

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1545259

Vendor Name: United States Cylinder Gas,D/B/A US Gas

Invoice Number: 437186

Invoice Date: 8/30/2024

PO Number: P0013471

Check Number: E0103244

Check Amount: \$ 246.75

Check Date: 09/18/2024

Voucher Number: V0850217

Document Type: AP Invoice

Document Below

CAUTION: TRANSPORTING GAS CYLINDERS IN CARS, VANS OR OTHER CLOSED MOTOR VEHICLES IS **DANGEROUS** AND SHOULD BE AVOIDED. GAS CYLINDERS MUST **NEVER** BE MOVED IN CLOSED SPACES, INCLUDING BUT NOT LIMITED TO CAR TRUNKS, DUE TO THE HIGH RISK OF **EXPLOSION OR FIRE**.

CAUTION: LET **NO OIL**, GREASE, OR OIL BASED LUBRICANT OF ANY NATURE COME IN CONTACT WITH ANY PART OF THE **OXYGEN CYLINDER, REGULATOR OR FITTINGS**, AS THIS IS CONSIDERED DANGEROUS. ACETYLENE, PROPANE AND HYDROGEN ARE FLAMMABLE AND EXPLOSIVE GASES AND CONSIDERED DANGEROUS.

Medical Gas • Industrial Gas • Specialty Gas • Cryogenics • Welding Supplies

USGas

United States Cylinder Gas

11618 S. Mayfield
Alsip, Illinois 60803
Phone: (708) 389-1402
Fax: (708) 389-1409

INVOICE
PLEASE REMIT TO:

US Gas
11618 S. Mayfield
Alsip, IL 60803

INVOICE NO.	DATE	PAGE
437186	08/30/24	1

ORDER DATE	TERRITORY	DRIVER	WANTED DATE
08/29/24	3	MHW	08/30/24

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COLLEGE OF DUPAGE
425 FAWELL BLVD
ATTN: FARREL SUMMERS
GLEN ELLYN, IL 60137

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COLLEGE OF DUPAGE
425 FAWELL BLVD
HEALTH SCIENCE BUILDING/HSC 3316
GLEN ELLYN, IL 60137

CUSTOMER I.D.	SALES CATEGORY	EMPL/STORE	CUSTOMER P.O. NO.	JOB RELEASE NO.	SHIP DATE
COLLE1 5	CHRG/DELIVERY	US8 1	P0013471	WB	08/30/24

PRODUCT	HAZARD CLASS	HMID	QTY.SHIPPED	U/M	RET'D/ B.O.	PART NO.	CUBIC FEET	UNIT PRICE	AMOUNT
311 AIR, COMPRESSED	2.2	UN1002	1	CYL	0	AIRU0TG	311	135.000	135.00
ULTRA ZERO GRADE <.5 PPM THC	HAZARDOUS								
311 AIR, COMPRESSED	2.2	UN1002	0	CYL	1	AIRDT		50.470	0.00
DRY	NONFLAMMABLE								
CALL FARREL SUMMERS UPON ARRIVAL SO SO HE CAN OPEN THE CLOSET FARREL 630-942-2550/630-624-2360 7:30-4 CHEMISTRY DEPARTMENT 630-942-2238									
DELIVERY CHARGE			1			\$DEL4	1	46.950	46.95
*****			1			\$THANKYOU		0.000	0.00
WE ACCEPT VISA,M/CD,AMEX & DISCOVER CARD PLACE YOUR ORDERS @ ORDERS@USCYLGAS.COM *****									

CUSTOMER'S SIGNATURE

X

CAPS SHIPPED

CAPS RET.

DRIVER'S INIT.

TOTAL

181.95

UNLESS OTHERWISE STATED, THE CYLINDERS ON THIS DOCUMENT ARE THE PROPERTY OF VENDOR. BY ACCEPTANCE OF THIS DELIVERY, THE CUSTOMER ASSUMES RESPONSIBILITY FOR THE COUNT AND THE DOLLAR VALUE OF ANY CYLINDER LOST OR DAMAGED.

TERMS: **NET 30 DAYS** FROM INVOICE DATE.
INVOICES NOT PAID IN ACCORDANCE WITH
TERMS ARE SUBJECT TO A SERVICE CHARGE
OF **2% PER MONTH, 24% PER YEAR**.

THE ABOVE MATERIAL WILL REMAIN THE PROPERTY OF THE SELLER UNTIL FINAL PAYMENT HAS BEEN MADE.

THIS IS TO CERTIFY THAT THE HERE-IN NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

WE HEREBY STATE THAT THESE GOODS WERE PRODUCED IN COMPLIANCE WITH ALL REQUIREMENTS OF SEC. 6, 7 AND 12 OF THE FAIR LABOR STANDARDS ACT, AS AMENDED, AND OF THE REGULATIONS OF THE DEPARTMENT OF LABOR ISSUED UNDER SEC. 14 THEREOF.

Lisa Yuris <lisay@USCylGas.com>

[External] Invoice # 437186: COLLEGE OF DUPAGE (COLLE1)

Lisa Yuris <lisay@USCylGas.com>

Tue, Sep 3, 2024 at 12:39 PM UTC

CC:

BCC:

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1 attachment

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Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1545259

Vendor Name: United States Cylinder Gas,D/B/A US Gas

Invoice Number: 453609

Invoice Date: 8/31/2024

PO Number: B0002185

Check Number: E0103244

Check Amount: \$ 246.75

Check Date: 09/18/2024

Voucher Number: V0850212

Document Type: AP Invoice

Document Below

RENTAL INVOICE

Medical Gas • Industrial Gas • Specialty Gas • Cryogenics • Welding Supplies

USGas

United States Cylinder Gas

11618 South Mayfield
Alsip, Illinois 60803
Phone: (708) 389-1402
Fax: (708) 389-1409

PLEASE REMIT TO:
US GAS
11618 South Mayfield
Alsip, IL 60803

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COLLEGE OF DUPAGE
425 FAWELL BLVD
ATTN: COLLEEN GONZALEZ
GLEN ELLYN, IL 60137

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COLLEGE OF DUPAGE
425 FAWELL BLVD
HEALTH SCIENCE BUILDING/HSC 2110
GLEN ELLYN, IL 60137

INVOICE NO.	CUSTOMER I.D.	PURCHASE ORDER NO.	DATE	PAGE
453609	COLLE1 4		08/31/24	1

INVOICE	DATE	DESCRIPTION	BAL.	SHIP	RET'D	END	CREDITS	DUE	RATE	AMOUNT
08/01 THRU END		CYLINDER RENT		8	4	9				
----- R E C A P -----										
ENDING 08/31/24		"E" OXYGEN, COMPRESS	3	6	3	6				
		251 OXYGEN, COMPRESS	2	2	1	3				
----- C O M P U T A T I O N S -----										
COMPUTATIONS:		CYLINDER RENT	5	8	4	9	0	9	7.200	64.80



UNLESS OTHERWISE STATED, THE CYLINDERS ON
THIS DOCUMENT ARE PROPERTY OF THE VENDOR.

CYLINDER VALUE

1545.00

TERMS: NET 30 DAYS FROM INVOICE DATE
INVOICES NOT PAID IN ACCORDANCE WITH TERMS
ARE SUBJECT TO A SERVICE CHARGE OF 2% PER
MONTH, 24% PER YEAR.

SUB TOTAL
TAX EXEMPT

64.80

0.00

TOTAL DUE

64.80

"Gonzalez, Colleen" <prolac@cod.edu>

US Gas

"Gonzalez, Colleen" <prolac@cod.edu>

Thu, Sep 5, 2024 at 07:52 PM UTC

CC:

BCC:

1 attachment

US Gas INV#453609 \$64.80 - sent AP 9.5.24.pdf