

604 W. Franklin Street  
Boise, ID 83702

Invoice Date:	Invoice #:
7/10/2018	2136

Bill To:
Comanche County Memorial Hospital Alicia Parrish

Terms	Due Date:
Net 30	8/9/2018

Description	Rate	Quantity	Amount
May 2018 Gross Revenue: \$97,488.47 Pharmacy Retains: \$6,625.00 RXS Fee: \$1,126.25 Allocated to Wholesaler:\$19,725.68 Covered Entity Benefit: \$70,011.54 Calculate ACI % Fee	70,011.54      -97.50%		70,011.54      -68,261.25
		Total	\$1,750.29
		Payments/Credits	\$0.00
		Balance Due	\$1,750.29