

**Information:**

**Drawer:** Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

**Check Details:**

**Check Number:** E0110968 **Check Amount:** \$ 1,783.67 **Check Date:** 12/9/2025

**Invoice Details:**

**Invoice Number:** 5798785 **Invoice Date:** 11/30/2025 **PO Number:** B0003186 **Voucher Number:** V0915910

**Document Type:** AP Invoice

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**Document Below**



BO# 003186

## 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	11/30/2025	5798785	B0003186	\$648.00

## Bill To

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

## Ship To

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

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
Lab 2025-2027							
24	3649813.1	11/19/2025	82 TLD XBG Badge	12/11/2025-03/10/2026	1	0.00	0.00
24	3649813.1	11/19/2025	82 TLD XBG Badge	12/11/2025-03/10/2026	45	14.40	648.00

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	11/30/2025	5798785	B0003186	\$648.00

Please remit payment to:

Radiation Detection Co  
3527 Snead Drive  
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

A 2.75% credit card processing fee will be applied to all payments made by credit card.

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

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**Radiation Detection**

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

Mon, Dec 1, 2025 at 02:36 PM UTC

CC:

BCC:

Thank you!

Colleen Prola-Gonzalez

**Program Support and Admissions Specialist, Health Sciences**

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

[prolac@cod.edu](mailto:prolac@cod.edu) 630-942-2994 (ph) 630-942-4222 (fax)

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**1 attachment**

Rad Detection \$648.00 SENT AP 12.1.25 Invoice 5798785.pdf

**Information:**

**Drawer:** Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

**Check Details:**

**Check Number:** E0110968 **Check Amount:** \$ 1,783.67 **Check Date:** 12/9/2025

**Invoice Details:**

**Invoice Number:** 5798784 **Invoice Date:** 11/30/2025 **PO Number:** B0003186 **Voucher Number:** V0915911

**Document Type:** AP Invoice

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**Document Below**



BO# 003186

## 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	11/30/2025	5798784	B0003186	\$648.00

## Bill To

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

## Ship To

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

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
Clinical 2025-2027							
23	3649812.1	11/19/2025	82 TLD XBG Badge	12/11/2025-03/10/2026	1	0.00	0.00
23	3649812.1	11/19/2025	82 TLD XBG Badge	12/11/2025-03/10/2026	45	14.40	648.00

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	11/30/2025	5798784	B0003186	\$648.00

Please remit payment to:

Radiation Detection Co  
3527 Snead Drive  
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

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**1 attachment**

Rad Detection \$648.00 SENT AP 12.1.25 Invoice 5798784.pdf

**Information:**

**Drawer:** Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

**Check Details:**

**Check Number:** E0110968 **Check Amount:** \$ 1,783.67 **Check Date:** 12/9/2025

**Invoice Details:**

**Invoice Number:** 5795868 **Invoice Date:** 11/30/2025 **PO Number:** B0003186 **Voucher Number:** V0915912

**Document Type:** AP Invoice

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**Document Below**



BO# 003186

## RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | [www.radetco.com](http://www.radetco.com)

Account	Date	Invoice	Purchase Order	Amount
104874	11/30/2025	5795868	B0003186	\$26.87

*Bill To*

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

*Ship To*

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

Date	Description	Quantity	Price	Amount
11/19/2025	EasyReturn Label - Shipment 3114647 Group 19 Summer 2024-2026	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	11/30/2025	5795868	B0003186	\$26.87

Please remit payment to:

Radiation Detection Co  
3527 Snead Drive  
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

A 2.75% credit card processing fee will be applied to all payments made by credit card.

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

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**Radiation Detection**

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

Mon, Dec 1, 2025 at 02:35 PM UTC

CC:

BCC:

Thank you!

Colleen Prola-Gonzalez

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

[prolac@cod.edu](mailto:prolac@cod.edu) 630-942-2994 (ph) 630-942-4222 (fax)

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**1 attachment**

Rad Detection \$26.87 SENT AP 12.1.25 Invoice 5795868.pdf

**Information:**

**Drawer:** Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

**Check Details:**

**Check Number:** E0110968 **Check Amount:** \$ 1,783.67 **Check Date:** 12/9/2025

**Invoice Details:**

**Invoice Number:** 5798783 **Invoice Date:** 11/30/2025 **PO Number:** B0003186 **Voucher Number:** V0915913

**Document Type:** AP Invoice

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**Document Below**



BO#003186

## 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	11/30/2025	5798783	B0003186	\$460.80

## Bill To

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

## Ship To

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

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
Summer 2024-2026							
19	3649690.1	11/19/2025	82 TLD XBG Badge	12/10/2025-03/09/2026	1	0.00	0.00
19	3649690.1	11/19/2025	82 TLD XBG Badge	12/10/2025-03/09/2026	32	14.40	460.80

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	11/30/2025	5798783	B0003186	\$460.80

Please remit payment to:

Radiation Detection Co  
3527 Snead Drive  
Georgetown, TX 78626

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<https://myradcare.radetco.com>

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Name on Card	
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Expiration Date	Amount

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Rad Detection \$460.80 SENT AP 12.1.25 Invoice 5798783.pdf