

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 21063316
Invoice Date: 12/22/20
PO Number: P0371945
Check Number: 0277356
Check Amount: \$ 35.00
Check Date: 03/09/2021
Department ID: 00697
Reviewer Name: None
Voucher Number: V0661616
Redaction Type: None
Document Type: AP Invoice

Document Below

From: MMS.Credit@McKesson.com <MMS.Credit@McKesson.com >
Sent: Fri Feb 12 06:47:24 CST 2021
To: invoicing@cod.edu
CC:
Subject: [External] McKesson Medical-Surgical Customer Invoice(s)

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Thank you.

[attachment: MMS_00004096_INV0021063316_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical, Inc
9954 Mayland Drive Suite 4000
Henrico, VA 23233

Bill To: 58723600

Invoice

Page 1 of 1

RCHAP6519

Shipped From:

McKESSON MEDICAL-SURGICAL INC(CHICAGO)
300 AIRPORT ROAD UNIT 2
ELGIN,IL 60123
SHIPPED FROM LICENSE: 004.003700

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Shipped To: 58723601
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
Ordered By: REP EMAIL
REGULATORY LICENSE: MMC_TEACHING

APPROVED
02/15/21 - JOSEPH MULLIN

Payment / Account Balance Inquires 1-800-453-5180
Phone:

Customer Service Phone: 1-800-877-1919

Sales Order Number	89498694	Invoice Number	21063316
Sales Order Date	12/22/2020	Invoice Date	02/11/2021
PO Number	371945	Payment Due Date	03/13/2021
Sales Rep Name	COSS, KAREN A.	Invoice Amount	\$366.90

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1069196	Vendor: STPACK Vend Cat#: G35011BU	G3 MEDSLINGER BLUE PO LN 4	5	EA	5	73.38	366.90	.00	
Tracking # 1ZR3X6020317042218 1ZR3X6020317042414									
Shipped: 02/11/2021 From: Elgin Via: UPS GROUND									

SUB TOTAL	FREIGHT	TAX	AMOUNT
\$366.90	\$0.00	\$0.00	\$366.90

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.

PRICING IS CONFIDENTIAL AND PROPRIETARY.

Invoice

RCHAP6519

McKESSON

McKesson Medical-Surgical, Inc
9954 Mayland Drive Suite 4000
Henrico, VA 23233

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Account Number	58723600	Date	02/11/2021
Document Number	21063316	Terms	AR NET 30 DAYS
Pay This Amount Before	03/13/2021		\$366.90

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:

McKESSON MEDICAL SURGICAL
PO BOX 933027
ATLANTA GA 31193-3027

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 21528032
Invoice Date: 02/24/21
PO Number: P0371945
Check Number: 0277356
Check Amount: \$ 35.00
Check Date: 03/09/2021
Department ID: 00697
Reviewer Name: None
Voucher Number: V0662602
Redaction Type: None
Document Type: AP Invoice

Document Below

From: MMS.Credit@McKesson.com <MMS.Credit@McKesson.com >
Sent: Thu Feb 25 07:06:25 CST 2021
To: invoicing@cod.edu
CC:
Subject: [External] McKesson Medical-Surgical Customer Invoice(s)

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[attachment: MMS_00000925_INV0021528032_MMGD001.PDF]

McKesson Medical-Surgical, Inc
9954 Mayland Drive Suite 4000
Henrico, VA 23233

Credit Memo

Page 1 of 1

RCHAP6519

Bill To: 58723600

APPROVED

02/25/21 - JOSEPH MULLIN

COLLEGE OF BUSINESS
SHIPPING AND RECEIVING

425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Shipped From:

MCKESSON MEDICAL-SURGICAL INC(CHICAGO)
300 AIRPORT ROAD UNIT 2
ELGIN,IL 60123
SHIPPED FROM LICENSE: 004.003700

Shipped To: 58723601

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING

425 FAWELL BLVD

GLEN ELLYN IL 60137-6708

Ordered By: JOE

REGULATORY LICENSE: MMC TEACHING

Payment / Account Balance Inquires 1-800-453-5180
Phone:

Customer Service Phone: 1-800-877-1919

Sales Order Number	96477777	Credit Number	21528032
Sales Order Date	02/18/2021	Credit Date	02/24/2021
PO Number	371945	Original Invoice Number	21063316
Sales Rep Name	COSS, KAREN A.	Credit Amount	(\$331.90)

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full. Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1069196	Vendor: STPACK Vend Cat#: G35011BU	G3 MEDSLINGER BLUE PO LN 4	-5	EA	-5	73.38	-366.90	.00	
		MCKESSON RESTOCKING CHARGE PO LN 5	1	EA	1	35.00	35.00	.00	
			SUB TOTAL		FREIGHT	TAX	AMOUNT		
			(\$331.90)		\$0.00	\$0.00	(\$331.90)		

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.

PRICING IS CONFIDENTIAL AND PROPRIETARY.

Credit Memo

RCHAP6519

McKESSON

McKesson Medical-Surgical, Inc
9954 Mayland Drive Suite 4000
Henrico, VA 23233

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Account Number	58723600		
Document Number	21528032	Date	02/24/2021
Terms			AR NET 30 DAYS
			(\$331.90)

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:

CREDIT MEMORANDUM
DO NOT PAY