

Online Claim Submission

Code: KLV
Employer: Kasa Living, Inc.
EmpID: 622535268
EmpName: Himawan, Ardi
Submitted: January 23, 2023
Batch: 29992100
Claim Total: \$45.00
Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	1/9/2023	RX	\$45.00	Provider: Walgreens. For whom: Ardi Himawan.

Walgreens

#07841 10510 SOUTHERN HIGHLANDS PKWY
LAS VEGAS, NV 89141
702-260-1992

836

3475

0044 01/09/2023 3:43 PM

FSA RX 2768715

45.00

TOTAL
VISA ACCT 3926
AUTH CODE
CHANGE

45.00
45.00
09286C
.00

TOTAL FSA ITEMS

0.00

TOTAL RX ITEMS

45.00

TOTAL FSA AND RX ITEMS

45.00

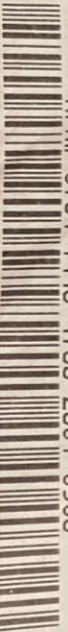
APPROVED FSA/HRA AMOUNT

0.00

THANK YOU FOR SHOPPING AT WALGREENS

REDEEM \$10 WALGREENS CASH REWARDS ON YOUR
NEXT PURCHASE! WALGREENS CASH REWARDS
CANNOT BE REDEEMED ON SOME ITEMS. FOR
FULL DETAILS SEE MYWALGREENS.COM

RFN# 0784-1443-4753-2301-0903



my70

\$11.28 W CASH REWARDS AVAILABLE