Online Claim Submission

Code: FFI

Employer: FBL Financial Group Inc

EmpID: 478048024

EmpName: Richards, Sara

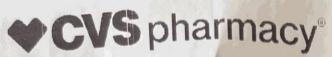
Submitted: February 10, 2023

Batch: 30282792

Claim Total: \$119.37

Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	2/3/2023	RX	\$119.37	Provider: CVS. For whom: William, Brett.



14201 HICKMAN RD URBANDALE, IA 50322 515.987.8080

REG#19 TRN#3919 CSHR#1392122 STR#10480

Helped by: KASEY

1 RX #: ***7400000 1 RX #: ****6210000

2 ITEMS

Survey ID #

3759 1352 931 63

119.37 119.37

**********7103

CH

US DEBIT APPROVED# 066859 TRAN TYPE: SALE
TC: 04FBEOC637E9A5EB
NO SIGNATURE REQUIRED TVR(95): 8080088000

REF# 199193 AID: A0000000980840 TERMINAL# 69035462 CVM: 1F0002 TSI(9B): 6800

CHANGE

.00

3510 4803 0343 9191 99 State law may prohibit the return of prescriptions. Please consult

or prescriptions. Flease consult your pharmacist. Returns with receipt, subject to CVS Return Policy, thru 04/04/2023 Refund amount is based on price after all coupons and discounts.

FEBRUARY 3, 2023

5:18 PM

F=FLEXIBLE SPENDING ACCT SUMMARY (FSA)
Prescription Eligible Total 119.37

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