

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087485
Vendor Name: Medline Industries, Inc.
Invoice Number: 2258448249
Invoice Date: 3/17/2023
PO Number: P0005573
Check Number: 0311102
Check Amount: \$ 767.32
Check Date: 04/11/2023
Voucher Number: V0779698
Document Type: AP Invoice

Document Below



www.medline.com

INVOICE

Customer PO #	Invoice Date	Invoice #
P0005573	03/17/2023	2258448249

Sold To:
COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

Ship To:
COLLEGE OF DU PAGE*
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

SALES REP #		SALES ORDER #		CARRIER		FREIGHT TERMS		CUSTOMER #		CURRENCY		AMOUNT DUE	
3650		580471859		FEDEX GROUND		CUSTOMER		1070839		USD		\$141.92	
LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION		CODE*	DELIVERY #		UNIT PRICE		AMOUNT		

20	1.00	CS	1.00	B-F64020	TE	8137669745	141.92	141.92
/FILTER, BACTERIA								

GROSS	TAX AMOUNT	FREIGHT	TOTAL
141.92	0.00	0.00	\$141.92

Eligible Gross Amount \$141.92

Discount amount \$1.42 if recd. by 03/27/23

** Special Ship-To

* Code

TE - Tax Exempt

C - Customer Freight

CUSTOMER SHALL PAY THE FREIGHT CHARGES INDICATED ON THIS INVOICE. ALL CLAIMS OF SHORT SHIPMENTS, MIS-SHIPMENTS AND OTHER ERRORS IN DELIVERY SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN TWO BUSINESS DAYS OF THE INVOICE DATE, OR THEY ARE DEEMED WAIVED. ALL CLAIMS FOR PRICING AND BILLING ERRORS SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN 180 DAYS OF INVOICE DATE, OR THEY ARE DEEMED WAIVED.

EXPORT PROHIBITED CONTRARY TO U.S. FEDERAL LAWS. NO RETURNS WILL BE ALLOWED WITHOUT WRITTEN AUTHORIZATION. (PH: 800-307-8386)

INTEREST WILL BE CHARGED AT THE RATE OF 1.5% PER MONTH OR AS OTHERWISE CONTRACTUALLY STIPULATED AGAINST PAST DUE BALANCES.

MEDLINE INDUSTRIES, LP IS AN ILLINOIS LIMITED PARTNERSHIP AND INCLUDES ITS WHOLLY OWNED SUBSIDIARY MEDLINE INDUSTRIES HOLDINGS, LP, A DELAWARE LIMITED PARTNERSHIP

Billing Inquiries: 1-800-388-2147, A/R Svcs Rep: Carly Saul x7704271

REMITTANCE

Bill To:
COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Customer #	1070839
Invoice #	2258448249
Invoice Date	03/17/2023
Sales Rep #	3650
Payment Terms	1% 10, Net 45
Amount Due	\$141.92

Remit To:
Medline Industries, LP
Dept Ch 14400
Palatine IL 60055-4400

AMOUNT PAID \$ _____

Detach and return this portion with your payment

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

[External] Medline Invoices 1070839

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

Fri, Mar 17, 2023 at 09:25 AM UTC

CC:

BCC:

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Attached are Medline invoice/s.

1 attachment

2258448249.PDF

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087485
Vendor Name: Medline Industries, Inc.
Invoice Number: 2256957181
Invoice Date: 3/8/2023
PO Number: P0005629
Check Number: 0311102
Check Amount: \$ 767.32
Check Date: 04/11/2023
Voucher Number: V0779749
Document Type: AP Invoice

Document Below



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INVOICE

Customer PO #	Invoice Date	Invoice #
P0005629	03/08/2023	2256957181

Sold To:
COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

Ship To:
COLLEGE OF DU PAGE*
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

SALES REP #		SALES ORDER #		CARRIER		FREIGHT TERMS		CUSTOMER #		CURRENCY		AMOUNT DUE	
3650		580848527		FEDEX GROUND		MEDLINE		1070839		USD		\$11.10	
LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION		CODE*	DELIVERY #		UNIT PRICE		AMOUNT		

110	1.00	EA	1.00	MDSR004273	TE	8136449074	11.10	11.10
/TABLESPOON, GREAT GRIP								

GROSS	TAX AMOUNT	FREIGHT	TOTAL
11.10	0.00	0.00	\$11.10

Eligible Gross Amount \$11.10

Discount amount \$0.11 if recd. by 03/18/23

** Special Ship-To

* Code

TE - Tax Exempt

C - Customer Freight

CUSTOMER SHALL PAY THE FREIGHT CHARGES INDICATED ON THIS INVOICE. ALL CLAIMS OF SHORT SHIPMENTS, MIS-SHIPMENTS AND OTHER ERRORS IN DELIVERY SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN TWO BUSINESS DAYS OF THE INVOICE DATE, OR THEY ARE DEEMED WAIVED. ALL CLAIMS FOR PRICING AND BILLING ERRORS SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN 180 DAYS OF INVOICE DATE, OR THEY ARE DEEMED WAIVED.

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Billing Inquiries: 1-800-388-2147, A/R Svcs Rep: Carly Saul x7704271

REMITTANCE

Bill To:
COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Customer #	1070839
Invoice #	2256957181
Invoice Date	03/08/2023
Sales Rep #	3650
Payment Terms	1% 10, Net 45
Amount Due	\$11.10

Remit To:
Medline Industries, LP
Dept Ch 14400
Palatine IL 60055-4400

AMOUNT PAID \$ _____

Detach and return this portion with your payment

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

[External] Medline Invoices 1070839

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

Wed, Mar 8, 2023 at 11:47 AM UTC

CC:

BCC:

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Attached are Medline invoice/s.

1 attachment

2256957181.PDF

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087485
Vendor Name: Medline Industries, Inc.
Invoice Number: 2259327814
Invoice Date: 3/23/2023
PO Number: P0006392
Check Number: 0311102
Check Amount: \$ 767.32
Check Date: 04/11/2023
Voucher Number: V0780634
Document Type: AP Invoice

Document Below



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INVOICE

Customer PO #	Invoice Date	Invoice #
P0006392	03/23/2023	2259327814

Sold To:
COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

Ship To:
COLLEGE OF DU PAGE*
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

SALES REP #		SALES ORDER #		CARRIER		FREIGHT TERMS		CUSTOMER #		CURRENCY		AMOUNT DUE	
3650		585630502		FEDEX GROUND		MEDLINE		1070839		USD		\$75.40	
LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION		CODE*	DELIVERY #	UNIT PRICE		AMOUNT			

20	3.00	EA	3.00	GMO107650H /BAG, PRISMAFLEX SP418, 9 LITER	TE,C	8138657433	22.99	68.97
30	1.00	PK	1.00	BXTCH6X9BIOZ /BAG,TRANSPORT,6X9,BIOHAZARD,3 WALL,Z	TE,C	8138658611	6.43	6.43

GROSS	TAX AMOUNT	FREIGHT	TOTAL
75.40	0.00	0.00	\$75.40

Eligible Gross Amount \$75.40

Discount amount \$0.75 if recd. by 04/02/23

** Special Ship-To

* Code

TE - Tax Exempt

C - Customer Freight

CUSTOMER SHALL PAY THE FREIGHT CHARGES INDICATED ON THIS INVOICE. ALL CLAIMS OF SHORT SHIPMENTS, MIS-SHIPMENTS AND OTHER ERRORS IN DELIVERY SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN TWO BUSINESS DAYS OF THE INVOICE DATE, OR THEY ARE DEEMED WAIVED. ALL CLAIMS FOR PRICING AND BILLING ERRORS SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN 180 DAYS OF INVOICE DATE, OR THEY ARE DEEMED WAIVED.
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Billing Inquiries: 1-800-388-2147, A/R Svcs Rep: Carly Saul x7704271

REMITTANCE

Bill To:
COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Customer # 1070839
Invoice # 2259327814
Invoice Date 03/23/2023
Sales Rep # 3650
Payment Terms 1% 10, Net 45
Amount Due \$75.40

Remit To:
Medline Industries, LP
Dept Ch 14400
Palatine IL 60055-4400

AMOUNT PAID \$ _____

Detach and return this portion with your payment

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

[External] Medline Invoices 1070839

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

Thu, Mar 23, 2023 at 09:23 AM UTC

CC:

BCC:

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Attached are Medline invoice/s.

1 attachment

2259327814.PDF

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087485
Vendor Name: Medline Industries, Inc.
Invoice Number: 2259497167
Invoice Date: 3/24/2023
PO Number: P0006392
Check Number: 0311102
Check Amount: \$ 767.32
Check Date: 04/11/2023
Voucher Number: V0780688
Document Type: AP Invoice

Document Below



www.medline.com

INVOICE

Customer PO #	Invoice Date	Invoice #
P0006392	03/24/2023	2259497167

Sold To:
COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

Ship To:
COLLEGE OF DU PAGE*
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

SALES REP #		SALES ORDER #		CARRIER		FREIGHT TERMS		CUSTOMER #		CURRENCY		AMOUNT DUE	
3650		585630502		FEDEX GROUND		MEDLINE		1070839		USD		\$521.98	
LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION		CODE*	DELIVERY #	UNIT PRICE		AMOUNT			

30	3.00	EA	3.00	GMO114423H /BAG,PRISMAFLEX,5 LITER	TE	8138657651	20.41	61.23
60	1.00	CS	1.00	BMG415110 /VALVE, ULTRASITE	TE	8138657651	214.15	214.15
70	3.00	BX	3.00	SSN103253Z /SYR W/NDLE,SAFETY,25GX5/8, 3ML	TE	8138657651	46.63	139.89
80	3.00	BX	3.00	SSN103225Z /SYR W/NDLE,SAFETY,22GX1, 3ML	TE	8138657651	35.57	106.71

GROSS	TAX AMOUNT	FREIGHT	TOTAL
521.98	0.00	0.00	\$521.98

Eligible Gross Amount \$521.98

Discount amount \$5.22 if recd. by 04/03/23

** Special Ship-To

* Code

TE - Tax Exempt

C - Customer Freight

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REMITTANCE

Bill To:
COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Customer # 1070839
Invoice # 2259497167
Invoice Date 03/24/2023
Sales Rep # 3650
Payment Terms 1% 10, Net 45
Amount Due \$521.98

Remit To:
Medline Industries, LP
Dept Ch 14400
Palatine IL 60055-4400

AMOUNT PAID \$ _____

Detach and return this portion with your payment

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

[External] Medline Invoices 1070839

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

Fri, Mar 24, 2023 at 09:39 AM UTC

CC:

BCC:

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Attached are Medline invoice/s.

1 attachment

2259497167.PDF

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087485
Vendor Name: Medline Industries, Inc.
Invoice Number: 2259124249
Invoice Date: 3/22/2023
PO Number: P0006392
Check Number: 0311102
Check Amount: \$ 767.32
Check Date: 04/11/2023
Voucher Number: V0780699
Document Type: AP Invoice

Document Below



www.medline.com

INVOICE

Customer PO #	Invoice Date	Invoice #
P0006392	03/22/2023	2259124249

Sold To:
COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

Ship To:
COLLEGE OF DU PAGE*
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

SALES REP #		SALES ORDER #		CARRIER		FREIGHT TERMS		CUSTOMER #		CURRENCY		AMOUNT DUE	
3650		585630502		FEDEX GROUND		MEDLINE		1070839		USD		\$16.92	
LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION		CODE*	DELIVERY #	UNIT PRICE		AMOUNT			

40	1.00	EA	1.00	FSN02620226H	TE,C	8138657492	16.92	16.92
/SET,LIBERTY DRAIN,W/4-5 LITER BAGS								

GROSS	TAX AMOUNT	FREIGHT	TOTAL
16.92	0.00	0.00	\$16.92

Eligible Gross Amount \$16.92

Discount amount \$0.17 if recd. by 04/01/23

** Special Ship-To

* Code

TE - Tax Exempt

C - Customer Freight

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Billing Inquiries: 1-800-388-2147, A/R Svcs Rep: Carly Saul x7704271

REMITTANCE

Bill To:
COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Customer #	1070839
Invoice #	2259124249
Invoice Date	03/22/2023
Sales Rep #	3650
Payment Terms	1% 10, Net 45
Amount Due	\$16.92

Remit To:
Medline Industries, LP
Dept Ch 14400
Palatine IL 60055-4400

AMOUNT PAID \$ _____

Detach and return this portion with your payment

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

[External] Medline Invoices 1070839

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

Wed, Mar 22, 2023 at 10:01 AM UTC

CC:

BCC:

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Attached are Medline invoice/s.

1 attachment

2259124249.PDF