

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1084150
Vendor Name: DuPage County Health Dept.
Invoice Number: IN0062119
Invoice Date: 5/19/2023
PO Number:
Check Number: E0095392
Check Amount: \$ 346.00
Check Date: 05/26/2023
Voucher Number: V0786464
Document Type: AP Invoice

Document Below



Submit Payments to: DuPage County Health Department
111 North County Farm Road
Wheaton, IL 60187
630-682-7400

INVOICE - FIRST NOTICE

05-60-11301-5309004
479 License NONE
\$346.00

Total Amount of:

\$346.00

Due By:

5/29/2023

TO : COLLEGE OF DUPAGE ATTN:MCANINCH ARTS CENTER / THOMAS MURRAY
425 FAWELL BLVD
GLEN ELLYN, IL 60137

Invoice ID

IN0062119

Date

5/19/2023

Account ID

AR0002667

Facility ID

FA0003237

RE : COLLEGE OF DUPAGE

MCANINCH ARTS CENTER

PLEASE RETURN ABOVE PORTION OF INVOICE NOTICE WITH PAYMENT

Date	Program/ Element	Description	Amount
5/19/2023	4009	Annual Category II Food Establishment 425 FAWELL BLVD GLEN ELLYN IL 60137	\$625.00
5/22/2023	9999	PAYMENT (CREDIT) 425 FAWELL BLVD GLEN ELLYN IL 60137	\$-279.00
Total Due for This Invoice:			\$346.00

Late Fee: A 25% Penalty will be charged/due in addition to the listed fee, if paid after due date.



Please note, if you are paying with a check, include the Invoice ID on the check itself.

You can now pay online! Visit our website at <https://eco.dupagehealth.org/#!/onlinePayments> or scan the QR Code