

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1232903

Vendor Name: Z&Z Medical, Inc.

Invoice Number: 213992

Invoice Date: 4/21/2022

PO Number: P0002757

Check Number: E0089404

Check Amount: \$ 302.70

Check Date: 04/27/2022

Voucher Number: V0737370

Document Type: AP Invoice

Document Below



E-mail: orders@zzmedical.com

DATE	INVOICE #
4/21/2022	213992

College of DuPage
Attn: Accounts Payable
425 Fawell Blvd
Glen Ellyn, IL 60137
invoicing@cod.edu

College of DuPage
425 Fawell Blvd
Glen Ellyn, IL 60137
Attn: Thomas Phelan

PO#	DUE DATE	TERMS	REP	SHIP VIA
P0002757	6/20/2022	Net 60	ZZWeb	UPS Ground

Please mail your payment to the address above.

We accept all major credit cards.

Subtotal	\$302.70
Payments/Credits	\$0.00
Balance Due	\$302.70

"Z&Z Medical Inc." <orders@zzmedical.com>

[External] Invoice to pay from -PO#P0002757

"Z&Z Medical Inc." <orders@zzmedical.com>

Thu, Apr 21, 2022 at 04:22 PM GMT

CC:

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.

Accounts Payable:

Please find attached your invoice to pay from. Payments should be mailed to the address below and paid within 30 days.

Z & Z Medical, Inc.

1924 Adams Street

Cedar Falls, IA 50613

Paying by credit card is also an option for payment. You can call our office at 800-410-9575 to pay by phone.

Nicole Schmitz | Customer Care Coordinator

1924 Adams Street | Cedar Falls, IA 50613

PH 800.410.9575 **EM** nicoles@zzmedical.com

FX 319.277.3998 **WEB** zzmedical.com

3 attachments

image001.jpg

image005.jpg

213992.pdf