

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1087487  
Vendor Name: Patterson Dental  
Invoice Number: 3025291954  
Invoice Date: 4/26/2023  
PO Number: B0000785  
Check Number: E0095274  
Check Amount: \$ 3,401.93  
Check Date: 05/18/2023  
Voucher Number: V0785732  
Document Type: AP Invoice

Document Below



# PATTERSON DENTAL

Cyndy Dental  
COLLEGE OF DUPAGE-HYGIENE  
DENTAL HYGIENE DEPARTMENT  
425 FAWELL AVE  
GLEN ELLYN IL 60137-6708  
US

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

Invoice 3025291954

Date: 2023-04-26  
Reference Number: 9002648547

Customer P.O.: vacuum maintenance

Ship From  
Chicago (D)  
1226 MICHAEL DRIVE SUITE G  
WOOD DALE IL 60191-1005  
US

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

Telephone: 630-616-8202  
Fax: 630-616-8207

Conf. Date	Conf. No.	Product No.	Description	Quantity	Unit	Unit Price	Amount	Tax
2023-04-25	9002648547	200000483	OFFICE CALL FEE	1.000	EA	\$110.70	110.70	
2023-04-25	9002648547	200000002	Service Labor	1.750	HR	\$378.99	663.23	
2023-04-25	9002648547	55515127	SERVICE FILTERS	2.000	EA	\$402.00	804.00	
2023-04-25	9002648547	50381160	RAM/VAC SYNTHETIC OIL	2.000	BT	\$42.00	84.00	
2023-04-25	9002648547	200000235	Travel Hours: Non-Billable	0.117	HR	\$0.00	0.00	
Information below could be truncated. Please refer to confirmations for additional details				Sub Total			\$ 1,661.93	
Confirmation # 9002648547 . Created on: 04/25/2023 . Exec. Employee: Glen Shipherd				Local Tax		0.00 %	\$ 0.00	
Changed the oil and filters on both Ramvac vacuum pumps.				State Tax		0.00 %	\$ 0.00	
				Total			\$ 1,661.93	

Net due 60 days from Inv date  
Remit Payment to:  
Patterson Dental Supply, Inc.  
28244 Network Place  
Chicago IL 60673-1282

142

BD 000785

Cyndy Dental 5/2/23

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

---

**Attached Image**

---

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

Tue, May 2, 2023 at 01:31 PM UTC

CC:

BCC:

---

**1 attachment**

2845\_001.pdf

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1087487  
Vendor Name: Patterson Dental  
Invoice Number: 3025335688  
Invoice Date: 4/28/2023  
PO Number: B0000870  
Check Number: E0095274  
Check Amount: \$ 3,401.93  
Check Date: 05/18/2023  
Voucher Number: V0785733  
Document Type: AP Invoice

Document Below

# PATTERSON DENTAL

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

Customer #: 0200085769

Bill Cust #: 0200040696  
Loyalty Status: Institution

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

Telephone: 630-616-8202  
Representative: Anthony Skrobowski

Date: Apr 28, 2023 1:06:08 PM

Customer P.O.: BO 000870

Shipped From:  
Patterson Logistics Services, Inc.  
7055 CLEVELAND RD  
SOUTH BEND IN 46628-7724  
US

Order #	Pack Slip #	Credit #
0620248994	N/A	3025335688

**CREDIT**

Product #	Ordered	Shipped	Unit	Vendor	Vendor #	Description	Unit Price	Amount
-----------	---------	---------	------	--------	----------	-------------	------------	--------

70287847 4.000 4.000 EA POS CPC201900 LIQUID SOAP SOFTSOAP 1 GAL MOISTURIZING  
Credit Memo - Do Not Pay

Total	4	4
-------	---	---

Terms of Payment  
Net due 60 days from inv date

Remit Payment to:  
Patterson Dental Supply, Inc.  
28244 Network Place  
Chicago IL 60673-1282

We continue to implement special measures to ensure continuity of supply. 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 DSCSA/state 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.

Sub Total	\$ 91.96
Local Tax	0% \$0.00
State Tax	0% \$0.00
Total	\$ 91.96

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

---

**Attached Image**

---

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

Mon, May 1, 2023 at 02:12 PM UTC

CC:

BCC:

---

**1 attachment**

2838\_001.pdf

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1087487  
Vendor Name: Patterson Dental  
Invoice Number: 3025408543  
Invoice Date: 5/3/2023  
PO Number: B0000785  
Check Number: E0095274  
Check Amount: \$ 3,401.93  
Check Date: 05/18/2023  
Voucher Number: V0785734  
Document Type: AP Invoice

Document Below



# PATTERSON DENTAL

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

Customer #: 0200085769

Bill Cust #: 0200040696  
Loyalty Status: Institution

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

Telephone: 630-616-8202  
Representative: Anthony Skrobowski

Ship Date: May 3, 2023 3:07:14 PM  
Invoice Date: May 3, 2023  
Customer P.O.: B0000785  
Shipped From:  
Patterson Logistics Services, Inc.  
800 MONTE VISTA DR  
DINUBA CA 93618-9117  
US

Order #	Pack Slip #	Invoice #
0620330379	8024544801	3025408543

INVOICE

*Conf mch 5/4/23*

Product #	Ordered	Shipped	Unit	Vendor	Vendor #:	Description	Unit Price	Amount
50107292	2.000	2.000	EA	AIRTEQ	87354	PREV MAINTENANCE KIT AS70, AS70 NEO	\$ 870.00	\$ 1740.00
<div><div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div>								
<div><div></div></div>								



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

---

**Attached Image**

---

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

Thu, May 4, 2023 at 08:17 PM UTC

CC:

BCC:

---

**1 attachment**

2874\_001.pdf

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1087487  
Vendor Name: Patterson Dental  
Invoice Number: 3025355670  
Invoice Date: 5/1/2023  
PO Number: B0000870  
Check Number: E0095274  
Check Amount: \$ 3,401.93  
Check Date: 05/18/2023  
Voucher Number: V0785735  
Document Type: AP Invoice

Document Below

# PATTERSON DENTAL

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

Customer #: 0200085769

Bill Cust #: 0200040696  
Loyalty Status: Institution

Telephone: 630-616-8202  
Representative: Anthony Skrobowski

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

Ship Date: Apr 28, 2023 1:13:00 PM  
Invoice Date: May 1, 2023  
Customer P.O.: BO 000870  
Shipped From:  
Shipped by Vendor/Manufacturer

## INVOICE

Order #	Pack Slip #	Invoice #
0620305704		3025355670

Product #	Ordered	Shipped	Unit	Vendor	Vendor #:	Description	Unit Price	Amount
70287847	4.000	4.000	EA	POS	CPC201900	LIQUID SOAP SOFTSOAP 1 GAL MOISTURIZING	\$ 22.99	\$ 91.96
<div> <div> We continue to implement special measures to ensure continuity of supply. 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 DSCSA/state law transaction statements, info and history documents available to you by Tracelink. Enter <a href="https://app.tracelink.com/login">https://app.tracelink.com/login</a> into your web browser, to access this info. A one-time registration is required. Manual checks may be converted and collected electronically. </div> <div> Sub Total \$ 91.96  Local Tax 0% \$0.00  State Tax 0% \$0.00  Shipping and Handling \$ 11.99  Discount \$ 11.99-  Total \$ 91.96 </div> </div>								
Total	4	4						

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

---

**Attached Image**

---

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

Wed, May 3, 2023 at 01:19 PM UTC

CC:

BCC:

---

**1 attachment**

2858\_001.pdf