

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5617708
Invoice Date: 1/15/2025
PO Number: B0002319
Check Number: E0105365
Check Amount: \$ 603.56
Check Date: 01/28/2025
Voucher Number: V0865956
Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5617708	370454	\$47.28

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attention: Colleen Prola-Gonzalez
425 Fawell Blvd
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
<i>Faculty (on-going)</i>							
5	3385388.1	01/10/2025	05 TLD XBG Finger Ring	01/11/2025-02/10/2025	1	0.00	0.00
5	3385388.1	01/10/2025	05 TLD XBG Finger Ring	01/11/2025-02/10/2025	3	8.20	24.60
5	3385388.2	01/10/2025	82 TLD XBG Badge	01/11/2025-02/10/2025	1	0.00	0.00
5	3385388.2	01/10/2025	82 TLD XBG Badge	01/11/2025-02/10/2025	3	7.56	22.68

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Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5617708	370454	\$47.28

Please remit payment to:

Radiation Detection Co
3527 Snead Drive
Georgetown, TX 78626

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<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

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

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

Wed, Jan 22, 2025 at 08:01 PM UTC

CC:

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Rad Det \$47.28 SENT AP 1.22.25 Invoice 5617708.pdf

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5617707
Invoice Date: 1/15/2025
PO Number: B0002319
Check Number: E0105365
Check Amount: \$ 603.56
Check Date: 01/28/2025
Voucher Number: V0865958
Document Type: AP Invoice

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Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5617707	370454	\$7.56

Bill To

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425 Fawell Blvd
Glen Ellyn IL 60137

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425 Fawell Blvd
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
<i>Fetal Badges</i>							
4	3385127.1	01/10/2025	82 TLD XBG Badge	01/10/2025-02/09/2025	1	0.00	0.00
4	3385127.1	01/10/2025	82 TLD XBG Badge	01/10/2025-02/09/2025	1	7.56	7.56

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Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5617707	370454	\$7.56

Please remit payment to:

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Expiration Date	Amount

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

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

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Rad Det \$7.56 SENT AP 1.22.25 Invoice 5617707.pdf

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5617709
Invoice Date: 1/15/2025
PO Number: B0002319
Check Number: E0105365
Check Amount: \$ 603.56
Check Date: 01/28/2025
Voucher Number: V0865959
Document Type: AP Invoice

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Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5617709	370454	\$30.24

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

Judy Loughlin
735 Leicester Rd.
Elk Grove Village IL 60007

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
Computed Tomography 2023/2024							
18	3387479.1	01/15/2025	82 TLD XBG Badge	01/19/2025-02/18/2025	1	0.00	0.00
18	3387479.1	01/15/2025	82 TLD XBG Badge	01/19/2025-02/18/2025	4	7.56	30.24



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Name on Card	
Card Number	
Expiration Date	Amount

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

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Rad Det \$30.24 SENT AP 1.22.25 Invoice 5617709.pdf

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5615881
Invoice Date: 1/15/2025
PO Number: B0002319
Check Number: E0105365
Check Amount: \$ 603.56
Check Date: 01/28/2025
Voucher Number: V0865960
Document Type: AP Invoice

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Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5615881	370454	\$19.87

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Attention: Colleen Prola-Gonzalez
425 Fawell Blvd
Glen Ellyn IL 60137

Date	Description	Quantity	Price	Amount
01/10/2025	EasyReturn Label - Shipment 2883213 Group 5 Faculty (on-going)	1	19.87	19.87

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Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5615881	370454	\$19.87

Please remit payment to:

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Card Number	
Expiration Date	Amount

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

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Rad Det \$19.87 SENT AP 1.22.25 Invoice 5615881.pdf

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5617710
Invoice Date: 1/15/2025
PO Number: B0002416
Check Number: E0105365
Check Amount: \$ 603.56
Check Date: 01/28/2025
Voucher Number: V0865987
Document Type: AP Invoice

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BO# 002416

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3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5617710	370454	\$432.00

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Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
Summer 2023 Lab							
22	3387489.1	01/15/2025	82 TLD XBG Badge	01/22/2025-04/21/2025	1	0.00	0.00
22	3387489.1	01/15/2025	82 TLD XBG Badge	01/22/2025-04/21/2025	30	14.40	432.00

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5617710	370454	\$432.00

Please remit payment to:

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Georgetown, TX 78626

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Name on Card	
Card Number	
Expiration Date	Amount

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

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

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Rad Det \$432 SENT AP 1.22.25 Invoice 5617710.pdf

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5616917
Invoice Date: 1/15/2025
PO Number: B0002319
Check Number: E0105365
Check Amount: \$ 603.56
Check Date: 01/28/2025
Voucher Number: V0865988
Document Type: AP Invoice

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Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5616917	370454	\$19.87

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425 Fawell Blvd
Glen Ellyn IL 60137

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Judy Loughlin
735 Leicester Rd.
Elk Grove Village IL 60007

Date	Description	Quantity	Price	Amount
01/15/2025	EasyReturn Label - Shipment 2885438 Group 18	1	19.87	19.87

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5616917	370454	\$19.87

Please remit payment to:

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Card Number



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<i>Expiration Date</i>	<i>Amount</i>

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

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Rad Det \$19.87 SENT AP 1.22.25 Invoice 5616917.pdf

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5615880
Invoice Date: 1/15/2025
PO Number: B0002319
Check Number: E0105365
Check Amount: \$ 603.56
Check Date: 01/28/2025
Voucher Number: V0865990
Document Type: AP Invoice

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Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5615880	370454	\$19.87

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Date	Description	Quantity	Price	Amount
01/10/2025	EasyReturn Label - Shipment 2883200 Group 4 Fetal Badges	1	19.87	19.87

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5615880	370454	\$19.87

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Name on Card	
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Expiration Date	Amount

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

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

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Rad Det \$19.87 SENT AP 1.22.25 Invoice 5615880.pdf

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1470233
Vendor Name: Radiation Detection Company
Invoice Number: 5616900
Invoice Date: 1/15/2025
PO Number: B0002416
Check Number: E0105365
Check Amount: \$ 603.56
Check Date: 01/28/2025
Voucher Number: V0865991
Document Type: AP Invoice

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RADIATION DETECTION CO

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Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5616900	370454	\$26.87

Bill To

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425 Fawell Blvd
Glen Ellyn IL 60137

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Glen Ellyn IL 60137

Date	Description	Quantity	Price	Amount
01/15/2025	EasyReturn Label - Shipment 2885079 Group 22 Summer 2023 Lab	1	26.87	26.87

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	01/15/2025	5616900	370454	\$26.87

Please remit payment to:

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3527 Snead Drive
Georgetown, TX 78626

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Name on Card	
Card Number	
Expiration Date	Amount

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

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Rad Det \$26.87 SENT AP 1.22.25 Invoice 5616900.pdf