

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1424736 **Vendor Name:** Commission on Accreditation for Health Info and Info Mngment

Check Details:

Check Number: E0110710 **Check Amount:** \$ 3,800.00 **Check Date:** 11/25/2025

Invoice Details:

Invoice Number: ANL5072 **Invoice Date:** 11/4/2025 **PO Number:** P0020278 **Voucher Number:** V0914171

Document Type: AP Invoice

Document Below



Commission on Accreditation for Health Informatics and Information Management Education
200 East Randolph St. Suite 5100
Chicago, IL 60601

Invoice

| | |
|----------------|-----------|
| Invoice Number | ANL5072 |
| Date | 11/4/2025 |
| Terms | Net 30 |

| |
|--|
| Bill To |
| Andrea Brus, MEd, RHIA, CCS College of DuPage 425 Fawell Blvd. Glen Ellyn, IL 60137 |

PO#P0020278

PLEASE REMIT PAYMENT TO:

**CAHIIM
734141 Network Place
Chicago, IL. 60673-1734**

Phone: 312-235-3255

| |
|-----------------|
| Program |
| Associate - 506 |

| Description | Amount |
|---|-------------------|
| 2026 Annual Accreditation Maintenance Fee For the period from January 1, 2026 to December 31, 2026 | 3,800.00 |
| Total | \$3,800.00 |

***Credit card payments can be made on the CAHIIM website:
<https://www.cahiim.org/resources/cahiim-fee-payment/>***

Payment by check should be sent to the remittance address on the invoice. Send purchase orders to accounting@cahiim.org. Contact accounting@cahiim.org for all other inquiries.

Invoices outstanding for more than 60 days will be assessed an administrative fee of \$500.

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

CAHIIM INV#ANL5072 \$3,800.00

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

Wed, Nov 5, 2025 at 02:09 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

langj@cod.edu

1 attachment

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