

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1088729
Vendor Name: Presence Central & Suburban Ho
Invoice Number: COD5.4.20
Invoice Date: 05/15/20
PO Number:
Check Number: 0268374
Check Amount: \$ 367.20
Check Date: 06/10/2020
Department ID: 00257
Reviewer Name: Jessica Lang
Voucher Number: V0622688
Redaction Type: None
Document Type: AP Invoice

Document Below

From: langj@cod.edu
Sent: Fri May 15 12:30:15 CDT 2020
To: invoicing@cod.edu
CC:
Subject: St. Joe's INV#COD5.4.20

Jessica Lang

Program Support Specialist, Nursing and Health Sciences
College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137
630.942.2447 Direct | 630.942.8331 Office | 630.942.4222 Fax
langj@cod.edu

From: acctpay@cod.edu
To: [Lang, Jessica](#)
Subject: Voucher Confirmation: V0622688
Date: Friday, May 15, 2020 12:28:29 PM

Voucher Number V0622688
Voucher Status In Progress (Unfinished)

Requestor Name Ms Jessica M. Lang

Voucher Date 05/15/20
Due Date 05/15/20
Vendor ID and/or Name 1088729 Presence Central & Suburban Hospita
DBA AMITA Saint Joseph Medical Cent
AP Type IM Invoices < \$15,000
Voucher Total \$367.20

ITEM 1

Item Description ACLS Cards
Quantity 34.000
Price \$5.4000
Extended Price \$183.60
GL Distribution 01-10-00257-5304001

APPROVED
05/27/20 - KIRK OVERSTREET

ITEM 2

Item Description PALS Cards
Quantity 34.000
Price \$5.4000
Extended Price \$183.60
GL Distribution 01-10-00257-5304001

COMMENTS

WARNING: All line items on this document have
been populated with default tax form
information from the chosen vendor.

APPROVAL

DATE

NEXT APPROVALS

INVOICE REVIEWED
OKAY TO PAY
JESSICA LANG 05/19/20

AMITA Health Saint Joseph Medical Center - Joliet
Nursing Administration



AMITA Health Saint Joseph Medical Center - Joliet		Invoice #: COD.5.4.20		
333 N. Madison Street		College of Dupage		
Joliet, IL 60435		<i>Please provide the name/entity that will be charged and also the mailing address. Email to Michelle.Filisko@amitahealth.org</i>		
Nursing Admin				
(815) 725-7133 x3511				
Date	Description			Amount
12/05/19	ACLS Provide Cards	34	\$5.40	\$183.60
12/05/19	PALS Provide Cards	34	\$5.40	\$183.60
	Total			\$367.20

INVOICE REVIEWED
OKAY TO PAY
JESSICA LANG 05/19/20