

RECEIPT

**COSTCO PHARMACY** DEPARTMENT 707-578-1711

**LISINAPRIL 40 MG TABLET WSW**

08/25/1954

1900 SANTA ROSA AVENUE SANTA ROSA CA 95407  
Whse# 41

NDC: 00143-1270-01 # 365  
Mfr: WEST-WARD, INC.  
Days Supply: 365 UIC: \$23.77  
LAST REFILL-Please call 48 hours in advance  
11111COSTCO MEMBER RX PLA  
Secondary: 0.00 Tertiary: 0.00  
Prescriber: BELK, DAVID  
AUTH# 5479038

11111COSTCO MEMB \$19.99

**BR**

\$19.99

03/17/2016



Total for all six Prescriptions: \$151.82 for the whole year!

**COSTCO PHARMACY** DEPARTMENT

PATIENT COUNSELING INFORMATION

LISINAPRIL 40 MG TABLET WSW

**COSTCO PHARMACY** DEPARTMENT  
1900 SANTA ROSA AVENUE  
SANTA ROSA CA 95407  
Whse# 041

707-578-1711

**HYDROCHLOROTHIAZIDE 25 MG TAB**

NDC: 00603-3856-32 # 365  
Mfr: QUALITEST  
Days Supply: 365 UIC: \$33.56  
May be refilled 1 times of 365 before 3/17/2017  
COSTCO MEMBER RX PLAN  
AUTH# 5455670  
Prescriber: BELK, DAVID

COSTCO MEMBER RX PLAN  
RX 1236691 N

\$29.58

**BR**

\$29.58

03/17/2016



100000411236691000001815747000029581



01236691000000603385632

COSTCO MEMBER RX PLAN  
RX 1236688 N

\$29.58

**BR**

\$29.58

03/17/2016



100000411236688000001815744000029580

**METFORMIN HCL 1,000 MG TABLET**

NDC: 43547-0359-50 # 730  
Mfr: SOLCO HEALTHC  
Days Supply: 365 UIC: \$33.56  
May be refilled 1 times of 730 before 3/17/2017  
COSTCO MEMBER RX PLAN  
AUTH# 5455611  
Prescriber: BELK, DAVID



01236688000043547035950

COSTCO MEMBER RX PLAN  
RX 1236690 N

\$29.58

**BR**

\$29.58

03/17/2016



100000411236690000001815746000029587

**ATENOLOL 100 MG TABLET SAN**

NDC: 00781-1507-01 # 365  
Mfr: SANDOZ  
Days Supply: 365 UIC: \$33.56  
May be refilled 1 times of 365 before 3/17/2017  
COSTCO MEMBER RX PLAN  
AUTH# 5455649  
Prescriber: BELK, DAVID



01236690000000781150701

COSTCO MEMBER RX PLAN  
RX 1236686 N

\$19.08

**BR**

\$19.08

03/17/2016



100000411236686000001815743000019085

**AMLODIPINE BESYLATE 10 MG TAB**

NDC: 67877-0199-05 # 365  
Mfr: ASCEND LABORA  
Days Supply: 365 UIC: \$22.84  
May be refilled 1 times of 365 before 3/17/2017  
COSTCO MEMBER RX PLAN  
AUTH# 5455566  
Prescriber: BELK, DAVID



01236686000067877019905

COSTCO MEMBER RX PLAN  
RX 1236687 N

\$24.01

**BR**

\$24.01

03/17/2016



100000411236687000001815758000024011

**SIMVASTATIN 20 MG TABLET NOR**

NDC: 16714-0683-02 # 365  
Mfr: NORTHSTAR RX  
Days Supply: 365 UIC: \$27.87  
May be refilled 1 times of 365 before 3/17/2017  
COSTCO MEMBER RX PLAN  
AUTH# 5455590  
Prescriber: BELK, DAVID



01236687000016714068302

Call your Doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088