



Providers VAX Secure Invoice Upload

Tracking Number

1745

Date

7/7/2022

Contract Information

AP REC 07/13/2022

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-576</u>	<u>M Holdings LLC DBA My Pharmacy</u>	<u>83-1454255</u>	<u>7000297256</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number

<u>James Hampton Manning</u>	<u>Pharmacist, Owner</u>	<u>(803) 756-3460</u>	<u>hamp@mypharmacyandoptical.com</u>
Contact (Full Name)	Title	Phone	EXT Contact EMAIL

<u>808 Highway 378 Suite B</u>	<u>Lexington</u>	<u>SC</u>	<u>29072</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>53</u>	<u>8,181.61</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

My Pharmacy_invoice 53_expense explanations_Broad_June.docx
 COVID 19 Vaccine Reimbursement Calculator_June_2022_Invoice #53_Broad River.xlsx
 [Untitled]

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

James Hampton Manning
7/7/2022 1:11:22 PM

\$8,181.61

Yes
 No

The attached invoice is accurate and the invoice total is correct.

Invoice Total

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

COVID19 Coordination Office

Budget and Finance Approval

Lopez, Jessica N.
7/11/2022 12:07:28 PM

Thames, Barbette Y.
7/12/2022 11:14:12 AM

Payment Processing Instructions

Pay full amount \$8,181.61 31070000 Not Relevant J0402AZ998
 J040X01058580130 5021310000 98000018

Accounts Payable Approval

Cate, Vasa
7/13/2022 12:31:49 PM

If rejecting this form for any reason please provide a brief note to the agency. It will be included in the rejection email notification

COVID-19 Vaccination Reimbursement Request

Community Vaccination Event Information*

Provider Name: M Holdings DBA My Pharmacy

COVID-19 Vaccine Pin Number: 932016

Location Name: My Pharmacy - Broad River Rd

Location Address (incl zip): 10057 Broad River Rd

Irmo, SC 29063

Date & Times: June 1, 2022 - June 30, 2022

Total # Vaccinations: 147

Eligible Vaccinations**: 0

Please select yes or no to the following questions to determine eligible reimbursement:

Yes Did your organization provide event management, traffic control and logistics for this event?

Yes Did your organization provide administrative staff for this event?

Yes Did your organization provide vaccination staff for this event?

Reimbursement Calculator

Item	Rate	Eligible Event Reimbursement
Event Mgmt, Traffic, Logistics	\$10	\$1,470
Administrative Staff	\$5	\$0
Vaccination Staff	\$15	\$0
Total Event Reimbursement Amount		\$1,470

Additional Cost Summary***:

Total additional cost: \$6,711.61

Less other funding/reimbursement:

Net additional cost: **\$6,711.61**

Total Request Amount: \$8,181.61

* Community Vaccination Events may span multiple days as long as the event location remains the same. All dates should be specified.

** If seeking third-party reimbursement for the services at the event was not appropriate or feasible, then all vaccinations are eligible for reimbursement. If billing third party payers was feasible, then only vaccinations not eligible for insurance reimbursement are eligible for Staffing Reimbursement.

*** Claiming additional costs requires detailed justification and documentation. Please attach answers to the following questions:

- 1) Summary Description of Request and Costs
- 2) Describe Benefit to the State of South Carolina and Statewide Vaccination Efforts including the future distribution and administering of vaccines.
- 3) Describe activities conducted and outcomes expected or achieved
- 4) Is the cost being covered by any other funding source or insurance? Please explain.
- 5) Were all avenues of funding exhausted before using Vaccine Reserve Account funds? Please explain.

Rent	Electric	Internet	Mobile Storage	Tent Rental	Other
2500	98	72.98	318.6	2173.25	33.86
2500	98	72.98	318.6	1468.04	46.88
				3641.29	80.74

Rent	2500
Electric	98
Internet	72.98
Mobile Storage	318.6
Tent Rental	3641.29
Other	80.74
	6711.61

My Pharmacy

808 Hwy 378 Ste B

Lexington, SC 29072

Invoice # 53 Additional Expense Explanation

Explanation of expenses for Covid 19 drive thru Immunization Clinic expenses from 6/1/2022 – 6/30/2022

Off-Site Location: 100057 Broad River Rd Irmo, SC 29063

General description:

We have a two-lane drive thru Covid 19 immunization tent located in the side parking lot of East Lake Community Church . This is an off-site clinic we set up due to the need in the area for vaccines and Covid 19 testing. This clinic is currently ongoing. This clinic requires a lot of expenses that are specifically related to the tent and our workflow process for vaccinating the public. Due to the fact this site is not attached to a physical location we had to make arrangements to secure supplies, equipment, vaccine, etc. and set up a mobile office/storage unit to be able to effectively run and serve the patients in the surrounding areas. From 06/01/2022 thru 06/30/2022 we have immunized **147** patients

This has benefited and continues to benefit South Carolina's COVID 19 vaccination effort due to our ease of access to the public, by taking walk-ins, advertising extensively to underserved populations, and providing access to key rural areas surrounding the midlands. We provide a high quality and very efficient process for patients to be vaccinated with convenient hours. Currently the clinic runs Monday thru Friday from 9am to 5pm and Saturday 9am to 1pm.

The below submitted costs are not being covered by any other funding source and have been fully paid for by our business. All other avenues were exhausted before using this fund.

Summary of Expenses:

1. **Mobile Office:**
 - a. We have to have this unit on site to store our supplies, draw up doses and house freezer, fridge to store vaccines.
2. **Misc Charges:**
 - a. There was one purchase for coolers for the IMZ site to keep waters cold for staff and anyone that ask for one. Another charge for printer services for that particular IMZ site. We use the printer for multiple uses.
3. **Space Rental**
 - a. To accommodate the tent, we have rented parking lot space in the East Lake Community Church parking lot. We normally pay 2500.00 a month for rent and in April, I accidentally wrote a check for 3,000.00, therefore next month I will only submit for 2000.00 in rent.
4. **Electric and Internet:**
 - a. We must provide electricity and internet to run our Covid IMZ sites effectively and efficiently.
5. **Tent**
 - a. The tent that we had in Ballentine had to be replaced due to all of the recent storms we have had over the last few months. The tent company did not give me an updated invoice until this past month, and it is attached for May and June. Please let me know if you have any questions

Please let me know if additional information is needed on above.

Thank you,

Hamp Manning, PharmD/Owner

Brent Munnerlyn, PharmD/Owner



1/6/2021

To whom it may concern:

As part of the COVID-19 response, DHEC has many partners and vendors who are assisting with testing, contact tracing, and other critical response activities. In order to maintain good working relationships with all our partners and vendors, as well as avoid interruption in services provided, we are requesting the ability process all invoices related to COVID-19 as a Zspecial to expedite payments.

If you need additional detail or have any questions or concerns regarding these invoices, please do not hesitate to reach out to ACC-FinAdmin@dhec.sc.gov.

Sincerely,

Darbi C MacPhail, MHA
Chief Finance and Operations Officer
SC Department of Health and Environmental Control



**East Lake
Community Church**

COVID IMZ

**East Lake Community Church
10057 Broad River Road
Irmo, SC 29063**

Invoice 1006

**M Holdings
808 Hwy 378 Ste. B
Lexington, SC 29072**

June Rent
Irmo

June Rent: \$2500.00

**Thank you for your payment
Check 1301 6/6/22**

**Sue Bennett
Financial Assistant
East Lake Community Church**

COVID IMZ



PO Box 669
Lexington, SC 29071

COVID IMZ

Account Number: 9300069841		Amount to Draft \$98.00
Member: M HOLDINGS		
PREVIOUS BALANCE	\$90.00	
TOTAL PAYMENTS	\$90.00CR	
BALANCE FORWARD	\$0.00	
CURRENT MONTH CHARGES	\$98.00	

DO NOT PAY - THE AMOUNT OWED WILL BE PAID AUTOMATICALLY ON OR AFTER 07/12/22

Office Hours: 8 a.m. to 5 p.m. Monday - Friday
Telephone: (803) 749-6400 Toll-Free: (888) 813-8000
Easy Pay: (803) 749-6500 or (888) 850-6770
Visit us online at www.mcecoop.com

Messages from MCEC

- The Summer On-Peak hours are 4-7 pm through October 31st.

M HOLDINGS
DBA MY PHARMACY
808 HIGHWAY 378 STE B
LEXINGTON SC 29072-8379

4 3200



Meter Number	Previous Reading	Present Reading	Reading Dates	Energy Usage	On-Peak/Demand
87777554	6601	7034	05/19 to 06/19	433	1.44
Number of Days: 31					
Monthly Adjustment Factor: \$0.00046 kWh \$0.102 kW					
On-Peak Occurred: 06/03/2022 4:00 PM - 5:00 PM					
Average Cost Per Day: 3.16					

Explanation of Current Charges

Statement Date 06/22/22
Usage Period 05/19/22 to 06/19/22

Account Charge		\$43.40
Energy Charge	433 kWh @ 0.05846	\$25.31
On-Peak/Demand Charge	1.440 kW @ 14.852	\$21.39
S.C. State Tax		\$7.21
Operation Round Up		\$0.69
CURRENT MONTH CHARGES		\$98.00

Service Address: 10057 BROAD RIVER RD
Service Description: OUTBLDG SIGN LTSS
Location: 114-07-051
Rate Schedule: Commercial Service
Multiplier: 1.0

COVID IMZ
Electric | Broad River

PLEASE READ BACK OF BILL FOR OTHER IMPORTANT INFORMATION

PLEASE DETACH BOTTOM PORTION AND RETURN WITH YOUR PAYMENT



9300069841000098000000980000000000

Statement Date: 06/22/22
Account Name: M HOLDINGS
Service Address: 10057 BROAD RIVER RD
IRMO, SC 29063

Account Number: 9300069841	Amount to Draft \$98.00
Location: 114-07-051	
	07/12/22

Any remaining balance after 5:00 PM on the due date may be subject to a \$4.00 late payment charge.

MID-CAROLINA ELECTRIC COOPERATIVE INC
PO BOX 669
LEXINGTON, SC 29071-0669



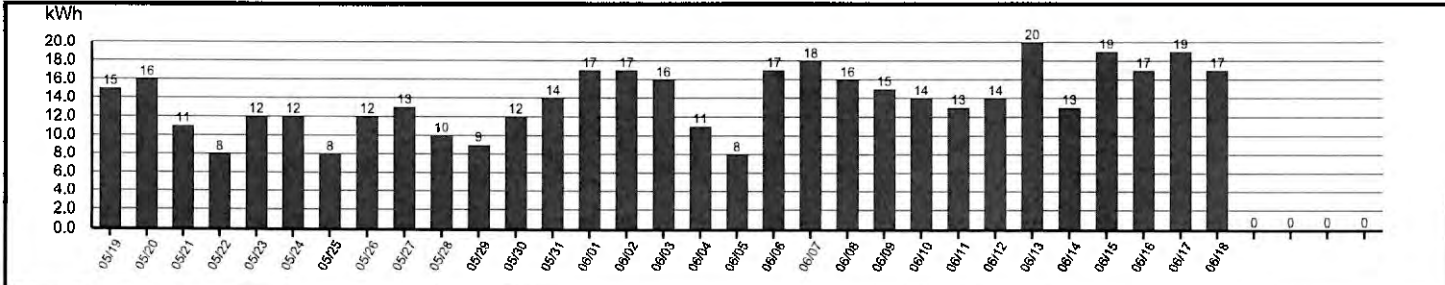
COVID IMZ

CHECK THIS BOX TO RECORD CHANGES ON BACK

Account Number	Account Name	Service Location	Statement Date
9300069841	M HOLDINGS	OUTBLDG SIGN LTSS 10057 BROAD RIVER RD	06/22/22

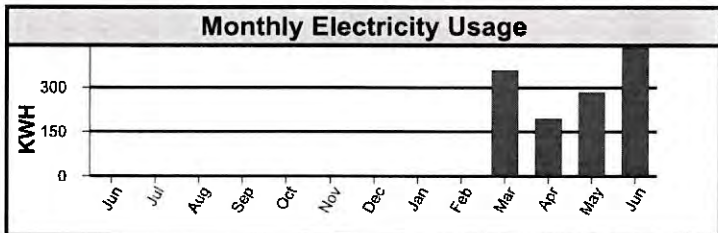
Billing Comparisons	Days	kWh Used	Average Temp	Avg kWh Per Day	On-Peak Use	Total Charges
Current Billing Month	31	433	81	14	1,440	98.00
Previous Billing Month	30	285	70	10	1,610	90.00
Same Month Last Year	30	0	0	0	0.000	0.00

Energy Usage (kWh) by Day:



Temperatures

High	Low
95	71
95	73
86	71
88	70
82	69
86	69
80	65
85	71
85	72
87	66
89	63
90	69
92	66
95	71
96	73
93	71
87	68
88	65
87	62
89	66
92	73
92	72
87	70
89	70
94	74
103	76
89	74
100	73
97	73
100	71
94	70



TextPower from Mid-Carolina Electric Cooperative is the quickest way to report your power outage.

To register, text "MCEC" to 85700

Once you have registered, our state-of-the-art outage management system lets you immediately report outages by texting "Out" to **85700**. You may also report an outage by calling (803) 749-6444 or (888) 813-7000.

COMMENTS

PHONE NUMBER USED TO IDENTIFY YOUR ACCOUNT WHEN REPORTING A POWER OUTAGE

Present Number on File:

CORRECT NUMBER: _____

MAILING ADDRESS CORRECTIONS

Street or PO Box _____

City _____ State _____ Zip _____

ACCOUNT NUMBER: 9300069841
ACCOUNT NAME: M HOLDINGS

COVID IMZ

COVID IMZ

Your payment was APPROVED

Authorization Code: 023077
Transaction ID: 2775767
Processor Transaction ID: 462174546434174
Transaction Date & Time: Jun 23, 2022 11:10 AM
Total Payment Amount: \$98.00

Account	Service	Amount
9300069841	MCEC	\$98.00
	Total:	\$98.00

COVID IMZ

Electric

Broad
River

June 17, 2022
Invoice Number: 0006200061722
Account Number: 8349 20 002 0006200
Security Code: 5726
Service At: 10057 BROAD RIVER RD
IRMO SC 29063-2362

COVID
IMZ

Auto Pay Notice

NEWS AND INFORMATION

Contact Us
Visit us at SpectrumBusiness.net
Or, call us at 1-866-519-1263

ACTION REQUIRED: Important Reminder about Your Bill. Our billing system update is complete. **You have received a new account number that is included on this statement and your payments must now be sent to a new remittance address:**

Spectrum
P.O. Box 6030, Carol Stream, IL 60197

To ensure all of your payments are processed in an accurate and timely fashion, please make the following updates:
• **If you pay by mail**, you must update your account number and payment remittance address information.
• **If you use AutoPay** through your financial institution, credit card, or other third party provider, you will need to make them aware of your new account number in order to avoid missed payments. If you currently have AutoPay set up with Spectrum directly, we will automatically update your account and you do not need to take any action at this time.

Please note that all Spectrum websites, such as Spectrum.net have also been updated with your new account number, which may be required to login.

Summary *Service from 06/17/22 through 07/16/22 details on following pages*

Previous Balance	72.98
Payments Received -Thank You!	-72.98
Remaining Balance	\$0.00
Spectrum Business™ Internet	72.98
Current Charges	\$72.98
<i>YOUR AUTO PAY WILL BE PROCESSED 07/03/22</i>	
Total Due by Auto Pay	\$72.98



Thank you for choosing Spectrum Business.
We appreciate your prompt payment and value you as a customer.

Auto Pay. Thank you for signing up for auto pay. Please note your payment may be drafted and posted to your Spectrum Business account the day after your transaction is scheduled to be processed by your bank.

Broad River
Internet

4145 S. FALKENBURG RD RIVERVIEW FL 33578-8652
8349 2000 NO RP 17 06182022 NNNNNNNN 01 000010 0001

MY PHARMACY AND OPTICAL
808 HIGHWAY 378 STE A
LEXINGTON SC 29072-8379

June 17, 2022

MY PHARMACY AND OPTICAL

Invoice Number: 0006200061722
Account Number: 8349 20 002 0006200
Service At: 10057 BROAD RIVER RD
IRMO SC 29063-2362

Total Due by Auto Pay \$72.98



CHARTER COMMUNICATIONS
PO BOX 6030
CAROL STREAM IL 60197-6030



834920002000620000072983

COVID IMZ

COVID
IMZ

MY PHARMACY AND OPTICAL
Invoice Number: 0006200061722
Account Number: 8349 20 002 0006200
Security Code: 5726

Contact Us
Visit us at SpectrumBusiness.net
Or, call us at 1-866-519-1263

8349 2000 NO RP 17 06182022 NNNNNNNN 01 000010 0001

Charge Details

Previous Balance		72.98
Visa-card Not on File	05/19	-72.98
Remaining Balance		\$0.00

Payments received after 06/17/22 will appear on your next bill.

Service from 06/17/22 through 07/16/22

Spectrum Business™ Internet

Spectrum Business Internet	119.99
Promotional Discount	-55.00
Business WiFi	7.99
Security Suite	0.00
Domain Name	0.00
Vanity Email	0.00
	\$72.98
Spectrum Business™ Internet Total	\$72.98
Current Charges	\$72.98
Total Due by Auto Pay	\$72.98

Notice - Nonpayment of any portion of your cable television, high-speed data, and/or Digital Phone service could result in disconnection of any of your Spectrum provided services.

Authorization to Convert your Check to an Electronic Funds Transfer Debit - If your check is returned, you expressly authorize your bank account to be electronically debited for the amount of the check plus any applicable fees. The use of a check for payment is your acknowledgment and acceptance of this policy and its terms and conditions.

Past Due Fee / Late Fee Reminder - A late fee will be assessed for past due charges for service.

Complaint Procedures: If you disagree with your charges, you need to register a complaint no later than 60 days after the due date on your bill statement.



Billing Information

Tax and Fees - This statement reflects the current taxes and fees for your area (including sales, excise, user taxes, etc.). These taxes and fees may change without notice. Visit spectrum.net/taxesandfees for more information.

Spectrum Terms and Conditions of Service - In accordance with the Spectrum Business Services Agreement, Spectrum services are billed on a monthly basis. Spectrum does not provide credits for monthly subscription services that are cancelled prior to the end of the current billing month.

Terms & Conditions - Spectrum's detailed standard terms and conditions for service are located at spectrum.com/policies.

Broad River
Internet

Local Spectrum Store: 280 Harbison Blvd., Suites A & B, Columbia SC 29212 Store Hours: Mon thru Sat - 10:00am to 8:00pm; Sun - 12:00pm to 5:00pm

Visit Spectrum.com/stores for store locations. For questions or concerns, visit Spectrum.net/support

Sign up for Paperless Billing.
It's easy, convenient and secure.

For questions or concerns, please call 1-866-519-1263.

Get your statement as soon as it's available. Instead of receiving a paper bill through the mail, sign up for paperless billing.

It's easy - enroll in paperless billing visit SpectrumBusiness.net.

It's convenient - you can access your statement through SpectrumBusiness.net.

It's secure - we deliver securely to your SpectrumBusiness.net account and only you can access through a secure sign-in process.

Each month, you'll receive a paperless e-bill that you pay online with your choice of payment options.



COVID IMZ



Thanks, your payment is submitted.

It may take up to 24 hours for your amount due to reflect this payment. You'll receive a payment status email shortly.

Payment Summary

Internet

Confirmation Number

0285208196

Payment Amount

\$72.98

Payment Method

Visa - 2985

Payment Date

June 21, 2022

<https://www.spectrumbusiness.net/billing/payment>

6-21-22

Broad River
Internet

COVID IMZ



Carolina Mobile Storage, LLC
 139 Jed Park Place
 Summerville, SC 29486

COVID
 IMZ

Invoice

Date	Invoice#
6/29/2022	56109

PAID
 06-29-2022

Bill To
My Pharmacy and Optical Brent Munnerlyn 808 US Hwy 378 Lexington, SC 29072

Ship To
10057 Broad River Road Irmo, S.C. 29063 Brent - - 803/261-8615

P.O. Number	Terms	Rep	Ship	Doors Toward
Brent	Net 30	PDT	6/29/2022	Doors to Rear

Quantity	Description	Price Each	Amount
1	Monthly rental of a 20' ground level office combo container - O20424	295.00	295.00T
	Rent Period 6/22/22 - 7/21/22		
	Sales Tax	8.00%	23.60

Mobile Vaccine Clinic

COVID IMZ

			Total	\$318.60
Phone #	Fax #	E-mail		
(843) 851-2661	(843) 851-2664	rick@carolinamobilestorage.com	Balance Due	\$0.00



Carolina Tent & Event Rental, Inc. Keanu Thompson
 4321 Catawba River Rd (803) 554-2669
 Catawba, SC 29704 keanu@carolinatent.com
 P: (803) 789-5733
 tom@carolinatent.com
carolinatent.com

PAYMENTS

Invoice #22831506
 Invoice Date Jul 04, 2022

COVID IMZ

Contact
 Keanu Thompson
 keanu@mypharmacyandoptical.com

Event Information
 Munneryn - Columbia

Location / Venue
 Columbia, SC

River
 Tent rental / Broad

Payments

As of 7:15 AM on 7/4/2022

ID	Method	Date	Status	Charged	Fees	Applied Amount
Credit Card						
59796247	W/E; 5.17.2022 5.24.2022 5.31.2022 6.7.2022	5/12/2022 at 12:00 AM EDT	Charged	\$2,173.25	--	\$2,173.25
Credit Card						
87778762	w/e: 6-14-2022 6-21-2022 6-28-2022 7-5-2022	7/4/2022 at 12:00 AM EDT	Charged	\$1,468.04	--	\$1,468.04
Totals				\$3,641.29	-\$0.00	\$3,641.29

June rent Broad River

Make checks payable to:
 Carolina Tent & Event Rental, Inc.
 4321 Catawba River Rd, Catawba, SC 29704
 Memo: Invoice #228315063

Payment Summary

Applied Payments	\$3,641.29
Refunds	-\$0.00
Total Paid	\$3,641.29

Balance

Contract Total*	\$3,641.29
Remaining Balance*	\$0.00

*Additional payment processing fees may apply

NEW tent
 ?
 rental 1

COVID IMZ Tent Rental

CAROLINA TENT & EVENT INC
 4321 CATAWBA RIVER RD
 CATAWBA SC 29704
 8037897165

SALE

7/4/2022 7:09AM
 Merch ID: 0004564
 Term ID: 002
 \$1,468.04
 \$1,468.04
 MISA 2985

Approved Online

REFERENCE 70300002
 AUTH 004662
 Trans ID 39
 Phone: 001040722070956
 Response CAPTURED

CREDIT
 Approved USD \$1,468.04

SIGNATURE REQUIRED

MERCHANT COPY



Simplified Office Systems
 6220 Bush River Road
 Columbia, SC 29212
 Phone: 888-914-7476
 Fax: 803-569-1222
 Fed Tax ID: 45-1548790

Invoice
Period Billing

INVOICE #:
220613-0149
 Page 1 of 1

Broad River

COVID IMZ

Bill To: 100533
 My Pharmacy and Optical
 808 Highway 378 Suite A
 Lexington, SC, 29072
 (803) 756-3460
 hamp@mypharmacyandoptical.com;
 tiffany@mypharmacyandoptical.com
 Kevin Hunter

INVOICE DATE	CUST. ORDER #	PAYMENT TERMS
06/13/2022		Net 10

Invoice Line Items	
Description	Amount
Contract ID 6205	
Meter Billing For 5/11/22 To 6/10/22	
Customer ID: 100533-4 Company Name: My Pharmacy Broad River Address: 10037 Broad River Road, Irmo, SC, 29063, (843) 845-7905	
Serial #: MXBC18CGPK Unit ID: 13543 Model #: PRINTER/E52645dn Desc: HP LaserJet Managed MFP E52645dn	
Meter: BLACK COPIES Last Billed: 7563 on 5/10/22 Current: 8808 on 5/27/22 Usage 1245 Unused Clicks Included in Term: 0 Clicks To Bill in Period: 1245	
Total Meter Charge	\$18.68
Serial #: MXBC18CGPN Unit ID: 13542 Model #: PRINTER/E52645dn Desc: HP LaserJet Managed MFP E52645dn	
Meter: BLACK COPIES Last Billed: 5975 on 5/10/22 Current: 6839 on 5/27/22 Usage 864 Unused Clicks Included in Term: 0 Clicks To Bill in Period: 864	
Total Meter Charge	\$12.96
Tax Summary	
Lexington S	\$0.32
ZSC State	\$1.90

*COVID IMZ
Printer*

Interested in 3D PRINTING? CONTACT SOS!
 Any open balance past 90 days will be assessed a 1.5% late fee.

Invoice Comments: <div style="border: 1px solid black; width: 300px; height: 50px; margin-top: 5px;"></div>	SUBTOTAL:	\$31.64
	DISCOUNT:	\$0.00
	OTHER CHARGES:	\$0.00
	TAX:	\$2.22
	TOTAL:	\$33.86
Customer Signature _____		

COVID IMZ



ACADEMY COLUMBIA, SC 803-749-5255

06/16/22 11:18

490236 SALE

1186 0136 206

Igloo Playmate Eli / 131953231	
1 for \$22.99	22.99
Promotional Disc	4.60-
Final Price	18.39

SMART WATER 20 OZ / 15293855	
1 for \$2.19 N	2.19

Igloo Playmate Eli / 131953215	
1 for \$22.99	22.99

SUBTOTAL	43.57
8.0% SALES TAX	3.31
TOTAL USD\$	46.88

MID: XXXXXXXX7997

TID: XXXX6607

RRN: 061258

VISA CREDIT

46.88

XXXXXXXXXXXX0284

Chip Read

TIFFANY MOORE

AUTH 016991

Issued by:

AID: 90000000031010

COVID
IME
coolers for waters for staff

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
 * YOUR TOTAL SAVINGS \$ 4.60 *
 XXXXXXXXXXXXXXXXXXXXXXXXXXXX

FOR ALL. FOR LESS.TM

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[facebook.com/academy](https://www.facebook.com/academy)

How are we doing?

Share feedback about your experience within 72 hours at:

www.academyfeedback.com

After completing the survey, enter for a chance to win a

\$1,000 Academy gift card!

NO PURCHASE NECESSARY. Odds depend on entries received. Enter by month-end. For complete details and official rules, see www.academy.com/officialrules.

Disponible en Español

COVID
IME