

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5059910
Invoice Date: 02/10/21
PO Number: B0370454
Check Number: E0083566
Check Amount: \$ 579.00
Check Date: 03/03/2021
Department ID: 00253
Reviewer Name: Colleen Gonzalez
Voucher Number: V0662531
Redaction Type: None
Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	02/10/2021	5059910	370454	\$391.00

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
0	2516718.1	02/09/2021	82 TLD XBG Badge	02/24/2021-05/23/2021	1	0.00	0.00
0	2516718.1	02/09/2021	82 TLD XBG Badge	02/24/2021-05/23/2021	34	11.50	391.00

BO# 370454

pay - \$235.77 from GL# 01-10-00253-5401002

pay - \$155.23 from GL# 01-10-00221-5401002

INVOICE REVIEWED

OKAY TO PAY

COLLEEN GONZALEZ 02/24/21

APPROVED

02/26/21 - DILYSS GALLYOT

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	02/10/2021	5059910	370454	\$391.00

Please remit payment to:

Radiation Detection Company, Inc.
3527 Snead Drive
Georgetown, TX 78626

You may pay online using MyRadCare

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

From: Gonzalez, Colleen <prolac@cod.edu>
Sent: Wed Feb 24 10:37:45 CST 2021
To: invoicing@cod.edu
CC:
Subject: Route invoice for approval

Good morning,

Please route the attached invoice to Dilyss Gallyot for approval; GL# 01-10-00253.

Thank you!

Colleen Prola-Gonzalez
Program Support Specialist, Nursing and Health Sciences Division
College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137
prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

[attachment: Radiation Detection \$391.00 Invoice 5059910 sent AP 2.24.21.pdf]

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5059912
Invoice Date: 02/10/21
PO Number: B0370454
Check Number: E0083566
Check Amount: \$ 579.00
Check Date: 03/03/2021
Department ID: 00221
Reviewer Name: Colleen Gonzalez
Voucher Number: V0662544
Redaction Type: None
Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	02/10/2021	5059912	370454	\$40.25

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

Judy Loughlin
735 Leicester Rd.
Elk Grove Village IL 60007

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
2	2516720.1	02/09/2021	82 TLD XBG Badge	02/24/2021-03/23/2021	1	0.00	0.00
2	2516720.1	02/09/2021	82 TLD XBG Badge	02/24/2021-03/23/2021	7	5.75	40.25

BO# 370454
GL# 01-10-00221-5401002

INVOICE REVIEWED
OKAY TO PAY
COLLEEN GONZALEZ 02/24/21

Finance Net 30 days late payment charge of 1.5% per month may be charged on all invoices not paid within terms of sale.

THIS IS AN ANNUAL PERCENTAGE RATE OF 18%

APPROVED
02/26/21 - DILYSS GALLYOT

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	02/10/2021	5059912	370454	\$40.25

Please remit payment to:

Radiation Detection Company, Inc.
3527 Snead Drive
Georgetown, TX 78626

You may pay online using MyRadCare

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

From: Gonzalez, Colleen <prolac@cod.edu>
Sent: Wed Feb 24 11:21:36 CST 2021
To: invoicing@cod.edu
CC:
Subject: Route invoice for approval

Good morning,

Please route the attached invoice to Dilyss Gallyot for approval; GL# 01-10-00221.

Thank you!

Colleen Prola-Gonzalez

Program Support Specialist, Nursing and Health Sciences Division

College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137

prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

[attachment: Radiation Detection \$40.25 Invoice 5059912 sent AP 2.24.21.pdf]

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5059913
Invoice Date: 02/10/21
PO Number: B0370454
Check Number: E0083566
Check Amount: \$ 579.00
Check Date: 03/03/2021
Department ID: 00221
Reviewer Name: Colleen Gonzalez
Voucher Number: V0662545
Redaction Type: None
Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	02/10/2021	5059913	370454	\$17.75

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attention: HSC-Amy Yarshen
425 Fawell Blvd
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
5	2511113.1	01/29/2021	05 TLD Plastic Ring	02/11/2021-03/10/2021	1	0.00	0.00
5	2511113.1	01/29/2021	05 TLD Plastic Ring	02/11/2021-03/10/2021	2	6.00	12.00
5	2511113.2	01/29/2021	82 TLD XBG Badge	02/11/2021-03/10/2021	1	0.00	0.00
5	2511113.2	01/29/2021	82 TLD XBG Badge	02/11/2021-03/10/2021	1	5.75	5.75

BO# 370454
GL# 01-10-00221-5401002

INVOICE REVIEWED
OKAY TO PAY
COLLEEN GONZALEZ 02/24/21

APPROVED
02/26/21 - DILYSS GALLYOT

THIS IS AN ANNUAL PERCENTAGE RATE OF 18%

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	02/10/2021	5059913	370454	\$17.75

Please remit payment to:

Radiation Detection Company, Inc.
3527 Snead Drive
Georgetown, TX 78626

You may pay online using MyRadCare

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

From: Gonzalez, Colleen <prolac@cod.edu>
Sent: Wed Feb 24 11:22:02 CST 2021
To: invoicing@cod.edu
CC:
Subject: Route invoice for approval

Good morning,

Please route the attached invoice to Dilyss Gallyot for approval; GL# 01-10-00221.

Thank you!

Colleen Prola-Gonzalez
Program Support Specialist, Nursing and Health Sciences Division
College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137
prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

[attachment: Radiation Detection \$17.75 Invoice 5059913 sent AP 2.24.21.pdf]

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5059911
Invoice Date: 02/10/21
PO Number: B0370454
Check Number: E0083566
Check Amount: \$ 579.00
Check Date: 03/03/2021
Department ID: 00221
Reviewer Name: Colleen Gonzalez
Voucher Number: V0662546
Redaction Type: None
Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	02/10/2021	5059911	370454	\$117.50

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

Diane Sulkko
554 Grimes Ave.
Naperville IL 60565

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
1	2516719.1	02/09/2021	05 TLD Plastic Ring	02/24/2021-03/23/2021	1	0.00	0.00
1	2516719.1	02/09/2021	05 TLD Plastic Ring	02/24/2021-03/23/2021	10	6.00	60.00
1	2516719.2	02/09/2021	82 TLD XBG Badge	02/24/2021-03/23/2021	1	0.00	0.00
1	2516719.2	02/09/2021	82 TLD XBG Badge	02/24/2021-03/23/2021	10	5.75	57.50

BO# 370454
GL# 01-10-00221-5401002

INVOICE REVIEWED

OKAY TO PAY

COLLEEN GONZALEZ 02/24/21

APPROVED

02/26/21 - DILYSS GALLYOT

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	02/10/2021	5059911	370454	\$117.50

Please remit payment to:

Radiation Detection Company, Inc.
3527 Snead Drive
Georgetown, TX 78626

You may pay online using MyRadCare

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

From: Gonzalez, Colleen <prolac@cod.edu>
Sent: Wed Feb 24 11:22:28 CST 2021
To: invoicing@cod.edu
CC:
Subject: Route invoice for approval

Good morning,

Please route the attached invoice to Dilyss Gallyot for approval; GL# 01-10-00221.

Thank you!

Colleen Prola-Gonzalez
Program Support Specialist, Nursing and Health Sciences Division
College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137
prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

[attachment: Radiation Detection \$117.50 Invoice 5059911 sent AP 2.24.21.pdf]

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5062410
Invoice Date: 02/25/21
PO Number: B0370454
Check Number: E0083566
Check Amount: \$ 579.00
Check Date: 03/03/2021
Department ID: 00221
Reviewer Name: Colleen Gonzalez
Voucher Number: V0662687
Redaction Type: None
Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	02/25/2021	5062410	370454	\$12.50

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Date	Description	Quantity	Price	Amount
02/22/2021	EasyReturn Label - Shipment 2115048 Group 8	1	12.50	12.50

GL# 01-10-00221-5401002
BO# 370454

**INVOICE REVIEWED
OKAY TO PAY**

**COLLEEN GONZALEZ 03/01/21
APPROVED
03/01/21 - DILYSS GALLYOT**

Terms: Net 30 days. A late payment charge of 1.5% per month may be charged on all invoices not paid within terms of sale.
THIS IS AN ANNUAL PERCENTAGE RATE OF 18%

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	02/25/2021	5062410	370454	\$12.50

Please remit payment to:

Radiation Detection Company, Inc.
3527 Snead Drive
Georgetown, TX 78626

You may pay online using MyRadCare

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

From: Gonzalez, Colleen <prolac@cod.edu>
Sent: Fri Feb 26 18:59:54 CST 2021
To: invoicing@cod.edu
CC:
Subject: Route invoice for approval

Please route the attached to Dilyss Gallyot for approval; GL# 01-10-00221.

Thank you!

Colleen Prola-Gonzalez
Program Support Specialist, Nursing and Health Sciences Division
College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137
prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

[attachment: Radiation Detection \$ 12.50 Invoice 5062410 sent AP 2.26.21.pdf]