

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1182046  
Vendor Name: Edward Hospital,DBA Edward Occupational  
Invoice Number: 00147792-00  
Invoice Date: 1/31/2022  
PO Number: B0374549  
Check Number: 0297270  
Check Amount: \$ 645.00  
Check Date: 03/15/2022  
Voucher Number: V0732338  
Document Type: AP Invoice

Document Below

Edward Occupational Health  
PO Box 776945  
Chicago, IL 60677-6945  
Telephone (331)221-6089

# Invoice

Page: 1

Invoice No.	Date
00147792 -00	01/31/2022

**Bill To:**

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

**Amount Due:** \$625.00

**Federal ID:** 36-3297173

**Account:** COD

**Terms: Net due in 30 days**

Service Date	Price	Discount	Amt Paid	Adjusted	Amount
Clinic Code: EDBB					
01/05/2022	53.00	\$5.00			\$48.00
01/05/2022	90.00	\$10.00			\$80.00
					\$128.00
Clinic Code: EDNP					
01/14/2022	90.00	\$10.00			\$80.00
01/14/2022	53.00	\$5.00			\$48.00
					\$128.00
Clinic Code: EDNP					
01/20/2022	80.00	\$32.00			\$48.00
					\$48.00
Clinic Code: EDBB					
01/22/2022	75.00	\$12.00			\$63.00
					\$63.00
Clinic Code: EDBB					
01/25/2022	25.00	\$5.00			\$20.00
01/25/2022	65.00	\$45.00			\$20.00
01/25/2022	50.00	\$30.00			\$20.00
01/25/2022	25.00	\$5.00			\$20.00

49

Edward Occupational Health  
PO Box 776945  
Chicago, IL 60677-6945  
Telephone (331)221-6089

# Invoice

Page: 2

Invoice No.	Date
00147792 -00	01/31/2022

**Bill To:**

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

**Amount Due:** \$625.00

**Federal ID:** 36-3297173

**Account:** COD

**Terms: Net due in 30 days**

Service Date	Discount	Amt Paid	Adjusted	Amount
01/25/2022	\$12.00			\$18.00
01/25/2022	\$10.00			\$80.00
				\$178.00
01/31/2022	\$10.00			\$80.00
				\$80.00

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

**Account** COD

College Of Dupage Health & Sciences

**Remit To:**

Edward Occupational Health  
PO Box 776945  
Chicago, IL 60677-6945  
Telephone (331)221-6089

If Paying by Credit Card, fill out below

AMEX ☐ VISA ☐ MC ☐ Discover ☐

Card Number:

Exp. Date:

Sec Code:

Signature:

Amount:

**TOTAL DUE: \$625.00**

**Invoice 00147792 -00 Date 1/31/2022**

**Thank You**

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1182046  
Vendor Name: Edward Hospital,DBA Edward Occupational  
Invoice Number: 00148808-00  
Invoice Date: 2/28/2022  
PO Number: B0374549  
Check Number: 0297270  
Check Amount: \$ 645.00  
Check Date: 03/15/2022  
Voucher Number: V0732393  
Document Type: AP Invoice

Document Below

Edward Occupational Health  
PO Box 776945  
Chicago, IL 60677-6945  
Telephone (331)221-6089

# Invoice

Page: 1

Invoice No.	Date
00148808 -00	02/28/2022

**Bill To:**

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

**Amount Due:** \$20.00

**Federal ID:** 36-3297173

**Account:** COD

**Terms: Net due in 30 days**

Adjusted	Amount
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clinic Code: EDNP	\$20.00
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\$20.00
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**\*\*INVOICE NUMBER MUST ACCOMPANY PAYMENT TO  
ENSURE PROPER PAYMENT PROCESSING\*\***

**Account COD**

College Of Dupage Health & Sciences

**Remit To:**

Edward Occupational Health  
PO Box 776945  
Chicago, IL 60677-6945  
Telephone (331)221-6089

If Paying by Credit Card, fill out below

AMEX ☐ VISA ☐ MC ☐ Discover ☐

Card Number:

Exp. Date:

Sec Code:

Signature:

Amount:

**TOTAL DUE: \$20.00**

**Invoice 00148808 -00 Date 2/28/2022**

**Thank You**

"Heller, Jeffrey" <hellerj704@cod.edu>

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**Invoice for Nursing from Edward Occupational Health Invoice# 00148808-00**

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"Heller, Jeffrey" <hellerj704@cod.edu>

Wed, Mar 9, 2022 at 06:34 PM GMT

CC:

BCC:

Hi,

I have attached an invoice from Edward Occupational Health for \$20. Invoice # is 00148808-00.

If you have any questions or need more information, please do not hesitate to contact me.

Best wishes,

Jeff

**Jeff Heller**

Program Support Specialist-Associate Degree Nursing (ADN)

Nursing and Health Sciences Division

College of DuPage

425 Fawell Boulevard

Glen Ellyn, IL 60137

Phone: (630)-942-2617

Fax: (630) 942-4222

Email: [hellerj704@cod.edu](mailto:hellerj704@cod.edu)

Website: <https://www.cod.edu/academics/programs/nursing/index.aspx>

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**1 attachment**

Edward Occupational Health Invoice # 00148808-00.pdf