

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1438021
Vendor Name: Lakeshore Medical Resources, Inc
Invoice Number: 121924
Invoice Date: 12/19/2024
PO Number: P0014969
Check Number: E0105080
Check Amount: \$ 1,050.00
Check Date: 01/14/2025
Voucher Number: V0864947
Document Type: AP Invoice

Document Below

LAKESHORE MEDICAL RESOURCES, INC.

1231 Golf View Drive
Woodridge, IL 60517

Invoice

Date	Invoice #
12/19/2024	121924

Bill To
College of DuPage Accounts Payable 425 Fawell Blvd. Glen Ellyn, IL 60137

PO NUMBER	Terms	System ID#	FSR#
P0014969	Net 60		

Date	Quantity	Description	Hours	Rate	Amount
12/19/2024	1	Annual Preventive Maintenance Labor - Perform PM Philips Epiq ultrasound Serial: US221B11159 Labor - PM GE E9 ultrasound Serial: 201111US5 PM checklists left with Melissa	Misc. Misc.	525.00 525.00	525.00 525.00

Total	\$1,050.00
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Thank you for your business. For Billing Questions,
please call 630-910-0609 or Fax# 630-910-9590.
A \$25.00 fee will be charged for all returned checks.
A 2% fee will be added to all invoices over 30 days.

"edlakeshoremed@aol.com" <edlakeshoremed@aol.com>

[External] Invoice 121924

"edlakeshoremed@aol.com" <edlakeshoremed@aol.com>

Sun, Dec 22, 2024 at 04:42 AM UTC

CC: edlakeshoremed <edlakeshoremed@aol.com>

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.

Please process attached invoice for payment, thank you

1 attachment

College of DuPage Ultrasound PM Invoice 121924.pdf