

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1545259

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

Check Details:

Check Number: E0106423

Check Amount: \$ 79.50

Check Date: 3/18/2025

Invoice Details:

Invoice Number: 467793

Invoice Date: 2/28/2025

PO Number: B0002185

Voucher Number: V0876024

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
467793	COLLE1 4	807# 002185	02/28/25	1

INVOICE	DATE	DESCRIPTION	BAL.	SHIP	RET'D	END	CREDITS	DUE	RATE	AMOUNT
02/01 THRU END		CYLINDER RENT		0	0	10				
----- R E C A P -----										
ENDING 02/28/25		"E" OXYGEN, COMPRESS	7	0	0	7				
		251 OXYGEN, COMPRESS	3	0	0	3				
----- C O M P U T A T I O N S -----										
COMPUTATIONS:		CYLINDER RENT	10	0	0	10	0	10	7.950	79.50

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

CYLINDER VALUE

1665.00

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

79.50

TAX EXEMPT

0.00

TOTAL DUE

79.50

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

US Gas INV#467793 \$79.50

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

Thu, Mar 6, 2025 at 08:12 PM UTC

CC:

BCC:

Jessica Lang

Program Support and Admissions Specialist, Health Sciences

College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137

630.942.2447 Direct | 630.942.8331 Office | 630.942.4222 Fax

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1 attachment

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