

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1545669
Vendor Name: Darby Dental Supply, LLC
Invoice Number: 2887799
Invoice Date: 9/28/2023
PO Number: B0001554
Check Number: 0318061
Check Amount: \$ 695.06
Check Date: 10/11/2023
Voucher Number: V0806246
Document Type: AP Invoice

Document Below



Sold To:	Ship To:	Customer No. 371151140-10
College of Dupage Dental Hygiene Program - HSC 1122 425 Fawell Blvd Glen Ellyn IL 60137	Edward R Chavez DDS College of Dupage Dental Hygiene Program - HSC 1122 425 Fawell Blvd Glen Ellyn IL 60137	Invoice No. 2887799
		Date 09/28/23
		P.O. No. BO 001554
		State and Zip 019017516

PRIME					Unit Price	Extended Price
Quantity	Msg	Product No	Size	Description		
4		9508212	200BX	STERILIZATION POUCH 4.25 X 11 DARBY	13.61	54.44
2		8490095	100BX	RELEAF LEAVES REFILL 100CT 66075340	90.00	180.00
10		9508203	200BX	STERILIZATION POUCH 2.25 X 4 DARBY	6.39	63.90
20		3416865	100PK	COMFORT PLUS SAL EJCT CLR/WHT ZCWCP	4.71	94.20
4		9508201	200BX	STERILIZATION POUCH 2.75 X 9 DARBY	7.42	29.68
1		3791202	1GL	LIQUID DIAL CLEAR SENS 2340082838	22.75	22.75
4 B*		3411202	1000	CUPS PLASTIC 5OZ LAVENDER DARBY	28.49	113.96
6 B*		9508201	200BX	STERILIZATION POUCH 2.75 X 9 DARBY	7.42	44.52
6 B*		9508212	200BX	STERILIZATION POUCH 4.25 X 11 DARBY	13.61	81.66
* SEPARATE SHIPMENT MESSAGES: A* ALTWHS B* BULK C* CONTROL D* DROP E* FRIG H* HAZARD M* MACHINE						
					Soldtotal	685.11
					Tot. Excl. Shipping	9.95
					Tax	
					Total	695.06

2887799

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PRODUCT RETURNS ONLY:
DARBY DENTAL SUPPLY LLC
4460 E HOLMES ROAD SUITE 101
MEMPHIS TN 38118

REMIT PAYMENT ONLY:
Darby Dental Supply, LLC
P.O. Box 26582
New York, NY 10087-6582

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

Attached Image

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

Mon, Oct 9, 2023 at 12:37 PM UTC

CC:

BCC:

1 attachment

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