

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087487
Vendor Name: Patterson Dental
Invoice Number: 3032277582
Invoice Date: 8/1/2024
PO Number: B0002228
Check Number: E0103222
Check Amount: \$ 53.85
Check Date: 09/18/2024
Voucher Number: V0846457
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: 07-30-2024 1:45:47 PM
Invoice Date: 08-01-2024
Customer P.O.: BO 002228
Fulfillment Ctr:
Shipped by Vendor/Manufacturer

Only Condy 9/19/24

INVOICE

Order #	Pack Slip #	Invoice #
0622436731		3032277582

Product #	Ordered	Shipped	Unit	Vendor	Vendor #:	Description	Unit Price	Amount
70147322	3.000	3.000	BX	POS	VJO-147322-PAT3	PK-12 PON PON BALLS ASST COLORS 5" 12/	\$ 17.95	\$ 53.85
<div> <div> <div>Sub Total</div> <div>\$ 53.85</div> </div> <div> <div>Local Tax</div> <div>0%</div> <div>\$0.00</div> </div> <div> <div>State Tax</div> <div>0%</div> <div>\$0.00</div> </div> <div> <div>Shipping and Handling</div> <div></div> <div>\$ 1.40</div> </div> <div> <div>Discount</div> <div></div> <div>\$ 1.40-</div> </div> <div> <div>Total</div> <div>\$ 53.85</div> </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 <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. Safety Data Sheets can be found on the Patterson Website or by going to <https://www.pattersondental.com/sds>

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

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

Attached Image

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

Mon, Sep 9, 2024 at 06:09 PM UTC

CC:

BCC:

1 attachment

4983_001.pdf