

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087629
Vendor Name: POCKET NURSE
Invoice Number: 1421073-2
Invoice Date: 12/26/2024
PO Number: P0015091
Check Number: E0105102
Check Amount: \$ 2,644.46
Check Date: 01/14/2025
Voucher Number: V0864980
Document Type: AP Invoice

Document Below



Pocket Nurse®

Simulation & Education Supplies

610 Frankfort Rd. Monaca, PA 15061

Bill to: College Of Dupage
425 Fawell Blvd
Glen Ellyn, IL 60137

Phone: (630) 942-2228
Ship to: College of DuPage
425 Fawell Blvd
Shipping & Receiving
Glen Ellyn, IL 60137

Phone: (630) 942-2229
Attn: Samantha Wirth

Invoice

Invoice Number : 1421073-2

Customer# : 011855

Invoice Date : 12/26/2024

Due Date : 01/25/2025

Ordered By : E.Frick

Entered By : Michelle Melendez

Account Manager : Northeast Central

Terms : NET 30

Shipping Method : LTL Priority Freight

Ship Acct# :

Customer PO : P0015091

To: Pocket Nurse
P.O Box 644898
Pittsburgh, PA 15264-4898
Tax ID : 25-1763055
All checks must reference invoice number
to be processed in a timely manner.

Line	Order	Ship	B/O	U/M	Item #	Description	Price	Per	Extension
0001	30	30	0	EA	06-93-2002-AMBR	Vial Filled Unlabeled 2mL	1.30	EA	39.00
Package Information:						Tracking #	Weight		
						415326484705	1.00		

All orders are subject to a service charge based on minimum merchandise totals. All orders paid by credit card will be subject to a 3% fee. Please view complete terms and conditions at www.pocketnurse.com/default/terms_and_conditions/

SubTotal 39.00

Customer Service - cs@pocketnurse.com or 1.800.225.1600, option 1.
Billing - accounting@pocketnurse.com or 1.800.225.1600, option 3.



Total 39.00

"jsalvati@pocketnurse.com" <jsalvati@pocketnurse.com>

[External] Invoice 1421073 for 011855 College Of Dupage

"jsalvati@pocketnurse.com" <jsalvati@pocketnurse.com>

Thu, Dec 26, 2024 at 08:14 PM UTC

CC:

BCC:

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See the Following attached Files:01421073-002

FOR OUR CUSTOMERS WHO PAY VIA ACH OR WIRE TRANSFER: IF YOU RECEIVE ANY EMAILS TELLING YOU TO CHANGE OUR BANKING INFORMATION FOR PAYMENT, PLEASE BE AWARE OF FRAUD! POCKET NURSE HAS NO INTENTION OF CHANGING OUR BANKING INFORMATION OR REMIT TO ADDRESS FOR THOSE WHO PAY BY CHECK. PLEASE CALL OUR ACCOUNTING OFFICE IF YOU RECEIVE ANY REQUEST TO CHANGE OUR BANKING INFORMATION. THANK YOU FOR YOUR VIGILANCE!

Please contact accounting@pocketnurse.com for billing questions or copies of invoices. You may also call us at 1-800-225-1600, option 3.

For questions regarding your order, please contact our customer service department at cs@pocketnurse.com or 1-800-225-1600, option 1.

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1 attachment

e00029829-jsalvati.pdf

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087629
Vendor Name: POCKET NURSE
Invoice Number: 1421073-1
Invoice Date: 12/20/2024
PO Number: P0015091
Check Number: E0105102
Check Amount: \$ 2,644.46
Check Date: 01/14/2025
Voucher Number: V0864994
Document Type: AP Invoice

Document Below



Pocket Nurse®

Simulation & Education Supplies

610 Frankfort Rd. Monaca, PA 15061

Bill to: College Of Dupage
425 Fawell Blvd
Glen Ellyn, IL 60137

Phone: (630) 942-2228
Ship to: College of DuPage
425 Fawell Blvd
Shipping & Receiving
Glen Ellyn, IL 60137

Phone: (630) 942-2229
Attn: Samantha Wirth

Invoice

Invoice Number : 1421073-1

Customer# : 011855

Invoice Date : 12/20/2024

Due Date : 01/19/2025

Ordered By : E.Frick

Entered By : Michelle Melendez

Account Manager : Northeast Central

Terms : NET 30

Shipping Method : LTL Priority Freight

Ship Acct# :

Customer PO : P0015091

To: Pocket Nurse
P.O Box 644898
Pittsburgh, PA 15264-4898
Tax ID : 25-1763055
All checks must reference invoice number
to be processed in a timely manner.

Line	Order	Ship	B/O	U/M	Item #	Description	Price	Per	Extension
0001	230	230	0	EA	06-93-1020-1000ML	Demo Dose® .9PCT Sodim Chlorid IV Fluid	3.66	EA	841.80
0002	10	10	0	EA	06-93-1020-500ML	Demo Dose® .9PCT Sodim Chlorid IV Fluid	3.58	EA	35.80
0003	200	200	0	EA	06-93-1020-100ML	Demo Dose® .9PCT Sodim Chlorid IV Fluid	3.31	EA	662.00
0004	5	5	0	EA	06-93-1030-1000ML	Demo Dose® Lactatd Ringsr IV Fluid	3.66	EA	18.30
0005	30	30	0	EA	06-93-3113	Demo Dose® Vial 10mL	2.35	EA	70.50
0006	6	6	0	BX	05-51-3342	Gauze Sponge Surgical 2s 8Ply 4x4IN Sterile	3.31	BX	19.86
0007	4	4	0	BX	05-02-1300	Pocket Nurse® Swabstick Simulated w/Distilled Water	7.33	BX	29.32
0008	2	2	0	PK	05-51-1120-4IN	Gauze Roll Dermacea 3Ply 4YD Non Sterile	10.91	PK	21.82
0009	2	2	0	PK	06-59-0043	Sodium Chloride .9PCT Inj. 100mL Bag USP	59.40	PK	118.80
0010	3	3	0	EA	06-93-6020-1000ML	Demo Dose® Totl Parenterl Nutritin with MVT	17.46	EA	52.38
0011	3	3	0	EA	06-93-6025-1000ML	Demo Dose® Totl Parenterl Nutritin with Lipds	17.46	EA	52.38
Package Information:						Tracking #	Weight		
						111-333-555	0.00		

Continued on next page....

Customer Service - cs@pocketnurse.com or 1.800.225.1600, option 1.
Billing - accounting@pocketnurse.com or 1.800.225.1600, option 3.





Pocket Nurse®

Simulation & Education Supplies

610 Frankfort Rd. Monaca, PA 15061

Invoice

Invoice Number : **1421073-1**

Customer# : 011855

Invoice Date : 12/20/2024

Due Date : 01/19/2025

Line	Order	Ship	B/O	U/M	Item #	Description	Price	Per	Extension
All orders are subject to a service charge based on minimum merchandise totals. All orders paid by credit card will be subject to a 3% fee. Please view complete terms and conditions at www.pocketnurse.com/default/terms_and_conditions/									
SubTotal							1,922.96		
Shipping & Handling - Percent							682.50		
Total							2,605.46		

Customer Service - cs@pocketnurse.com or 1.800.225.1600, option 1.
Billing - accounting@pocketnurse.com or 1.800.225.1600, option 3.



"jsalvati@pocketnurse.com" <jsalvati@pocketnurse.com>

[External] Invoice 1421073 for 011855 College Of Dupage

"jsalvati@pocketnurse.com" <jsalvati@pocketnurse.com>

Fri, Dec 20, 2024 at 08:26 PM UTC

CC:

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