

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1083631
Vendor Name: Copley Memorial Hospital
Invoice Number: 2022-1
Invoice Date: 3/11/2022
PO Number:
Check Number: 0298072
Check Amount: \$ 105.00
Check Date: 04/12/2022
Voucher Number: V0733367
Document Type: AP Invoice

Document Below

Vendor# 1083631
GL# 01-10-00253-5308001

Rush Copley Medical Center

2000 Ogden Ave.

Aurora, Illinois, 60504

INVOICE # 2022-1

Date: 3-11-2022

To Colleen Prola Gonzalez

College of DuPage

425 Fawell Boulevard

Glen Ellyn, IL 60137

Phone: 630-942-2349

E-mail: prolac@cod.edu

| Modality | payment terms | due date |
|--------------------|----------------|---------------|
| DMIR - Radiography | Due on receipt | April 1, 2022 |

| Date of SEMESTER | description | unit price | line total |
|------------------|-------------|------------|------------|
| Spring 2022 | | 45 | \$45 |
| | | | |
| Spring 2022 | | 30 | \$60 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | Subtotal | 75 | \$105.00 |
| | | Sales Tax | NA |
| | | Total | \$105.00 |

Make all checks payable to:

Michele Trotto

Manager of Imaging Services

2000 Ogden Ave.

Aurora, IL 60504

630-978-6299

Michele.Trotto@rushcopley.com

"Gonzalez, Colleen" <prolac@cod.edu>

route invoice for approval

"Gonzalez, Colleen" <prolac@cod.edu>

Mon, Mar 14, 2022 at 07:42 PM GMT

CC:

BCC:

Thank you!

Colleen Prola-Gonzalez

Program Support Specialist, Health Sciences

College of DuPage 425 Fawell Blvd Glen Ellyn, IL 60137

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

1 attachment

Rush Copley \$105 sent AP 3.14.22.pdf