

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1583427  
Vendor Name: CAE Healthcare Inc  
Invoice Number: INV000000144063  
Invoice Date: 2/25/2022  
PO Number: P0002194  
Check Number: E0088471  
Check Amount: \$ 2,500.00  
Check Date: 03/03/2022  
Voucher Number: V0730054  
Document Type: AP Invoice

Document Below

**CAE Healthcare, Inc. (Payment Address)**

LOCKBOX: 32955 Collection Center Dr Chicago, IL 60693

**INV000000144063**

Customer ID: 12

Sales Representative: Winslow, Carol

Customer Contact: invoicing@cod.edu

**CAE Healthcare**

Invoice Date: 2/25/22  
 Due Date: 4/26/22  
 Payment Terms: NET60  
 Delivery Terms: FOB: N/A  
 Order Date: 2/25/22  
 Sales Order Number: SO00106193  
 Purchase Order ID: P0002194

**Bill To Address:**

College of Dupage  
 Accounts Payable  
 425 Fawell Boulevard

Glen Ellyn, IL, 60137-6599

**Ship To Address:**

College of Dupage  
 425 Fawell Boulevard

Glen Ellyn, IL, 60137-6599

**Order Notes:****Packing Slip ID:**

Inv Ln	SO LN NO	Item ID	Description	National Stock Number ID	Model ID	Order Quantity	Quantity Invoiced	UOM	Net Unit Price Amount	Line Charge Amount	Tax %	Invoice Line Total
1	1	WAR-ARE13	Express Warranty Plan for Ares Advanced & Complete	WAR-ARE13	ARES0262	1	1	YR	2,500	0	N 0.00%	\$2,500.00
<b>Subtotal:</b>												<b>\$2,500.00</b>
											<b>Tax:</b>	<b>\$0.00</b>
											<b>Total Amount Due:</b>	<b>\$2,500.00</b>
Inv Ln Invoice Line Notes												
1 POP: 09/09/21 - 09/08/22												
<b>Please include Customer ID &amp; Invoice Number with payment, otherwise it will delay remittance to your account.</b>												

**Invoice Inquiries Contact:**

Attn: Accounts Receivable  
 sqar@cae.com  
 Phone#: 941-536-2861

**Corporate Address:**

CAE Healthcare, Inc.  
 6300 Edgelake Drive, Sarasota, FL 34240

**Wire Information:**

BANK OF AMERICA  
 CAE Healthcare, Inc.  
 Account #: 4426953821  
 Routing #: 026009593  
 Swift Code: BOFAUS3N - CHIPS Number 0959

**ACH Information:**

CAE Healthcare, Inc.  
 Account#: 4426953821  
 Routing#: 111000012  
**BANK OF AMERICA**  
 1401 Elm Street 2nd Floor, Dallas TX 75202

**Registration Information:**

CAE Healthcare Tax Payer ID # 22-3437089  
 California Reg# SR S OHC 100-161527  
 Canada GST# 86624-2530-RT-0001  
 British Columbia Business# 86624-2530  
 British Columbia PST# 1008-2848  
 Saskatchewan PST# 416990  
 Manitoba RST# 86624-2530-MT-001  
 Quebec GST# 1213251062

**Past due accounts will be charged a finance charge at the rate of 1% per month. All invoices are Payable in US Dollars.**

Florencia Sarmiento <florencea.tellado@cae.com>

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**[External] CAE Healthcare, Inc. - Invoice # 144063**

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**Florencia Sarmiento** <florencea.tellado@cae.com>

Fri, Feb 25, 2022 at 08:05 PM GMT

CC: Dorys Rangel <dorys.rangel@cae.com>, Tanya Ross-Garcia <tanya.ross@cae.com>

BCC:

CAUTION: This email originated from outside of COD's system. Do not click links, open attachments, or respond with sensitive information unless you recognize the sender and know the content is safe.

Hello ,

Attached you will find the Invoice for your order. Let me know if you need further assistance.

Please let me know if there have been any changes to your accounts payable contact information; please provide us with this information.

**Please include Customer ID & Invoice Number with your payment .**

Thank You!

**Florencia Sarmiento**

**Accounts Receivable Specialist**

**T.** 941-536-2560    **F.** 941-377-5590

**A.** 6300 Edgelake Drive, Sarasota, FL 34240

**CAE Healthcare**

[caehealthcare.com](http://caehealthcare.com)

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**2 attachments**

INVOICE.pdf

image002.png