

Fire Pension Board Meeting Agenda
[May 21, 2025, 9:30 a.m. via Microsoft Teams](#)

1.) Approval of minutes for April 16, 2025

2.) Bills and Pension Rolls:

PENSION ROLL

Budgeted Amount	\$709,000.00	
March 2025	\$65,911.05	
Remaining budget	\$508,825.33	71.77%

MEDICAL CLAIMS

Budgeted amount	\$1,946,000.00	
March 2025	\$132,582.32	
March 2025 HMA fees	\$14,905.35	
Remaining budget	\$1,423,708.79	73.16%

3.) Action Item:

Member #128	Request for reimbursement of \$440.79 for chiropractic care.
Member # 101	Request for reimbursement of \$215.68 for compounded medication. (Note: this is the remainder of a request in January that was submitted with a math error. The original request was approved.)

4.) Other Items

- RBC Wealth Management update – Michael Brittain



City of Everett
Police and Fire Pension Boards

Request to the Board

To be completed by LEOFF 1 member (or family) for submittal to the board.

Member Name
(please print)



1. Diagnosis: _____
2. Prognosis: _____
3. Type of Treatment(s) or Procedure: CHIROPRACTIC CARE
4. Cost of treatments/service: \$ 440.79
5. Request to the board for this specific treatment or procedure:

(Examples can be found at everettwa.gov/pensionboards)

Return to:
City of Everett
Police and Fire Pension Boards
2930 Wetmore Ave, Ste 1-A
Everett, WA 98201
Leoff1@everettwa.gov

Chart Notes

Cascadia Chiropractic and Massage
1507 172nd St. NE Suite A
Marysville, WA 98271
Phone: (360) 652-7246
Fax: (360) 654-0611

Patient: [REDACTED]	Acct #: 7864	DOB: [REDACTED]
Ins Co:	Pol #:	Insured ID:
Date 09/20/2024		
Provider Michael Breneman DC		

Subjective:

[REDACTED] has had spinal surgery in the lumbosacral junction for discal damage and protrusion. He has been having severe equilibrium and spatial orientation issues that are affecting all ADLs we see him today as a professional courtesy due to a full schedule treatment abbreviated services were done to asses his condition and only cervical spine imaging was done however his history of lower spine surgery will be investigated in the near future with imaging of the lumbo pelvic areas AP and Lat

Objective:

Rhombergs is positive for loss of equilibrium and any positional change exacerbates his vertigo. Imaging reveals loss of lordosis and he is locked out of flexion in the occipito atlantal articulation that in our opinion is causing neurologic consequence and disrupting his equilibrium system He is cantankerous with staff upon entrance and due to his condition we realize he is fearful and distraught.

Assessment:

The patient's condition is responding to care, but is aggravated by normal activities of daily living. all acitivites of daily living are affected further assessment needs to be accomplished over time.

Plan:

see 3x close and then reassess
fo lumbar spine imaging
Our goals of continued treatment include the following; relief of symptoms, decrease segmental dysfunction, increase active and passive range of motion, increase proprioception, increase function and arrestment of degeneration.

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Ins Co: [REDACTED]

Acct #: 7864
Pol #:

DOB: [REDACTED]
Insured ID:

Date 09/20/2024

Provider Michael Breneman DC

*** continued from previous page ***

Diagnosis M54.2: Cervicalgia
M99.01: Seg and somatic dysf of cervical reg
R42: Dizziness, vertigo or giddiness
R27.8: Other lack of coordination
M40.292: Other kyphosis, cervical reg (reduced cerv curve)
M99.02: Seg and somatic dysf of thoracic reg
M99.03: Seg and somatic dysf of lumbar reg
M99.04: Seg and somatic dysf of sacral reg
S33.5XXS: Sprain of lumbar ligts, seq
M99.85: Other biomechanical lesions of pelvic region
M51.36: Other intervertebral disc degeneration, lumbar region
M43.27: Fusion of spine, lumbosacral region

Electronically Signed

Michael Breneman
Michael Breneman DC 09/20/2024 07:12 PM

Cascadia Chiropractic and Massage

1507 172nd St. NE Suite A
Marysville, WA 98271
Phone: (360) 652-7246 Fax: (360) 654-0611

Receipt

Trans ID 000000054990
Order ID 8476828473877382
Payment Type Credit
Trans Type Purchase
Clerk ID 75
Date/Time 2024-09-20 14:54:52
Card Type Visa
Card Number XXXXXXXXXXXX4543
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ATC 0068
AID A0000000031010
AID NAME VISA CREDIT
TVR 8080008000
TSI 6800
Resp CD Z3
TRN REF # 304264768930665
VAL CODE XGVW

Total Amount **USD\$20.79**

Description: _____

Approved - Thank You

X _____

Cardholder Signature

Buyer agrees to pay total amount above
according to cardholder's agreement with
issuer.

****Customer Copy****
Retain this copy for statement

Chart Notes

Cascadia Chiropractic and Massage
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 Marysville, WA 98271
 Phone: (360) 652-7246
 Fax: (360) 654-0611

Patient: [REDACTED]
 Ins Co: [REDACTED]

Acct #: 7864
 Pol #:

DOB: [REDACTED]
 Insured ID:

Date 09/24/2024

Provider Michael Breneman DC

Subjective:

[REDACTED] sought treatment today, complaining of frequent tightness discomfort in the back of the neck. He describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, he, using a VAS, describes the intensity as a 8 and indicated that the discomfort occurs approximately 80% of the time. He states the discomfort is worse since his last visit.

Objective:

Rhombergs is positive for loss of equilibrium and any positional change exacerbates his vertigo.

Imaging reveals loss of lordosis and he is locked out of flexion in the occipito atlantal articulation that in our opinion is causing neurologic consequence and disrupting his equilibrium system

He is cantankerous with staff upon entrance and due to his condition we realize he is fearful and distraught.

Assessment:

The patient's condition is responding to care, but is aggravated by normal activities of daily living. all activities of daily living are affected further assessment needs to be accomplished over time.

Plan:

see 3x close and then reassess
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1607 172nd St. NE Suite A
Marysville, WA 98271
Phone: (360) 652-7246
Fax: (360) 654-0611

Patient: [REDACTED]

Acct #: 7864

DOB: [REDACTED]

Ins Co:

Pol #:

Insured ID:

Date 09/24/2024

Provider Michael Breneman DC

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Electronically Signed

Michael Breneman DC
Michael Breneman DC 09/24/2024 05:06 PM

Cascadia Chiropractic and Massage

1507 172nd St. NE Suite A

Marysville, WA 98271

Phone: (360) 652-7246 Fax: (360) 654-0611

Receipt

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Trans Type Purchase
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AID NAME VISA CREDIT
TVR 8080008000
TSI 6800
Resp CD Z3
TRN REF # 384268800793167
VAL CODE JGSM

Total Amount **USD\$70.00**

Description: _____

Approved - Thank You

X _____
Cardholder Signature

Buyer agrees to pay total amount above
according to cardholder's agreement with
issuer.

****Customer Copy****
Retain this copy for statement

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Objective:

Rhombergs is positive for loss of equilibrium and any positional change exacerbates his vertigo.

Imaging reveals loss of lordosis and he is locked out of flexion in the occipito atlantal articulation that in our opinion is causing neurologic consequence and disrupting his equilibrium system

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1507 172nd St. NE Suite A
Marysville, WA 98271

Phone: (360) 652-7246 Fax: (360) 654-0611

Receipt

Trans ID 000000055156
Order ID 8076657985748590
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Trans Type Purchase
Clerk ID 75
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Card Number XXXXXXXXXXXX4543
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Entry Method CONTACT
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AID A0000000031010
AID NAME VISA CREDIT
TVR 8080008000
TSI 6800
Resp CD Z3
TRN REF # 584269838397517
VAL CODE 49CR

Total Amount USD\$70.00

Description: _____

Approved - Thank You

X _____
Cardholder Signature

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Fax: (360) 654-0611

Patient:

Acct #: 7864

DOB:

Ins Co:

Pol #:

Insured ID:

Date 09/25/2024

Provider Michael Breneman DC

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Electronically Signed

Michael Breneman
Michael Breneman DC 09/25/2024 06:29 PM

Chart Notes

Cascadia Chiropractic and Massage
 1507 172nd St. NE Suite A
 Marysville, WA 98271
 Phone: (360) 652-7246
 Fax: (360) 654-0611

Patient: [REDACTED]

Acct #: 7864

DOB: [REDACTED]

Ins Co: [REDACTED]

Pol #:

Insured ID:

Date 09/27/2024

Provider Michael Breneman DC

Subjective:

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Objective:

Rhombergs is positive for loss of equilibrium and any positional change exacerbates his vertigo.

Imaging reveals loss of lordosis and he is locked out of flexion in the occipito atlantal articulation that in our opinion is causing neurologic consequence and disrupting his equilibrium system

He is cantankerous with staff upon entrance and due to his condition we realize he is fearful and distraught.

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Patient: [REDACTED]
Ins Co: [REDACTED]

Acct #: 7864
Pol #:

DOB: [REDACTED]
Insured ID:

Date 09/27/2024

Provider Michael Breneman DC

*** continued from previous page ***

Electronically Signed

Michael Breneman
Michael Breneman DC 09/27/2024 06:12 PM

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1507 172nd St. NE Suite A

Marysville, WA 98271

Phone: (360) 652-7246 Fax: (360) 654-0611

Receipt

Trans ID 000000055247
Order ID 687383868877765
Payment Type Credit
Trans Type Purchase
Clerk ID 75
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Card Number XXXXXXXXXXXX4543
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Approval Code 08750D
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AID NAME VISA CREDIT
TVR 8080008000
TSI 6800
Resp CD Z3
TRN REF # 464271837701120
VAL CODE 3FPM

Total Amount **USD\$70.00**

Description: _____

Approved - Thank You

X _____
Cardholder Signature

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Customer Copy
Date in this copy for statement

Chart Notes

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 1507 172nd St. NE Suite A
 Marysville, WA 98271
 Phone: (360) 652-7246
 Fax: (360) 654-0611

Patient: [REDACTED]

Acct #: 7864

DOB: [REDACTED]

Ins Co:

Pol #:

Insured ID:

Date 10/04/2024

Provider: Michael Breneman DC

Subjective:

[REDACTED] sought treatment today, complaining of frequent tightness discomfort in the back of the neck. He describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, he, using a VAS, describes the intensity as a 5 and indicated that the discomfort occurs approximately 30% of the time. He states the discomfort is the same since his last visit.

Objective:

Rhombergs is positive for loss of equilibrium and any positional change exacerbates his vertigo.

Imaging reveals loss of lordosis and he is locked out of flexion in the occipito atlantal articulation that in our opinion is causing neurologic consequence and disrupting his equilibrium system.

He is cantankerous with staff upon entrance and due to his condition we realize he is fearful and distraught.

Assessment:

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Plan:

see 3x close and then reassess
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Cascadia Chiropractic and Massage

1507 172nd St. NE Suite A
Marysville, WA 98271
Phone: (360) 652-7246 Fax: (360) 654-0611

Receipt



Trans ID 000000055508
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Card Number XXXXXXXXXXXX4543
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Approval Code 03863D
AC 56C5A4EB8FC06602
ATC 0075
AID A0000000031010
AID NAME VISA CREDIT
TVR 8080008000
TSI 6800
Resp CD Z3
TRN REF # 464278808121261
VAL CODE JDHF

Total Amount USD\$70.00

Description: _____

Approved - Thank You

X _____
Cardholder Signature

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according to cardholder's agreement with
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Chart Notes



Cascadia Chiropractic and Massage
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Phone: (360) 652-7246
Fax: (360) 654-0611

Patient:
Ins Co:

Acct #: 7864
Pol #:

DOB:
Insured ID:

Date 10/04/2024

Provider Michael Breneman DC

*** continued from previous page ***

Electronically Signed

Michael Breneman DC 10/04/2024 03:57 PM

Chart Notes

Cascadia Chiropractic and Massage
1507 172nd St. NE Suite A
Marysville, WA 98271
Phone: (360) 652-7246
Fax: (360) 654-0611

Patient:

Acct #: 7864

DOB:

Ins Co:

Pol #:

Insured ID:

Date 10/08/2024

Provider Michael Breneman DC

Subjective:

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Objective:

Rhombergs is positive for loss of equilibrium and any positional change exacerbates his vertigo.

Imaging reveals loss of lordosis and he is locked out of flexion in the occipito atlantal articulation that in our opinion is causing neurologic consequence and disrupting his equilibrium system

He is cantankerous with staff upon entrance and due to his condition we realize he is fearful and distraught.

He has become "a believer" in only a few visits with results he finds incredible.

Assessment:

The patient's condition is responding to care, but is aggravated by normal activities of daily living. all activities of daily living are affected
responding favorably with improved posture, gait and equilibrium

Plan:

see 3x close and then reassess
for lumbar spine imaging

Our goals of continued treatment include the following; relief of symptoms, decrease segmental dysfunction, increase active and passive range of motion, increase proprioception, increase function and arrestment of degeneration.

check on DC in Surprise Arizona to continue care with

Chart Notes

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Patient:

Acct #: 7864

DOB:

Ins Co:

Pol #:

Insured ID:

Date 10/08/2024

*** continued from previous page ***

Provider Michael Breneman DC

Diagnosis

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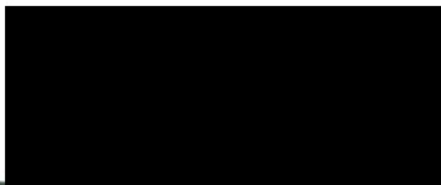
Electronically Signed

Michael Breneman DC 10/08/2024 02:23 PM

Cascadia Chiropractic and Massage

1507 172nd St. NE Suite A
Marysville, WA 98271
Phone: (360) 652-7246 Fax: (360) 654-0611

Receipt



Trans ID 000000055600
Order ID 8377797372787788
Payment Type Credit
Trans Type Purchase
Clerk ID 75
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Card Type Visa
Card Number XXXXXXXXXXXX4543
Entry Legend CHIP READ
Entry Method CONTACT
Approval Code 07293D
AC 9EE7305D5DFD664D
ATC 0077
AID A0000000031010
AID NAME VISA CREDIT
TVR 8080008000
TSI 6800
Resp CD Z3
TRN REF # 584282681579006
VAL CODE HQ7M

Total Amount USD\$70.00

Description: _____

Approved - Thank You

X _____
Cardholder Signature

Buyer agrees to pay total amount above
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Retain this copy for statement

Chart Notes

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Phone: (360) 652-7246
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Acct #: 7864

DOB:

Ins Co:

Pol #:

Insured ID:

Date 10/11/2024

Provider Michael Breneman DC

Subjective:

sought treatment today, complaining of occasional tightness discomfort in the back or the neck. He describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, he, using a VAS, describes the intensity as a 2 and indicated that the discomfort occurs approximately 10% of the time. He states the discomfort is better since his last visit.

Objective:

Rhombergs is positive for loss of equilibrium and any positional change exacerbates his vertigo.

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Cascadia Chiropractic and Massage

1507 172nd St. NE Suite A
Marysville, WA 98271
Phone: (360) 652-7246 Fax: (360) 654-0611

Receipt



Trans ID 00000055723
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Payment Type Credit
Trans Type Purchase
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ATC 0078
AID A000000031010
AID NAME VISA CREDIT
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TSI 6800
Resp CD Z3
TRN REF # 304285677004857
VAL CODE KN87

Total Amount **USD\$70.00**

Description: _____

Approved - Thank You

X _____
Cardholder Signature

Buyer agrees to pay total amount above
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Date 10/11/2024

Provider Michael Breneman DC

*** continued from previous page ***

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Electronically Signed

Michael Breneman
Michael Breneman DC 10/11/2024 02:53 PM



City of Everett
Police and Fire Pension Boards

Request to the Board

To be completed by LEOFF 1 member (or family) for submittal to the board.

Member Name
(please print)



1. Diagnosis: Toe nail fungus
2. Prognosis: about 6 more months
3. Type of Treatment(s) or Procedure: nail lacquer apply once a day
4. Cost of treatments/service: \$ \$215.68 Paid \$215.68 owing
5. Request to the board for this specific treatment or procedure:

Board member #101 Fire is asking for reimbursement.
This is not covered because it is a compound medication
and it is not confirmed with a fungal diagnostic test
medical necessity

(Examples can be found at everettwa.gov/pensionboards)

Return to:
City of Everett
Police and Fire Pension Boards
2930 Wetmore Ave, Ste 1-A
Everett, WA 98201
Leoff1@everettwa.gov

with use of this drug. This drug may cause harm if swallowed. If this drug is swallowed, call a doctor or poison control center right away. Tell your doctor if you are pregnant, plan on getting pregnant, or are breast-feeding. You will need to talk about the benefits and risks to you and the baby.

Keep out of reach of children: Store in safety container or secure area.

WIC# 986638

RX # 0729859-10893

DATE: 07/28/23

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 3 REFILLS BEFORE 04/24/24

Refill NDC: 45802-0141-67

Retail Price: \$90.99 Your Insurance Saved You: \$48.09

\$ 42.90

PBR: G. SEBASTIAN
MFG: PADAGIS
TLS/ / / /MML

PLAN: NMHC
GROUP# E2435
CLAIM REF# 232094551168046999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Customer
receipt

RX # 0729859-10893

DATE: 07/28/23

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 3 REFILLS BEFORE 04/24/24

Refill NDC: 45802-0141-67

Retail Price: \$90.99 Your Insurance Saved You: \$48.09

\$ 42.90

PBR: G. SEBASTIAN
MFG: PADAGIS
TLS/ / / /MML

PLAN: NMHC
GROUP# E2435
CLAIM REF# 232094551168046999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Duplicate
receipt

Pharmacy use only

SAT 12:00PM
Refill

CICLOPIROX 8% NAIL LACQUER TOP SOLN
45802-0141-67
ALPHA

QTY 6.6

LIQUID

COLORLESS

TLS/ / / /MML

not use near an open flame or while smoking. This drug may cause harm if swallowed. If this drug is swallowed, call a doctor or poison control center right away. Tell your doctor if you are pregnant, plan on getting pregnant, or are breast-feeding. You will need to talk about the benefits and risks to you and the baby.

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WIC# 986638

RX # 0729859-10893

DATE: 08/23/23

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 2 REFILLS BEFORE 04/24/24

Refill NDC: 45802-0141-67

Retail Price: \$90.99 Your Insurance Saved You: \$48.09

\$ 42.90

PBR: G. SEBASTIAN
MFG: PADAGIS
XXX/ / / /LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 232354347688029999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Customer
receipt

RX # 0729859-10893

DATE: 08/23/23

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 2 REFILLS BEFORE 04/24/24

Refill NDC: 45802-0141-67

Retail Price: \$90.99 Your Insurance Saved You: \$48.09

\$ 42.90

PBR: G. SEBASTIAN
MFG: PADAGIS
XXX/ / / /LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 232354347688029999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Duplicate
receipt

Pharmacy use only

THU 12:00PM
Refill

CICLOPIROX 8% NAIL LACQUER TOP SOLN
45802-0141-67
ALPHA

QTY 6.6

LIQUID

COLORLESS

XXX/ / / /LSY

with use of this drug. This drug may catch on fire. Do not use near an open flame or while smoking. This drug may cause harm if swallowed. If this drug is swallowed, call a doctor or poison control center right away. Tell your doctor if you are pregnant, plan on getting pregnant, or are breast-feeding. You will need to talk about the benefits and risks to you and the baby.

Keep out of reach of children: Store in safety container or secure area.

WIC# 986638

09/23/23

DATE: 09/23/23

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 1 REFILL BEFORE 04/24/24
Refill NDC: 45802-0141-67
Retail Price: \$90.99 Your Insurance Saved You: \$48.09

\$ 42.90

PBR: G. SEBASTIAN
MFG: PADAGIS
XXX/ / / LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 232663364187019999

Walgreens

1060 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Customer receipt

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 1 REFILL BEFORE 04/24/24
Refill NDC: 45802-0141-67
Retail Price: \$90.99 Your Insurance Saved You: \$48.09

\$ 42.90

PBR: G. SEBASTIAN
MFG: PADAGIS
XXX/ / / LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 232663364187019999

Walgreens

1060 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Duplicate receipt

Pharmacy use only

SUN 12:00PM
Refill

CICLOPIROX 8% NAIL LACQUER TOP SOLN
45802-0141-67
ALPHA

QTY 6.6

LIQUID

COLORLESS

XXX/ / / LSY

not use near an open flame or while smoking. This drug may cause harm if swallowed. If this drug is swallowed, call a doctor or poison control center right away. Tell your doctor if you are pregnant, plan on getting pregnant, or are breast-feeding. You will need to talk about the benefits and risks to you and the baby.

Keep out of reach of children: Store in safety container or secure area.

WIC# 986638

RX # 0729859-10893

DATE: 10/31/23

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 NO REFILLS - DR. AUTH REQUIRED
Refill NDC: 45802-0141-67
Retail Price: \$90.99 Your Insurance Saved You: \$48.09

\$ 42.90

PBR: G. SEBASTIAN
MFG: PADAGIS
XXX/ / / LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 233043165909011999

Walgreens

1060 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Customer receipt

RX # 0729859-10893

DATE: 10/31/23

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 NO REFILLS - DR. AUTH REQUIRED
Refill NDC: 45802-0141-67
Retail Price: \$90.99 Your Insurance Saved You: \$48.09

\$ 42.90

PBR: G. SEBASTIAN
MFG: PADAGIS
XXX/ / / LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 233043165909011999

Walgreens

1060 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Duplicate receipt

Pharmacy use only

WED 12:00PM
Refill

CICLOPIROX 8% NAIL LACQUER TOP SOLN
45802-0141-67
ALPHA

QTY 6.6

LIQUID

COLORLESS

XXX/ / / LSY

with use of this drug. This drug may catch on fire. Do not use near an open flame or while smoking. This drug may cause harm if swallowed. If this drug is swallowed, call a doctor or poison control center right away. Tell your doctor if you are pregnant, plan on getting pregnant, or are breast-feeding. You will need to talk about the benefits and risks to you and the baby.

Keep out of reach of children: Store in safety container or secure area.

WIC# 986638

RX # 0798962-10893

DATE: 04/11/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 5 REFILLS BEFORE 04/11/25

Copy NDC: 45802-0141-67

Retail Price: \$90.99 Your Insurance Saved You: \$48.03

\$ 42.96

PBR: G. SEBASTIAN
MFG: PADAGIS
TRW/EXT/EXT/ /4639016

PLAN: NMHC
GROUP# E2435
CLAIM REF# 241027297809050999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Customer
receipt

RX # 0798962-10893

DATE: 04/11/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 5 REFILLS BEFORE 04/11/25

Copy NDC: 45802-0141-67

Retail Price: \$90.99 Your Insurance Saved You: \$48.03

\$ 42.96

PBR: G. SEBASTIAN
MFG: PADAGIS
TRW/EXT/EXT/ /4639016

PLAN: NMHC
GROUP# E2435
CLAIM REF# 241027297809050999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Duplicate
receipt

Pharmacy use only

SAT 2:08PM
Copy

CICLOPIROX 8% NAIL LACQUER TOP SOLN
45802-0141-67
ALPHA

QTY 6.6

LIQUID

COLORLESS

TRW/EXT/EXT/ /4639016

With use of this drug, the drug may catch on fire. Do not use near an open flame or while smoking. This drug may cause harm if swallowed. If this drug is swallowed, call a doctor or poison control center right away. Tell your doctor if you are pregnant, plan on getting pregnant, or are breast-feeding. You will need to talk about the benefits and risks to you and the baby.

Keep out of reach of children: Store in safety container or secure area.

WIC# 986638

RX # 0798962-10893

DATE: 05/22/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 4 REFILLS BEFORE 04/11/25

Refill NDC: 45802-0141-67

Retail Price: \$96.99 Your Insurance Saved You: \$54.03

\$ 42.96

PBR: G. SEBASTIAN
MFG: PADAGIS
XXX/ / / /LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 241436025476002999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Customer
receipt

RX # 0798962-10893

DATE: 05/22/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 4 REFILLS BEFORE 04/11/25

Refill NDC: 45802-0141-67

Retail Price: \$96.99 Your Insurance Saved You: \$54.03

\$ 42.96

PBR: G. SEBASTIAN
MFG: PADAGIS
XXX/ / / /LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 241436025476002999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Duplicate
receipt

Pharmacy use only

THU 10:00AM
Refill

CICLOPIROX 8% NAIL LACQUER TOP SOLN
45802-0141-67
ALPHA

QTY 6.6

LIQUID

COLORLESS

XXX/ / / /LSY

Clear up on the way with use of this drug. This drug may catch on fire. Do not use near an open flame or while smoking. This drug may cause harm if swallowed. If this drug is swallowed, call a doctor or poison control center right away. Tell your doctor if you are pregnant, plan on getting pregnant, or are breast-feeding. You will need to talk about the benefits and risks to you and the baby.

Keep out of reach of children: Store in safety container or secure area.

WIC# 986638

RX # 0814273-10893

DATE: 07/07/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 3 REFILLS BEFORE 04/11/25

Copy NDC: 21922-0053-51

Retail Price: \$96.99 Your Insurance Saved You: \$53.53

\$ 43.46

PBR: G. SEBASTIAN
MFG: ENCUBE ETHICALS
LSY/LSY/LSY/LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 241904429384018999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Customer
receipt

RX # 0814273-10893

DATE: 07/07/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 3 REFILLS BEFORE 04/11/25

Copy NDC: 21922-0053-51

Retail Price: \$96.99 Your Insurance Saved You: \$53.53

\$ 43.46

PBR: G. SEBASTIAN
MFG: ENCUBE ETHICALS
LSY/LSY/LSY/LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 241904429384018999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Duplicate
receipt

Pharmacy use only

MON 10:00AM
Copy

CICLOPIROX 8% NAIL LACQUER TOP SOLN
21922-0053-51
ALPHA

QTY 6.6

LIQUID

LSY/LSY/LSY/LSY

Clear up on the way with use of this drug. This drug may catch on fire. Do not use near an open flame or while smoking. This drug may cause harm if swallowed. If this drug is swallowed, call a doctor or poison control center right away. Tell your doctor if you are pregnant, plan on getting pregnant, or are breast-feeding. You will need to talk about the benefits and risks to you and the baby.

Keep out of reach of children: Store in safety container or secure area.

WIC# 986638

RX # 0814273-10893

DATE: 08/06/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 2 REFILLS BEFORE 04/11/25

Refill NDC: 21922-0053-51

Retail Price: \$96.99 Your Insurance Saved You: \$53.53

\$ 43.46

PBR: G. SEBASTIAN
MFG: ENCUBE ETHICALS
MJP/ / / LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 242194407771039999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Customer
receipt

RX # 0814273-10893

DATE: 08/06/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 2 REFILLS BEFORE 04/11/25

Refill NDC: 21922-0053-51

Retail Price: \$96.99 Your Insurance Saved You: \$53.53

\$ 43.46

PBR: G. SEBASTIAN
MFG: ENCUBE ETHICALS
MJP/ / / LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 242194407771039999

Walgreens

1080 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Duplicate
receipt

Pharmacy use only

TUE 11:44AM
Refill

CICLOPIROX 8% NAIL LACQUER TOP SOLN
21922-0053-51
ALPHA

QTY 6.6

LIQUID

MJP/ / / LSY

clear up all the way with use of this drug. This drug may catch on fire. Do not use near an open flame or while smoking. This drug may cause harm if swallowed. If this drug is swallowed, call a doctor or poison control center right away. Tell your doctor if you are pregnant, plan on getting pregnant, or are breast-feeding. You will need to talk about the benefits and risks to you and the baby.

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WIC# 986638

RX # 0814273-10893

DATE: 09/01/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 1 REFILL BEFORE 04/11/25

Refill NDC: 21922-0053-51

Retail Price: \$96.99 Your Insurance Saved You: \$53.53

\$ 43.46

PBR: G. SEBASTIAN
MFG: ENCUBE ETHICALS
XXX/ / / /LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 242457452360060999

Walgreens

1090 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Customer
receipt

RX # 0814273-10893

DATE: 09/01/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 1 REFILL BEFORE 04/11/25

Refill NDC: 21922-0053-51

Retail Price: \$96.99 Your Insurance Saved You: \$53.53

\$ 43.46

PBR: G. SEBASTIAN
MFG: ENCUBE ETHICALS
XXX/ / / /LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 242457452360060999

Walgreens

1090 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Duplicate
receipt

Pharmacy use only

TUE 9:00AM
Refill

CICLOPIROX 8% NAIL LACQUER TOP SOLN
21922-0053-51
ALPHA

QTY 6.6

LIQUID

XXX/ / / /LSY

clear up all the way with use of this drug. This drug may catch on fire. Do not use near an open flame or while smoking. This drug may cause harm if swallowed. If this drug is swallowed, call a doctor or poison control center right away. Tell your doctor if you are pregnant, plan on getting pregnant, or are breast-feeding. You will need to talk about the benefits and risks to you and the baby.

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WIC# 986638

RX # 0814273-10893

DATE: 10/02/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 NO REFILLS - DR. AUTH REQUIRED

Refill NDC: 21922-0053-51

Retail Price: \$96.99 Your Insurance Saved You: \$53.53

\$ 43.46

PBR: G. SEBASTIAN
MFG: ENCUBE ETHICALS
XXX/ / / /LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 242763745202048999

Walgreens

1090 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Customer
receipt

RX # 0814273-10893

DATE: 10/02/24

CICLOPIROX 8% NAIL LACQUER TOP SOLN

QTY: 6.6 NO REFILLS - DR. AUTH REQUIRED

Refill NDC: 21922-0053-51

Retail Price: \$96.99 Your Insurance Saved You: \$53.53

\$ 43.46

PBR: G. SEBASTIAN
MFG: ENCUBE ETHICALS
XXX/ / / /LSY

PLAN: NMHC
GROUP# E2435
CLAIM REF# 242763745202048999

Walgreens

1090 SW 1ST AVE CANBY, OR 970133828
PH: (503)263-1600

Duplicate
receipt

Pharmacy use only

FRI 9:00AM
Refill

CICLOPIROX 8% NAIL LACQUER TOP SOLN
21922-0053-51
ALPHA

QTY 6.6

LIQUID

XXX/ / / /LSY