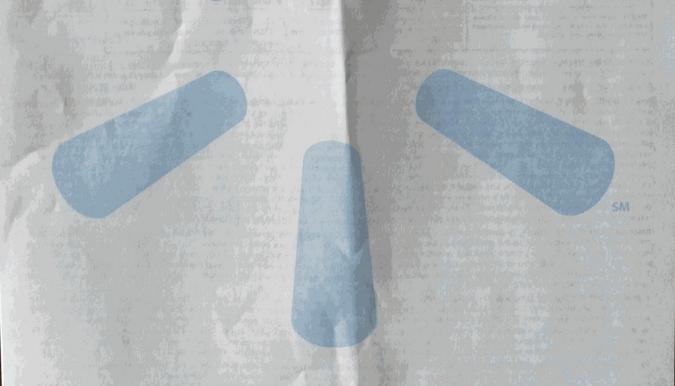
BSC

OR 271

If you have any questions, please feel free to contact your Pharmacist at (510)651-3315.
Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088 or use the internet at www.fda.gov/Safety/Medwatch/.

Wed: 09:00 AM - 07:00 PM | Fri: 09:00 AM - 07:00 PM Sun: 10:00 AM - 04:00 PM Pharmacy hours: Mon: 09:00 AM - 07:00 PM Thu: 09:00 AM - 07:00 PM **Lunch Time Varies** Tue: 09:00 AM - 07:00 PM Sat: 09:00 AM - 05:00 PM NDC: 00472-0117-45 TRETINOIN 0.025% CRE ACT HOAR AARIC DIRECTIONS: APPLY A PEA SIZE AMOUNT TO AFFECTED AREA AT BEDTIME 43793 CAMERON HILL DR I FREMONT, CA 94539 OC# 855 923 851 076 590 525 107 659 238 0-2989 PRIORITY: FUTURE WAL-MART PHARMACY 10-2989 44009 OSGOOD ROAD REFILL | FREMONT, CA 94539 -0000 NABP: 5615705 NPI: 1275550410 Reduced Paper: N DATE: 01/20/23

> CABRAL, ERIK S Prescriber NPI: 1023252350 QTY: 45 DAW: 0 DAY SUPPLY: 30 TP REF # 230204390166240999



Page 1 of 2

Total: \$5.48 Total RX: 4

signature Required: N

Counsel: N



GY 830

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Wed: 09:00 AM - 07:00 PM Thu: 09:00 AM - 07:00 PM

Fri: 09:00 AM - 07:00 PM Sat: 09:00 AM - 05:00 PM

DIRECTIONS: TAKE 1 CAPSULE BY MOUTH ONCE DAILY

TAMSULOSIN 0.4MG CAP AUR

Sun: 10:00 AM - 04:00 PM **Lunch Time Varies**

NDC: 65862-0598-05

NDC: 68645-0590-90

HOAR

| MALCOLM,C

43793 CAMERON HILLS DR

FREMONT, CA 945395971

OC# 255 923 815 576 592 384 107 659 238 0-2989 PRIORITY: FUTURE WAL-MART PHARMACY 10-2989

44009 OSGOOD ROAD

FREMONT, CA 94539 -0000

I NABP: 5615705 NPI: 1275550410

Reduced Paper: Y

RX: 6908903

Ref = 1

DATE: 01/21/23

Patient Pay: \$1.43

Cash: \$25.06

BSC

REFILL

SALEH MARK

Prescriber NPI: 1366478190

QTY: 30 DAW: 0 DAY SUPPLY: 30

TP REF # 230214116829312999 CLOPIDOGREL 75MG TABLEG

HOAR MALCOLM,C

43793 CAMERON HILLS DR

FREMONT, CA 945395971

OC# 755 923 815 376 592 384 107 659 238 0-2989 PRIORITY: FUTURE WAL-MART PHARMACY 10-2989

REFILL

44009 OSGOOD ROAD

FREMONT, CA 94539 -0000

NABP: 5615705 NPI: 1275550410

Reduced Paper: Y

RX: 6914852

Ref = 5

DATE: 01/21/23

| Patient Pay: \$1.46

Cash: \$15.00

BSC

SEHGAL ROHIT

Prescriber NPI: 1639115405

QTY: 30 DAW: 0 DAY SUPPLY: 30

TP REF # 230214116846143999

METOPROLOL TARTRATE 25MG TAB

NDC: 57664-0506-58

DIRECTIONS: TAKE 1 TABLET BY MOUTH TWICE DAILY

DIRECTIONS: TAKE 1 TABLET BY MOUTH ONCE DAILY

HOAR MALCOLM,C

43793 CAMERON HILLS DR

FREMONT, CA 945395971 OC# 855 923 843 576 592 384 107 659 238 PRIORITY: FUTURE

REFILL

44009 OSGOOD ROAD I FREMONT, CA 94539 -0000

NABP: 5615705 NPI: 1275550410

Reduced Paper: Y

RX: 6914853

DATE: 01/21/23

Patient Pay: \$0.73

Cash: \$4.00

BSC

SEHGAL, ROHIT

Prescriber NPI: 1639115405

QTY: 60 DAW: 0 DAY SUPPLY: 30

TP REF # 230214116891094999

Signature Required: N

Counsel: N



GY 830

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Fri: 09:00 AM - 07:00 PM Sat: 09:00 AM - 05:00 PM Sun: 10:00 AM - 04:00 **Lunch Time Varies**

HOAR MALCOLM,C

43793 CAMERON HILLS DR

I FREMONT, CA 945395971 OC# 455 923 818 376 592 384 107 659 238 I WAL-MART PHARMACY 10-2989 PRIORITY: FUTURE

44009 OSGOOD ROAD

FREMONT, CA 94539 -0000

NABP: 5615705 NPI: 1275550410

Ref = 8

DATE: 01/21/23

REFILL

Patient Pay: \$1.86

RX: 6922846

Cash: \$15.00

BSC

Reduced Paper: Y

ATORVASTATIN 40MG TAB TEV

NDC: 00093-5058-98

DIRECTIONS: TAKE 1 TABLET BY MOUTH ONCE DAILY

MAHAL, GURJEET S

Prescriber NPI: 1194759704

QTY: 30 DAW: 0 DAY SUPPLY: 30

TP REF # 230214116898295999