

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087487

Vendor Name: Patterson Dental

Invoice Number: 3018646697

Invoice Date: 3/29/2022

PO Number: P0002202

Check Number: E0089002

Check Amount: \$ 12,000.00

Check Date: 04/06/2022

Voucher Number: V0735638

Document Type: AP Invoice

Document Below

PATTERSON DENTAL

COLLEGE OF DUPAGE-HYGIENE
DENTAL HYGIENE DEPARTMENT
425 FAWCETT AVE
GLEN ELLYN IL 60137-6708
US

Handwritten: GMD, UMBK, REC, 3/22/22

Patterson Dental Supply, Inc.
1226 MICHAEL DRIVE SUITE G
WOOD DALE IL 60191-1005
US

Customer #: 0200085769
Bill Cust #: 0200040696
Loyalty Status: Institution

Telephone: 630-616-8202
Representative: Anthony Skrodowski

Ship Date: Mar 29, 2022 10:14:44 AM
Invoice Date: Mar 29, 2022
Customer P.O.: P0002202
Shipped From:
Patterson Dental Supply, Inc.
1226 MICHAEL DRIVE SUITE G
WOOD DALE IL 60191-1005
US

Order #	Pack Slip #	Invoice #
0618190863	8019039535	3018646897

INVOICE

Product #	Ordered	Shipped	Unit	Vendor	Vendor #	Description	Unit Price	Amount																																													
101575338	3.000	3.000	EA	PROGNY	P7017-P	PREVA DC X-RAY 76", DOUBLE STUD Serial # L1116930 Serial # L1116933 Serial # L1116936 C2D 676 90 C0D 676 88 C0D 676 89 A C B	\$ 3950.00	\$ 11850.00																																													
<p>We apologize if your infection control product order has not been delivered in full. Patterson Dental implemented special measures to ensure continuity of supply. These items are being monitored as we work with our manufacturing and Patterson Dental supply chain teams to meet the order needs of all Patterson customers. ALL SALES OF INFECTION CONTROL ITEMS ARE FINAL AND NOT RETURNABLE. Customer may be obligated under federal law to disclose information from this invoice to Medicare, Medicaid, or similar state, federal or private payers for payment or review if any prices for products provided herein are subject to or reflect credits, rebates, discounts, or other price reductions. Patterson has made DISCLOSURE law transaction statements, info and history documents available to you by Tracelink. Enter https://app.tracelink.com/login into your web browser to access this info. A one-time registration is required. Manual checks may be converted and collected electronically.</p>																																																					
Total	3	3																																																			
Terms of Payment	Net due 60 days from inv date																																																				
Remit Payment to:	Patterson Dental Supply, Inc. 28244 Network Place Chicago IL 60673-1282																																																				
<table><tr><td>Sub Total</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>\$ 11850.00</td></tr><tr><td>Local Tax</td><td></td><td></td><td></td><td></td><td></td><td></td><td>0%</td><td>\$0.00</td></tr><tr><td>State Tax</td><td></td><td></td><td></td><td></td><td></td><td></td><td>0%</td><td>\$0.00</td></tr><tr><td>Freight</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>\$ 150.00</td></tr><tr><td>Total</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>\$ 12000.00</td></tr></table>									Sub Total								\$ 11850.00	Local Tax							0%	\$0.00	State Tax							0%	\$0.00	Freight								\$ 150.00	Total								\$ 12000.00
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"Conley, Cynthia" <fiskc@cod.edu>

Attached Image

"Conley, Cynthia" <fiskc@cod.edu>

Wed, Mar 30, 2022 at 04:46 PM GMT

CC:

BCC:

1 attachment

1023_001.pdf