

Invoice

6/5/2017

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

Invoice #:

Terms:

1753

Due on receipt

Pike County Hospital Ann Tran 2305 Georgia St, Louisiana, MO 63353

| Description   | Rate      | Quantity | Amount     |
|---|-----------|----------|------------|
| April Billing Totals: Gross Receipts: \$ 72,397.73 Dispensing Fee: \$16,822.14 RxSafetynet: \$ 0.00 Wholesaler Costs: \$21,830.68 MHI Fee: \$4,645.53 Net CE Benefit: \$29,099.38 | 29,099.38 |          | 29,099.38  |
| Calculate ACI % Fee   | -95.00%   |          | -27,644.41 |
|   |           |          |            |
|   |           |          |            |
|   |           |          |            |

**Total Invoice** 

\$1,454.97