

NUMBER:		

DATE				BILLING METHOD	CARRIER
ADDRESS:		ACCOUNT D:		 □ AMEX □ REIMB CK □ ADVANCE CK □ PETTY CASH □ ON ACCT □ TRANSFER FUNDS □ OTHER 	☐ MAIL CK ☐ FEDEX CK ☐ VENDOR PICKUP CK ☐ GIVE CK TO
RECEIPT DATE	DESCRIPTION				AMOUNT
		ere you with?			
If this was a meal					
REQUEST RECE					TOTAL
		 Da	ite		

Give us feedback @ survey.walmart.com Thank you! ID #: 7RDLFKV1D2Y

716-646-0682 Mgr:KALI 5360 SOUTHWESTERN BLVD HAMBURG NY 14075

ST# 02405 OP# 009050 TE# 50 TR# 02960 32.98 N

EQ NICO LOZ 068113114797 6.88 0 083041500999 F SONOMA PEPP 9.18 0 069899781033 F UDIS GLUTEN

49.04 SUBTOTAL

49.04 TOTAL 49.04

DEBIT TEND 0.00 CHANGE DUE

PAY FROM PRIMARY EFT DEBIT

49.04 TOTAL PURCHASE

**** *** *** 8240 I 0 Debit

REF # 203300709814

NETWORK ID. 0069 APPR CODE 451538

Debit

AID A0000000042203

AAC 650AEFOCB8B71ABC

TERMINAL # SC011046

18:43:02 02/02/22

ITEMS SOLD 3

TC# 1302 9164 0550 3444 063



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02/02/22

:8:43:08