

Invoice

1/16/2017

1624

Due on receipt

Invoice #:

Total Invoice

\$3,056.54

604 W. Franklin Street Boise, ID 83702 208-258-8139

Pike County Hospital Terms:

Ann Tran 2305 Georgia St, Louisiana, MO 63353

Description	Rate	Quantity	Amount
October 2016 service fee (includes credit for RxSafetynet charges) Totals: Gross Receipts: \$ 125,235.76 Dispensing Fee: \$ 23,661.82 RxSafetynet: \$ 3,072.71 Wholesaler Costs: \$ 29,967.05 MHI Fee: \$ 7,403.42 Net CE Benefit: \$ 61,130.76	61,130.76		61,130.76
Calculate ACI % Fee	-95.00%		-58,074.22