

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1498351  
Vendor Name: DiaMedical USA Equipment LLC  
Invoice Number: INV31030  
Invoice Date: 10/5/2023  
PO Number: P0008842  
Check Number: E0097520  
Check Amount: \$ 593.48  
Check Date: 10/10/2023  
Voucher Number: V0806085  
Document Type: AP Invoice

Document Below

**THANK YOU FOR YOUR BUSINESS!**

Please email your tax-exempt certificate to  
 Accounting@DiaMedicalUSA.com if applicable.  
 You will be charged for tax if an exemption status is not on file.

**Fein # 92-3206525**
**BILL TO**

College of DuPage Accounts Payable  
 425 Fawell Blvd  
 Glen Ellyn IL 60137  
 United States

**INVOICE # INV31030**
**Providing Turnkey Solutions for Medical  
 Equipment Procurement & Management**
**SHIP TO**

College Of Dupage Shipping and Receiving  
 425 Fawell Blvd  
 attn: Barb Coe HSC 1220  
 Glen Ellyn IL 60137  
 United States

DATE	DUE DATE	PO #	INVOICE #	TERMS
10/5/2023	11/4/2023	P0008842	INV31030	Net 30

QTY	DESCRIPTION	ITEM #	UNIT PRICE	TOTAL
1	5 Drawer Emergency Crash Cart Refill Kit - Includes: Drawer 1 Refill - Simulated Medications Drawer 2 Refill - Adult Intubation Supplies Drawer 3 Refill - IV Start Supplies Drawer 4 Refill - IV Supplies and Tubing Drawer 5 Refill - Additional Supplies	LC027921	\$533.99	\$533.99
	*Simulated Medications And Simulated Fluids Are For Simulation Purposes Only. Not intended For Human Or Animal Use.	Notes - Simulated Meds, Simulated Fluids, or Practi- Meds		

**NOTES**

Please note on your purchase order:

- On-site contact for freight delivery orders.
- If your order must be received by a specific date.
- If your facility has special delivery acceptance availability or holiday hours.

Quoted items may have a longer lead time than expected. If items are needed by a specific date please let us know.

<b>SUBTOTAL</b>	\$533.99
<b>SHIPPING</b>	\$59.49
<b>SALES TAX</b>	\$0.00
<b>CREDIT</b>	\$0.00
<b>BALANCE DUE</b>	\$593.48

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 Accounting@DiaMedicalUSA.com if applicable.

*You will be charged for tax if an exemption status is not  
 on file.*

**DiaMedical****medmattress.com**  
a division of DiaMedical**THANK YOU FOR YOUR BUSINESS!**

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Accounting@DiaMedicalUSA.com if applicable.  
You will be charged for tax if an exemption status is not on file.

**Fein # 92-3206525****REMITTANCE SLIP**

	CREDIT CARD INFORMATION	ACH	CHECKS PAYABLE TO
<b>Customer:</b> 5615 College of DuPage <b>Invoice #:</b> INV31030 <b>Amount Due:</b> \$593.48 <b>Amount Paid:</b> \$	<b>Type:</b> <b>Credit Card #:</b> <b>Expiration Date:</b> <b>Signature:</b>	<b>Account #:</b> 1092254271 <b>Routing #:</b> 043000096	DiaMedical 31440 Northwestern Highway Suite 150 Farmington Hills, MI 48334

**INVOICE # INV31030****Providing Turnkey Solutions for Medical  
Equipment Procurement & Management**

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**[External] Invoice # INV31030 - DiaMedical**

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Robert Maisonville <[rmaisonville@diamedicalusa.com](mailto:rmaisonville@diamedicalusa.com)>

Thu, Oct 5, 2023 at 08:41 PM UTC

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.

Hello,

Please find Invoice # INV31030 attached.

This invoice is due on 11/4/2023. Please remit payment at your earliest convenience.

Please let me know if you have any questions or if I can help with anything else.

Thank you and have a great day!

**CHANGE IN BANKING INFORMATION:**

**Account # 1092254271**

**ABA # 043000096**

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**Accounting Department**

DiaMedical USA | [MedMattress.com](http://MedMattress.com) | [SimLabSolutions.com](http://SimLabSolutions.com)

P. 248.855.3966 | TF. 877.593.6011 | F. 248.671.1550

[DiaMedicalUSA.com](http://DiaMedicalUSA.com) | [MedMattress.com](http://MedMattress.com) | [SimLabSolutions.com](http://SimLabSolutions.com)

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**1 attachment**

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