

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1083823
Vendor Name: Commission on Accreditation for Respiratory Therapy
Invoice Number: 14761
Invoice Date: 12/26/2024
PO Number:
Check Number: 0333960
Check Amount: \$ 200.00
Check Date: 01/28/2025
Voucher Number: V0865754
Document Type: AP Invoice

Document Below

Commission on Accreditation for Respiratory Care
264 Precision Blvd.
Telford, TN 37690 US
817-283-2835
shane@coarc.com
www.coarc.com

Invoice



BILL TO
200388--College of DuPage
Billing Contact
College of DuPage
425 Fawell Blvd.
Glen Ellyn, IL 60137-6599

GL#:01-20-00429-5406002

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
14761	12/26/2024	\$200.00	01/25/2025	Net 30	

	DESCRIPTION	QTY	RATE	AMOUNT
Substantive Change	Key Personnel Change (PD)	1	200.00	200.00
BALANCE DUE				\$200.00



"Lang, Jessica" <langj@cod.edu>

CoARC INV#14761 \$200.00

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Thu, Jan 9, 2025 at 03:04 PM UTC

CC:

BCC:

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1 attachment

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