

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1521820

Vendor Name: Midway Dental Supply Detroit,

Invoice Number: 1721337

Invoice Date: 06/29/20

PO Number: B0365476

Check Number: E0080778

Check Amount: \$ 390.45

Check Date: 07/08/2020

Department ID: 00153

Reviewer Name: Jessica Lang

Voucher Number: V0632511

Redaction Type: None

Document Type: AP Invoice

Document Below

From: fiske@cod.edu
Sent: Tue Jun 30 12:50:21 CDT 2020
To: invoicing@cod.edu
CC: langj@cod.edu
Subject: midway

please pay the attached invoice

Invoice Information:

Invoice Number	1721337	Subtotal	\$390.45
Invoice Date	6/29/2020	Shipping Cost	\$0.00
Order Number	774055	Tax	\$0.00
Payment Term	NET 30	Amount Due	\$390.45
Po Number	365476-6/25/2020 14:37:20		
Notes	Please put on invoice PO# BO 365-476		

Billing Address:
COLLEGE OF DUPAGE -
HYGIENE
Cindy Fisk
426 Fawell Blvd
GLEN ELLYN IL US 60138

Shipping Tracking Numbers

APPROVED
07/06/20 - KICK OVERSTREET

Shipping Address:
COLLEGE OF DUPAGE -
HYGIENE
Cindy Fisk
426 FAWELL BLVD
GLEN ELLYN IL US 60138

N/A

Invoice Line Items:

Ordered	Shipped	SKU	Description	Price	Ext. Price	Comment
1	1	SHIPPING	Shipping/Handling Charge	\$9.95	\$9.95	
5	5	468-4510	Ultraform PF Nitrile Glove Small 300 per	\$26.95	\$134.75	
5	5	468-4500	Ultraform PF Nitrile Glove X-Small 300 p	\$26.95	\$134.75	
1	1	905-9827	Sterilex Liquid Ultra 10 Sets/bx	\$111.00	\$111.00	

INVOICE REVIEWED
OKAY TO PAY
JESSICA LANG 06/30/20