

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1182046
Vendor Name: Edward Occupational Health
Invoice Number: 00116611-00
Invoice Date: 02/29/20
PO Number:
Check Number: 0269052
Check Amount: \$ 318.00
Check Date: 06/23/2020
Department ID: 00225
Reviewer Name: Adrianna Costello
Voucher Number: V0630339
Redaction Type: Other
Document Type: AP Invoice

Document Below

From: costelloa146@cod.edu
Sent: Mon Jun 15 13:36:09 CDT 2020
To: invoicing@cod.edu
CC: chiavolaj@cod.edu
Subject: Please Pay Attached Invoices

Good Afternoon,

The attached invoices are OK to pay. The GL from which they are to be paid is on the invoice.

Thank you!!

Best,

Adrianna Costello

*Academic Division Business Associate
Nursing & Health Sciences
College of DuPage|425 Fawell Blvd.|HSC 1212
Glen Ellyn, IL 60137
P: 630-942-4523
F: 630-942-4222*

Edward Occupational Health
29027 Network Place
Chicago, IL 60673-129
Telephone (331)221-6089

Invoice

Page: 1

Invoice No.	Date
00116611 - 00	02/29/2020

Bill To:

College Of Dupage Health & Sciences
Attn: Jennifer Chiavola
425 Fawell Blvd
Glen Ellyn, IL 60137-6599

Amount Due: \$62.00

Federal ID: 36-3297173

Account: COD

Terms: Net due in 30 days

Service Date	Medical Activity	Quantity	Unit Price	Discount	Amt Paid	Adjusted	Amount
Clinic Code: EDNP							
10/21/2019	Physical Exam - Basic	1.00	\$60.00	\$12.00			\$48.00
10/21/2019	TB/PPD Intradermal Test	1.00	\$20.00	\$6.00			\$14.00
							\$62.00

Invoice reviewed by Adrianna Costello 6/15/20 - OK to pay from 01-10-00225-5308001

APPROVED
06/17/20 - DILYSS GALLYOT

INVOICE REVIEWED
OKAY TO PAY
ADRIANNA COSTELLO 06/17/20

****INVOICE NUMBER MUST ACCOMPANY PAYMENT TO ENSURE PROPER PAYMENT PROCESSING****

If Paying by Credit Card, fill out below

AMEX <input type="checkbox"/>	VISA <input type="checkbox"/>	MC <input type="checkbox"/>	Discover <input type="checkbox"/>
Card Number:			
Exp. Date:		Sec Code:	
Signature:		Amount:	

Account COD College Of Dupage Health & Sciences

Remit To:

Edward Occupational Health
29027 Network Place
Chicago, IL 60673-129
Telephone (331)221-6089

TOTAL DUE: \$62.00

Invoice 00116611-00 Date 2/29/2020

Thank You

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1182046
Vendor Name: Edward Occupational Health
Invoice Number: 00118351-00
Invoice Date: 03/31/20
PO Number:
Check Number: 0269052
Check Amount: \$ 318.00
Check Date: 06/23/2020
Department ID: 00225
Reviewer Name: Adrianna Costello
Voucher Number: V0630340
Redaction Type: Other
Document Type: AP Invoice

Document Below

From: costelloa146@cod.edu
Sent: Mon Jun 15 13:36:09 CDT 2020
To: invoicing@cod.edu
CC: chiavolaj@cod.edu
Subject: Please Pay Attached Invoices

Good Afternoon,

The attached invoices are OK to pay. The GL from which they are to be paid is on the invoice.

Thank you!!

Best,

Adrianna Costello

*Academic Division Business Associate
Nursing & Health Sciences
College of DuPage|425 Fawell Blvd.|HSC 1212
Glen Ellyn, IL 60137
P: 630-942-4523
F: 630-942-4222*

Edward Occupational Health
29027 Network Place
Chicago, IL 60673-129
Telephone (331) 221-6089

Invoice

Page: 1

APPROVED

06/17/20 - DILYSS GALLYOT

Invoice No.	Date
00118351 - 00	03/31/2020

Bill To:

College Of Dupage Health & Sciences
Attn: Jennifer Chiavola
425 Fawell Blvd
Glen Ellyn, IL 60137-6599

Amount Due: \$256.00

Federal ID: 36-3297173

Account: COD

Terms: Net due in 30 days

Service Date	Medical Activity	Quantity	Unit Price	Discount	Amt Paid	Adjusted	Amount
							Clinic Code: EDBB
03/03/2020	TB Quantiferon Gold Blood Test	1.00	\$90.00	\$10.00			\$80.00
03/03/2020	DS-Rapid 10 Panel Drug Screen	1.00	\$53.00	\$5.00			\$48.00
Sub-Total for							\$128.00
							Clinic Code: EDNP
03/10/2020	DS-Rapid 10 Panel Drug Screen	1.00	\$53.00	\$5.00			\$48.00
03/10/2020	TB Quantiferon Gold Blood Test	1.00	\$90.00	\$10.00			\$80.00
Sub-Total for							\$128.00

**Invoice reviewed by Adrianna Costello 6/15/20 - OK to pay from
01-10-00225-5308001**

**INVOICE REVIEWED
OKAY TO PAY
ADRIANNA COSTELLO 06/17/20**

****INVOICE NUMBER MUST ACCOMPANY PAYMENT TO
ENSURE PROPER PAYMENT PROCESSING****

Account COD College Of Dupage Health & Sciences

Remit To:

Edward Occupational Health
29027 Network Place
Chicago, IL 60673-129
Telephone (331) 221-6089

If Paying by Credit Card, fill out below

AMEX <input type="checkbox"/>	VISA <input type="checkbox"/>	MC <input type="checkbox"/>	Discover <input type="checkbox"/>
Card Number:			
Exp. Date:		Sec Code:	
Signature:		Amount:	

TOTAL DUE: \$256.00

Invoice 00118351-00 Date 3/31/2020

Thank You