Online Claim Submission

Code: AHD

Employer: Ada County Highway District

EmpID: 532624158

EmpName: Wasson, John

Submitted: February 10, 2023

Batch: 30283794

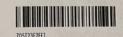
Claim Total: \$5.00

Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	12/21/2022	RX	\$5.00	Provider: Alliance Rx. For whom: Nancy
				Wasson.

allianceRx

Invoice and Receipt



P.O. Box 29061, Phoenix, AZ 85038-9061 NABP #: 0320793

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It is easy and quick to pay using your credit card either online at www.alliancerxwp.com/home-delivery or by calling our automated telephone system 1-888-832-5462. Those who are deaf or hard of hearing can call (TTY) 1-800-573-1833.

Ship to: NANCY L WASSON

1301 N ORCHARD ST STE 200 BOISE, ID 83706-2209

Account Balance: \$0.00 Invoice Number: T23F2EF1 Shipment Date: 12/21/2022

Member ID: ****7424

Item Description medication - will follow shortly 50MG TABLETS 547-0361-11	Quantity 90			Amount 5.00						
	90			5.00						
50MG TABLETS 547-0361-11	90			5.00						
	2 1 10 th	TAXABLE DAY OF THE OWNER, AND ADDRESS OF THE								
	P.P.									
	10.18									
		Current Order:	5.0							
THANK YOU FOR YOUR PROMPT PAYMENT. All credit card charges are pending authorization.										
							THANK YOU FOR YOUR PROMPT PAYMENT.	THANK YOU FOR YOUR PROMPT PAYMENT.	THANK YOU FOR YOUR PROMPT PAYMENT.	Current Order: Less Amount Received: THANK YOU FOR YOUR PROMPT PAYMENT. Previous Ralance:

Please make us aware if you have any updates regarding your drug allergies or health conditions by calling our customer service number or updating your profile online

Please contact our Customer Care Center at the phone number on your prescription label if you are in urgent need of any future orders to avoid a gap in medication therapy or have questions on order status/delays.