

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1085910

Vendor Name: Henry Schein

Invoice Number: 47974462

Invoice Date: 11/30/17

PO Number: P0355235

Check Number: 0229998

Check Amount: \$ 2,779.22

Check Date: 01/17/2018

Department ID: 00153

Reviewer Name:

Voucher Number: V0489725

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below



Corporate Office

135 Duryea Road, Melville, NY 11747

1.800.472.4348

www.henryschein.com

Questions: 1-800-472-4346

# INVOICE

SHIP TO/SOLD TO:

Coll Of DuPage-Dental Hygiene DSH

425 Fawell Blvd Rm 1122

Dr Edward Chavez

Glen Ellyn, IL 60137-6599

010000231029747974462110000000000870431130174

College Of DuPage  
425 Fawell Blvd  
Attn: Purchasing Cindy Fisk  
Glen Ellyn, IL 60137-6599

BILL TO:

College Of DuPage DSH

425 Fawell Blvd

Attn: Purchasing Cindy Fisk

Glen Ellyn, IL 60137-6599

BILL TO	SHIP TO	INVOICE AMOUNT
2310297	837747	870.43
INVOICE#		INVOICE DATE
47974462		11/30/17
CUSTOMER PO#		
355234		

**AP VERIFIED**  
**12/19/17 - BETHANY CRUSE**

ORDER#	ORDER DATE	DUE DATE
58396929	11/29/17	12/30/17

D&B#:01-243-0880

WHSE DEA# RH0162494

Fed ID: 11-3136595

LINE NO	ITEM CODE	UNIT SIZE	DESCRIPTION & STRENGTH	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM STATUS	UNIT PRICE	EXTENSION	BOX NO	REM
			This order has been processed by our MIDWEST D.C. 5315 WEST 74TH STREET INDIANAPOLIS, IN 46268							
			THANK YOU FOR YOUR ORDER, KEVIN WI X3935 SPOKE WITH CYNTHIA FISK VIA EMAIL'D PO ORDER SAVINGS ON THIS ORDER: \$293.40!							
1	467-3005	RX 50/BX	MEPIVACAINE HCL 3% PLAIN	3	3 * P		31.49	94.47		
			** SPECIAL CONTRACT PRICE ** MN - SEE MESSAGE BELOW FOR DSCSA COMPLIANCE DETAILS NDC:0404-6730-05/00404-6730-05							
2	465-1205	RX 50/BX	LIDOCAINE CARTRIDGE 2% 1:100	4	4 * P		25.99	103.96		
			GO TO YOUR ONLINE ACCOUNT TO RETRIEVE THIS MSDS/SDS, 1055844 - IF YOU CAN'T ACCESS ONLINE OPTIONS, CALL 1-800-472-4346. ** SPECIAL CONTRACT PRICE ** MN - SEE MESSAGE BELOW FOR DSCSA COMPLIANCE DETAILS NDC:0404-6512-05/00404-6512-05							
3	107-4923	EA	KROMOPAN100 ALGINATE 1LB CAN	1	1 *		22.49	22.49	9	
			* SPECIAL SCHEIN PRICE REDUCTION *							
4	101-3716	150/BX	CHAIR SLEEVE NO-SLIP 48X56	8	8 C		35.79	286.32	2	
			** SPECIAL CONTRACT PRICE ** CASE GOOD ITEM, MAY BE SHIPPED SEPARATELY.							
5	101-7651	100/CA	DRAPE SHEET 1P POLY WHITE WHITE	5	5 C		33.11	165.55	7	
			* SPECIAL SCHEIN PRICE REDUCTION *							

BILL TO	SHIP TO	INVOICE#	INVOICE AMOUNT
2310297	837747	47974462	870.43
ORDER#	ORDER DATE	INVOICE DATE	# OF BOXES

#### ITEM STATUS KEY

B - Backordered; Item will follow  
D - Discontinued; Item no longer available  
F - Special offer  
M - Manufacturer will ship item directly to you  
P - Prescription Drug; Return Authorization Required

#### REM KEY

SK - School Kit  
NC - No Charge



Corporate Office  
135 Duryea Road, Melville, NY 11747  
1.800.472.4346  
www.henryschein.com  
Questions: 1-800-472-4346

# INVOICE

SHIP TO/SOLD TO:  
Coll Of DuPage-Dental Hygiene DSH  
425 Fawell Blvd Rm 1122  
Dr Edward Chavez  
Glen Ellyn, IL 60137-6599

0100002310297479744621100000000000870431130174

BILL TO:  
College Of DuPage DSH  
425 Fawell Blvd  
Attn: Purchasing Cindy Fisk  
Glen Ellyn, IL 60137-6599

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2310297	837747	870.43
INVOICE#	INVOICE DATE	
47974462	11/30/17	
CUSTOMER PO#		
355235		

Please detach here and mail the above with your payment

ORDER#	ORDER DATE	DUE DATE
58396928	11/29/17	12/30/17

D&B#:01-243-0880  
WHSE DEA# RH0162494 Fed ID: 11-3136595

LINE NO	ITEM CODE	UNIT SIZE	DESCRIPTION & STRENGTH	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM STATUS	UNIT PRICE	EXTENSION	BOX NO	REM
6	565-0042	300/BX	ULTRAFORM PF NITRILE GLOV SML/MED ** SPECIAL CONTRACT PRICE ** CASE GOOD ITEM, MAY BE SHIPPED SEPARATELY.	10	10	C	19.49	194.90	8	
=====										
PLEASE REFER TO BACK OF PAPERWORK FOR DISCLOSURES/TERMS OF SALE										
MN - THE DRUG SUPPLY CHAIN SECURITY ACT (DSCSA) INFORMATION RELATED TO										
PRESCRIPTION DRUG PRODUCTS IS AVAILABLE ON OUR WEBSITE										
WWW.HENRYSCHIN.COM/PEDIGREE. IF YOU HAVE ANY PROBLEMS ACCESSING OUR WEBSITE OR										
WOULD LIKE TO RECEIVE A COPY OF DSCSA DOCUMENTATION VIA FAX, MAIL, OR EMAIL,										
PLEASE CONTACT OUR CUSTOMER SERVICE DEPARTMENT AT 1-800-472-4346.										
=====										
MERCHANDISE TOTAL								867.69		
FREIGHT CHARGES								2.74		
Invoice Date + 30 days								870.43		
=====										
Please remit payments only to the following address:										
Henry Schein, Inc.										
Dept CH 10241										
Palatine, IL 60055-0241										
M. Ahmad Chaudhry 12/11/17										
H. Ahmad Chaudhry										
GL#: 01-10-00153-5401002										

BILL TO	SHIP TO	INVOICE#	INVOICE AMOUNT
2310297	837747	47974462	870.43
ORDER#	ORDER DATE	INVOICE DATE	# OF BOXES
58396928	11/29/17	11/30/17	9
CUSTOMER PO#			PAGE#
355235			2

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R - Refrigerated Item; May be shipped separately  
S - Special Schein Pricing  
T - Taxable Item  
U - Temporarily unavailable; please reorder  
\* - Item has SDS

#### REM KEY

SK - School Kit  
NC - No Charge

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1085910

Vendor Name: Henry Schein

Invoice Number: 48029601

Invoice Date: 12/07/17

PO Number: P0354897

Check Number: 0229998

Check Amount: \$ 2,779.22

Check Date: 01/17/2018

Department ID: 12031

Reviewer Name:

Voucher Number: V0490161

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

135 Duryea Road, Melville, NY 11747  
1.800.472.4346  
www.henryschein.com  
Questions: 1-800-472-4346

REC'D  
**INVOICE**

SHIP TO/SOLD TO:  
College Of Dupage MI  
425 Fawell Blvd  
Glen Ellyn, IL 60137-6599

01000033512344802960110000000000400681207176

121017

College Of Dupage  
425 Fawell Blvd  
Glen Ellyn, IL 60137-6599

C.O.D.

BILL TO:  
College Of Dupage MI  
425 Fawell Blvd  
Glen Ellyn, IL 60137-6599

**3 WAY MATCH**

BILL TO	SHIP TO	INVOICE AMOUNT
3351234	3351237	400.68
INVOICE#		INVOICE DATE
48029601		12/07/17
CUSTOMER PO#		
354897		

Please detach here and mail the above with your payment

ORDER#	ORDER DATE	DUE DATE
57756207	11/08/17	01/06/18

D&B#:01-243-0880  
WHSE DEA# RH0162494 Fed ID: 11-3136595

LINE NO	ITEM CODE	UNIT SIZE	DESCRIPTION & STRENGTH	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM STATUS	UNIT PRICE	EXTENSION	BOX NO	REM
This is a backordered shipment for order:57756207 original invoice:47799613										
1	771-0008	EA	WALKER BRACE AIR TRAVELER SM FT	1	1		44.52	44.52		
2	108-8321	EA	WALKER BRACE AIR TRAVELER XL FT	3	3		44.52	133.56		
3	771-0005	EA	WALKER BRACE AIR TRAVELER LG FT	3	3		44.52	133.56		
4	771-0004	EA	WALKER BRACE AIR TRAVELER MED FT	2	2		44.52	89.04		
=====										
PLEASE REFER TO BACK OF PAPERWORK FOR DISCLOSURES/TERMS OF SALE										
M/F: PO# 354897										
=====										
MERCHANDISE TOTAL								400.68		
Invoice Date + 30 days								400.68		
Please remit payments only to the following address:										
Henry Schein, Inc.										
Dept CH 10241										
Palatine, IL 60055-0241										

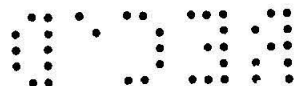
BILL TO	SHIP TO	INVOICE#	INVOICE AMOUNT
3351234	3351237	48029601	400.68
ORDER#	ORDER DATE	INVOICE DATE	# OF BOXES
57756207	11/08/17	12/07/17	
CUSTOMER PO#			PAGE#
354897			1 OF 1

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# Medical Terms & Conditions



## THE HENRY SCHEIN PRICE POLICY:

We endeavor to maintain prices for the duration of a catalog, but we reserve the right to make price adjustments in response to manufacturers' price increases or extraordinary circumstances. Prices are subject to change without notice.

Henry Schein, Inc. ("Henry Schein") and customer agree that the terms and conditions hereinafter set forth shall govern the relationship between Henry Schein and the customer to the extent that the parties do not have a written agreement in effect that conflicts with such terms and conditions. Customer acknowledges and accepts all such terms and conditions by placing an order for goods with Henry Schein, and upon Henry Schein's delivery of the order to the customer.

## DISCOUNTS, REBATES AND DISCLOSURES:

Invoice or statement prices may reflect or be subject to a bundled discount or rebate pursuant to a purchase offer, promotion, or discount program. You must fully and accurately report to Medicare, Medicaid, Tricare and/or any other federal or State program, upon request by such program, the discounted price(s) or net price(s) for each invoiced item, after giving effect to any applicable discounts or rebates, which price(s) may differ from the extended prices set forth on your invoice. Accordingly, you should retain this invoice and all relevant information for your records. It is your responsibility to review any agreements or other documents, including offers or promotions, applicable to the invoiced products/prices to determine if your purchase(s) are subject to a bundled discount or rebate. Any such discounts must be calculated pursuant to the terms of the applicable purchase offer, promotion, or discount program. Participation in a promotional discount program is only permissible in accordance with discount program rules. By participation in such program, you agree that, to your knowledge, your practice complies with the discount program requirements.

## DELIVERY TERMS:

Unless otherwise agreed, freight terms are FOB Shipper's Dock ("Ex Works" outside North America). Title passes at the time the shipment is loaded at the shipper's dock.

### Continental U.S.:

All orders will be subject to a handling charge. This charge includes freight, except for additional carrier charges related to special delivery services and hazardous material shipments. Special orders are subject to additional freight charges.

### Alaska, Hawaii & Pacific Protectorates:

Standard shipping methods provide direct, reduced cost, expedited air delivery service to all accounts in Alaska and Hawaii. Customers in the Pacific Protectorates are offered direct surface transport, or postal services for reliable delivery. No additional surcharges apply, except when special services are requested. Low-level hazardous items (dangerous goods in accepted quantities and Consumer Commodity ID 8000) are now available via UPS 2nd-day air.

### Guam, Puerto Rico, U.S. Trust Territories & Virgin Islands:

- All orders will be subject to a handling charge. This charge includes freight through the United States Postal Service (USPS).
- Special delivery orders and hazardous material shipments can be shipped via United Parcel Services (UPS) for an additional charge. No minimum order amount or weight applies. Speak to your International Representative for details.

### Outside U.S. (50 states):

If your order is being shipped outside the U.S. (50 states), please refer to the International Terms & Conditions at [henryschein.com](http://henryschein.com). Unless otherwise agreed, freight terms are FOB Shipper's Dock ("Ex Works" outside North America). Title passes at the time the shipment is loaded at the shipper's dock. Customer is responsible for compliance with any applicable import requirements.

## RX PRODUCTS & CONTROLLED SUBSTANCES:

Regulations require us to limit the sale of Rx and controlled substances only to registered, licensed healthcare professionals. If you are a new customer or have recently moved, please furnish us with a copy of your updated state DEA registration. For controlled substances, furnish a copy of your DEA registration verifying your shipping address. Please note that all orders for controlled substances are subject to a due diligence review process. Schedule II controlled substances can be ordered electronically or by mail. For information on our Controlled Substance Ordering System please visit [www.henryschein.com/e222](http://www.henryschein.com/e222); if you prefer to continue using Federal 222 Forms to order Schedule II controlled substances, please mail the form to: Henry Schein, Inc. • Suite 300, 5315 West 74th Street • Indianapolis, IN 46268

## REGULATORY REQUIREMENT:

Local regulatory requirements may apply to use or installation of certain products. Be sure to understand and comply with any such requirements prior to purchase, use, or installation of products.

## RETURNS:

WE CANNOT ACCEPT ANY RETURNS WITHOUT PRIOR AUTHORIZATION.

To arrange for a return, simply call our Customer Service department or contact your Sales Consultant. The following conditions must be complied with:

- All returns must be accompanied by a copy of your invoice and a reason for the return.
- Merchandise must be returned in its original unopened container, unmarked, and properly packaged.
- Returned products must have been purchased within the previous thirty (30) days. Any returns past thirty (30) days are subject to a restocking fee.
- Shortages or errors in shipments must be reported within seven (7) days of invoice date to issue credit (if applicable).
- Shipping charges will apply on all returns.

### Exceptions:

The following special, customized, or government-regulated items are not returnable:

- Immune globulin products • Special order items (products that we do not ordinarily stock) • Personalized and imprinted items • Opened computer hardware and software • Controlled substances • Hazardous materials • Expired products • Items that cannot be returned to the manufacturer • Any item marked nonreturnable

### Equipment:

Opened and used equipment may not be returned for credit. Before opening equipment, we suggest that you check the shipping container and packing list to ensure that you are getting exactly what you ordered. Equipment must be returned in the original unopened packaging, unmarked and properly packaged. Special order equipment is not returnable. All equipment returns are subject to a restocking fee. Equipment is backed by the manufacturer's repair or replacement warranty. Please read and return all warranty information required immediately upon taking delivery of your new equipment. Open or defective equipment is subject to the manufacturer's warranty.

### Prescription Drug Returns:

Please note that, in order to comply with Federal and State Pedigree requirements, Henry Schein's policy on the return of Rx Drugs is as follows:

Rx Drugs which Henry Schein has purchased from wholesalers are not returnable. These items will be identified in your invoice with the code WH. Rx Drugs which are purchased by Henry Schein directly from the manufacturer may be returned providing that the following key elements are met:

- 1) Only returns due to error in order or delivery will be allowed.
- 2) Returns of Rx Drugs will only be accepted if HSI is notified within 14 calendar days of receipt of the shipment and valid return authorization is issued by HSI.
- 3) The Prescription Drug Marketing Act requires any customer returning Rx Drugs to complete and return a Prescription Drug Return Authorization form. Federal law requires that the healthcare entity returning Rx Drugs document that the product was kept under proper storage and handling conditions while in their possession and during the return of the product. To get a copy of the form and proper return authorization, please contact Customer Service.
- 4) In addition, Pedigree regulations require that the healthcare entity returning Rx Drugs certifies that the product being returned is the same exact product purchased from HSI.
- 5) Henry Schein will not issue credit for any returned Rx Drugs which have been tampered with, are out of date or where the labeling has been altered in any way.

## CHOOSE YOUR PAYMENT METHOD

**2% Cash Back or Maximum Rewards on all purchases with the Henry Schein Credit Card.** To apply now, call: 1.866.398.9296 or online [www.henryschein.com/creditcard](http://www.henryschein.com/creditcard) Reduce the cost and administration of paying Henry Schein—Pay electronically (ACH Debit) or set up AutoPay. Please call Customer Service for details.

For your convenience, we provide several payment alternatives. Orders billed to your account may be paid by ACH Debit, Check by Phone, or Check. If you prefer, you may use your Henry Schein Credit Card, American Express, Visa, MasterCard or Discover Card when placing your order. All sales are subject to our normal terms and conditions. All sales are subject to credit approval. Invoices are payable within agreed terms of sale.

### Open Accounts Receivable:

All unpaid accounts receivable past due are subject to a 1.5% finance charge.

To arrange for a product return, simply call Customer Service as noted below:

### Henry Schein Medical

Customer Service: 1.800.472.4346 8am-9pm, et.  
Place an Order: 1.800.772.4346 8am-9pm, et.  
Fax an Order: 1.800.329.9109 24 Hours.  
Internet: [www.henryschein.com/medical](http://www.henryschein.com/medical)  
E-Mail: [custserv@henryschein.com](mailto:custserv@henryschein.com)

### 340B Program

Customer Service: 1.877.344.3402 8:30am-5:30pm, et.  
Place an Order: 1.877.344.3402 8:30am-5:30pm, et.  
Fax an Order: 1.888.885.2253 24 Hours.  
E-Commerce Support: 1.800.711.6032 8am-8pm, et.  
Internet: [www.henryschein.com/340B](http://www.henryschein.com/340B)  
E-Mail: [customer.support@henryschein.com](mailto:customer.support@henryschein.com)

### Henry Schein Medical/EMS

Customer Service: 1.800.845.3550 8:30am-5:30pm, et.  
Place an Order: 1.800.845.3550 8:30am-5:30pm, et.  
Fax an Order: 1.800.533.4793 24 Hours.  
Internet: [www.henryschein.com/ems](http://www.henryschein.com/ems)  
E-Mail: [scott.bruner@henryschein.com](mailto:scott.bruner@henryschein.com)

Please see: <http://www.Henryschein.com/US-EN/Medical/LegalTerms.ASPX> for Conditions & Exceptions.

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Invoice Number: 48393700

Invoice Date: 12/13/17

PO Number: P0355410

Check Number: 0229998

Check Amount: \$ 2,779.22

Check Date: 01/17/2018

Department ID: 00153

Reviewer Name:

Voucher Number: V0490326

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# INVOICE

SHIP TO/SOLD TO:  
Coll Of DuPage-Dental Hygiene DSH  
425 Fawell Blvd Rm 1122  
Glen Ellyn, IL 60137-6599

010000231029748393700110000000000148721213172

BILL TO:  
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425 Fawell Blvd  
Attn: Purchasing Cindy Fisk  
Glen Ellyn, IL 60137-6599

College Of DuPage  
425 Fawell Blvd  
Attn: Purchasing Cindy Fisk  
Glen Ellyn, IL 60137-6599

BILL TO	SHIP TO	INVOICE AMOUNT
2310297	837747	148.72

INVOICE#	INVOICE DATE
48393700	12/13/17

CUSTOMER PO#
355-410

ORDER#	ORDER DATE	DUE DATE
58804285	12/12/17	01/12/18

**AP VERIFIED**

**12/22/17 - BETHANY CRUSE**

D&B# 01-243-0880  
WHSE DEA# RH0162494 Fed ID: 11-3136595

LINE NO	ITEM CODE	UNIT SIZE	DESCRIPTION & STRENGTH	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM STATUS	UNIT PRICE	EXTENSION	BOX NO	REM
			This order has been processed by our MIDWEST P.C. 5315 WEST 74TH STREET INDIANAPOLIS, IN 46268							
			COLGATE EMLVENDOR							
1	543-0157	24/CA	COLGATE ENAMEL HEALTH TP 0.850Z ** SPECIAL CONTRACT PRICE **	10	10 *		7.68	76.80	1	
2	543-0025	RX 3.40Z/BT	PREVIDENT ENAMEL PROTECT MINT ** SPECIAL CONTRACT PRICE ** MN - SEE MESSAGE BELOW FOR DSCSA COMPLIANCE DETAILS NDC:0126-0022-92/00126-0022-92	12	12 *		3.50	42.00	1	
3	543-6467	50/BX	PEROXYL PACKETS ALC FREE 10ML GO TO YOUR ONLINE ACCOUNT TO RETRIEVE THIS MSDS/SDS, 105K442 - IF YOU CAN'T ACCESS ONLINE OPTIONS, CALL 1-800-472-4346. ** SPECIAL CONTRACT PRICE **	2	2 *		13.59	27.18	1	
			PLEASE REFER TO BACK OF PAPERWORK FOR DISCLOSURES/TERMS OF SALE MN - THE DRUG SUPPLY CHAIN SECURITY ACT (DSCSA) INFORMATION RELATED TO PRESCRIPTION DRUG PRODUCTS IS AVAILABLE ON OUR WEBSITE WWW.HENRYSCHEIN.COM/PEDIGREE. IF YOU HAVE ANY PROBLEMS ACCESSING OUR WEBSITE OR WOULD LIKE TO RECEIVE A COPY OF DSCSA DOCUMENTATION VIA FAX, MAIL, OR EMAIL, PLEASE CONTACT OUR CUSTOMER SERVICE DEPARTMENT AT 1-800-472-4346.							
			MERCHANDISE TOTAL					145.98		

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2310297	837747	48393700	148.72
ORDER#	ORDER DATE	INVOICE DATE	# OF BOXES
58804285	12/12/17	12/13/17	1
CUSTOMER PO#			PAGE#
355-410			1

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NC - No Charge

Continued on Next Page .....



# HENRY SCHEIN® Corporate Office

135 Duryea Road, Melville, NY 11747  
1.800.472.4346  
www.henryschein.com  
Questions: 1-800-472-4346

## 12.20.17 INVOICE

SHIP TO/SOLD TO:  
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425 Fawell Blvd Rm 1122  
Dr Edward Chavez  
Glen Ellyn, IL 60137-6599

BILL TO:  
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425 Fawell Blvd  
Attn: Purchasing Cindy Fisk  
Glen Ellyn, IL 60137-6599

0100002310297483774710000000000148721213172


College Of DuPage  
425 Fawell Blvd  
Attn: Purchasing Cindy Fisk  
Glen Ellyn, IL 60137-6599

BILL TO	SHIP TO	INVOICE AMOUNT
2310297	837747	148.72
INVOICE#		INVOICE DATE
48393700		12/13/17
CUSTOMER PO#		
355-410		

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D&B#:01-243-0880  
WHSE DEA# RH0162494 Fed ID: 11-3136595

LINE NO	ITEM CODE	UNIT SIZE	DESCRIPTION & STRENGTH	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM STATUS	UNIT PRICE	EXTENSION	BOX NO	REM
						FREIGHT CHARGES		2.74		
						Invoice Date + 30 days		148.72		
			Please remit payments only to the following address: Henry Schein, Inc. Dept CH 10241 Palatine, IL 60055-0241							
			 M. Ahmad Chaudhry GL# 01-10-00153-5401002							

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Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1085910

Vendor Name: Henry Schein

Invoice Number: 48254707

Invoice Date: 12/07/17

PO Number: P0355362

Check Number: 0229998

Check Amount: \$ 2,779.22

Check Date: 01/17/2018

Department ID: 00157

Reviewer Name:

Voucher Number: V0490358

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

**HENRY SCHEIN®**  
Corporate Office  
135 Duryea Road  
Melville, NY 11747

Customer Service  
1-800-472-4346

**Invoice**

Invoice #	:	48254707
Invoice Date	:	12/07/17
Amount	:	623.20
Terms	:	Invoice Date + 30 days
Due Date	:	01/06/18

Address Service Requested

Bill To:

12-19-17

Page 1 of 2

3976009755 PRESORT 9755 1 MB 0.420 P1C50 <B>



COLLEGE OF DUPAGE MD  
425 FAWELL BLVD  
GLEN ELLYN IL 60137-6599

Ship To / Sold To:  
College Of Dupage MI  
425 Fawell Blvd  
Glen Ellyn IL 601376599

**3 WAY MATCH**

Cust #	: 03136679	Ship Date	: 12/07/17	Sls Ord #	: 58672484
Cust P O #	: 355362	Ship Via	: UPS Chicago Special Sort	Sls Ord Dt	: 12/07/17
				Sls Rep	: C405

Item #	Ship	BO	UOM	Description	Unit Price	Amount	Tax Status
2881352	15	0	50/Ca	Drape Sheet/ Bed 3-Ply White 40x72	29.6100	444.15	
9880214	20	0	150/Bx	Esteem Strch Glove Nitrile III Small	8.9100	178.20	
	** special contract price **						

Deliver To: Melissa McKirdie, HSC 1220

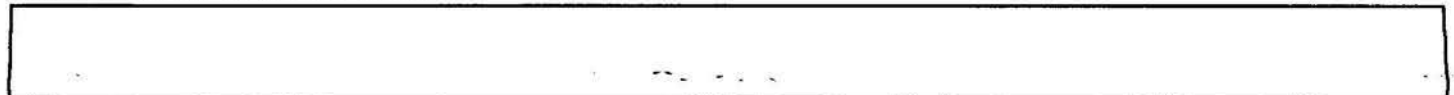
Please refer to back of paperwork for Disclosures/Terms of Sale

This order has been processed by our Henry Schein, Inc, Midwest Dist Center, 5315 W 74th St Bldg 138, Indianapolis, IN 462685135

Finance Charges of 1.5% per month (18% per annum) are applied to amounts not paid within terms.  
No merchandise will be accepted for return without our authorization. All claims must be made within 10 days of invoice.

Sub-Total	622.35
Tax	0.00
Shipping and/or Handling	0.85
<b>Total Amount</b>	<b>623.20</b>

Tax ID # 11-3136595 DUNS # 01-243-0880



Remittance Section

**HENRY SCHEIN®**

010000313667948254707110000000000623201207178

Cust #	:	03136679
Invoice #	:	48254707
Invoice Date	:	12/07/17
Amount	:	623.20
Terms	:	Invoice Date + 30 days
Due Date	:	01/06/18

Please put your account number on the check.

Remit To:

Henry Schein  
Dept CH 10241  
Palatine, IL 60055-0241



# Medical Terms & Conditions

## THE HENRY SCHEIN PRICE POLICY:

We endeavor to maintain prices for the duration of a catalog, but we reserve the right to make price adjustments in response to manufacturers' price increases or extraordinary circumstances. Prices are subject to change without notice.

Henry Schein, Inc. ("Henry Schein") and customer agree that the terms and conditions hereinafter set forth shall govern the relationship between Henry Schein and the customer to the extent that the parties do not have a written agreement in effect that conflicts with such terms and conditions. Customer acknowledges and accepts all such terms and conditions by placing an order for goods with Henry Schein, and upon Henry Schein's delivery of the order to the customer.

## DISCOUNTS, REBATES AND DISCLOSURES:

Invoice or statement prices may reflect or be subject to a bundled discount or rebate pursuant to a purchase offer, promotion, or discount program. You must fully and accurately report to Medicare, Medicaid, Tricare and/or any other federal or State program, upon request by such program, the discounted price(s) or net price(s) for each invoiced item, after giving effect to any applicable discounts or rebates, which price(s) may differ from the extended prices set forth on your invoice. Accordingly, you should retain this invoice and all relevant information for your records. It is your responsibility to review any agreements or other documents, including offers or promotions, applicable to the invoiced products/prices to determine if your purchase(s) are subject to a bundled discount or rebate. Any such discounts must be calculated pursuant to the terms of the applicable purchase offer, promotion, or discount program. Participation in a promotional discount program is only permissible in accordance with discount program rules. By participation in such program, you agree that, to your knowledge, your practice complies with the discount program requirements.

## DELIVERY TERMS:

Unless otherwise agreed, freight terms are FOB Shipper's Dock ("Ex Works" outside North America). Title passes at the time the shipment is loaded at the shipper's dock.

**Continental U.S.:**  
All orders will be subject to a handling charge. This charge includes freight, except for additional carrier charges related to special delivery services and hazardous material shipments. Special orders are subject to additional freight charges.

### Alaska, Hawaii & Pacific Protectorates:

Standard shipping methods provide direct, reduced cost, expedited air delivery service to all accounts in Alaska and Hawaii. Customers in the Pacific Protectorates are offered direct surface transport, or postal services for reliable delivery.

No additional surcharges apply, except when special services are requested.

Low-level hazardous items (dangerous goods in accepted quantities and Consumer Commodity ID 8000) are now available via UPS 2nd-day air.

### Guam, Puerto Rico, U.S. Trust Territories & Virgin Islands:

● All orders will be subject to a handling charge. This charge includes freight through the United States Postal Service (USPS).

● Special delivery orders and hazardous material shipments can be shipped via United Parcel Services (UPS) for an additional charge. No minimum order amount or weight applies. Speak to your International Representative for details.

### Outside U.S. (50 states):

If your order is being shipped outside the U.S. (50 states), please refer to the International Terms & Conditions at [henryschein.com](http://henryschein.com). Unless otherwise agreed, freight terms are FOB Shipper's Dock ("Ex Works" outside North America).

Title passes at the time the shipment is loaded at the shipper's dock.

Customer is responsible for compliance with any applicable import requirements.

## RX PRODUCTS & CONTROLLED SUBSTANCES:

Regulations require us to limit the sale of Rx and controlled substances only to registered, licensed healthcare professionals. If you are a new customer or have recently moved, please furnish us with a copy of your updated state DEA registration. For controlled substances, furnish a copy of your DEA registration verifying your shipping address.

Please note that all orders for controlled substances are subject to a due diligence review process. Schedule II controlled substances can be ordered electronically or by mail.

For information on our Controlled Substance Ordering System please visit

[www.henryschein.com/e222](http://www.henryschein.com/e222); if you prefer to continue using Federal 222 Forms to order Schedule II controlled substances, please mail the form to:

Henry Schein, Inc. ● Suite 300, 5315 West 74th Street ● Indianapolis, IN 46268

## REGULATORY REQUIREMENT:

Local regulatory requirements may apply to use or installation of certain products.

Be sure to understand and comply with any such requirements prior to purchase, use, or installation of products.

## RETURNS:

WE CANNOT ACCEPT ANY RETURNS WITHOUT PRIOR AUTHORIZATION.

To arrange for a return, simply call our Customer Service department or contact your Sales Consultant. The following conditions must be complied with:

- All returns must be accompanied by a copy of your invoice and a reason for the return.
- Merchandise must be returned in its original unopened container, unmarked, and properly packaged.
- Returned products must have been purchased within the previous thirty (30) days.
- Any returns past thirty (30) days are subject to a restocking fee.
- Shortages or errors in shipments must be reported within seven (7) days of invoice date to issue credit (if applicable).
- Shipping charges will apply on all returns.

### Exceptions:

The following special, customized, or government-regulated items are not returnable:

- Immune globulin products ● Special order items (products that we do not ordinarily stock) ● Personalized and imprinted items ● Opened computer hardware and software ● Controlled substances ● Hazardous materials ● Expired products
- Items that cannot be returned to the manufacturer ● Any item marked nonreturnable

### Equipment:

Opened and used equipment may not be returned for credit. Before opening equipment, we suggest that you check the shipping container and packing list to ensure that you are getting exactly what you ordered. Equipment must be returned in the original unopened packaging, unmarked and properly packaged. Special order equipment is not returnable. All equipment returns are subject to a restocking fee. Equipment is backed by the manufacturer's repair or replacement warranty. Please read and return all warranty information required immediately upon taking delivery of your new equipment. Open or defective equipment is subject to the manufacturer's warranty.

### Prescription Drug Returns:

Please note that, in order to comply with Federal and State Pedigree requirements, Henry Schein's policy on the return of Rx Drugs is as follows:

Rx Drugs which Henry Schein has purchased from wholesalers are not returnable.

These items will be identified in your invoice with the code WH.

Rx Drugs which are purchased by Henry Schein directly from the manufacturer may be returned providing that the following key elements are met:

- 1) Only returns due to error in order or delivery will be allowed.
- 2) Returns of Rx Drugs will only be accepted if HSI is notified within 14 calendar days of receipt of the shipment and valid return authorization is issued by HSI.
- 3) The Prescription Drug Marketing Act requires any customer returning Rx Drugs to complete and return a Prescription Drug Return Authorization form. Federal law requires that the healthcare entity returning Rx Drugs document that the product was kept under proper storage and handling conditions while in their possession and during the return of the product. To get a copy of the form and proper return authorization, please contact Customer Service.
- 4) In addition, Pedigree regulations require that the healthcare entity returning Rx Drugs certifies that the product being returned is the same exact product purchased from HSI.
- 5) Henry Schein will not issue credit for any returned Rx Drugs which have been tampered with, are out of date or where the labeling has been altered in any way.

## CHOOSE YOUR PAYMENT METHOD

**2% Cash Back or Maximum Rewards on all purchases with the Henry Schein Credit Card. To apply now, call: 1.866.398.9296 or online [www.henryschein.com/creditcard](http://www.henryschein.com/creditcard) Reduce the cost and administration of paying Henry ScheinPay electronically (ACH Debit) or set up AutoPay.**

**Please call Customer Service for details.**

For your convenience, we provide several payment alternatives. Orders billed to your account may be paid by ACH Debit, Check by Phone, or Check. If you prefer, you may use your Henry Schein Credit Card, American Express, Visa, MasterCard or Discover Card when placing your order. All sales are subject to our normal terms and conditions. All sales are subject to credit approval. Invoices are payable within agreed terms of sale.

### Open Accounts Receivable:

All unpaid accounts receivable past due are subject to a 1.5% finance charge.

To arrange for a product return, simply call Customer Service as noted below:

### Henry Schein Medical

Customer Service: 1.800.472.4346 8am9pm, et.  
Place an Order: 1.800.772.4346 8am9pm, et.  
Fax an Order: 1.800.329.9109 24 Hours.  
Internet: [www.henryschein.com/medical](http://www.henryschein.com/medical)  
E-Mail: [custserv@henryschein.com](mailto:custserv@henryschein.com)

### 340B Program

Customer Service: 1.877.344.3402 8:30am5:30pm, et.  
Place an Order: 1.877.344.3402 8:30am5:30pm, et.  
Fax an Order: 1.888.885.2253 24 Hours.  
E-Commerce Support: 1.800.711.6032 8am8pm, et.  
Internet: [www.henryschein.com/340B](http://www.henryschein.com/340B)  
E-Mail: [customer.support@henryschein.com](mailto:customer.support@henryschein.com)

### Henry Schein Medical/EMS

Customer Service: 1.800.845.3550 8:30am5:30pm, et.  
Place an Order: 1.800.845.3550 8:30am5:30pm, et.  
Fax an Order: 1.800.533.4793 24 Hours.  
Internet: [www.henryschein.com/ems](http://www.henryschein.com/ems)  
E-Mail: [scott.bruner@henryschein.com](mailto:scott.bruner@henryschein.com)

Please see: <http://www.Henryschein.com/US-EN/Medical/LegalTerms.ASPX> for Conditions & Exceptions.



Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1085910

Vendor Name: Henry Schein

Invoice Number: 49054000

Invoice Date: 01/05/18

PO Number: P0355639

Check Number: 0229998

Check Amount: \$ 2,779.22

Check Date: 01/17/2018

Department ID: 00153

Reviewer Name:

Voucher Number: V0491132

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

# HENRY SCHEIN®

Corporate Office

135 Duryea Road, Melville, NY 11747

1.800.472.4346

www.henryschein.com

Questions: 1-800-472-4346

## INVOICE

SHIP TO/SOLD TO:  
Coll Of DuPage-Dental Hygiene DSH  
425 Fawell Blvd Rm 1122  
Dr Edward Chavez  
Glen Ellyn, IL 60137-6599

010000231029749054000110000000000736190105186

BILL TO:  
College Of DuPage DSH  
425 Fawell Blvd  
Attn: Purchasing Cindy Fisk  
Glen Ellyn, IL 60137-6599

College Of DuPage  
425 Fawell Blvd  
Attn: Purchasing Cindy Fisk  
Glen Ellyn, IL 60137-6599

BILL TO	SHIP TO	INVOICE AMOUNT
2310297	837747	736.19

INVOICE#	INVOICE DATE
49054000	1/05/18

CUSTOMER PO#
355639

ORDER#	ORDER DATE	DUE DATE
59467363	01/04/18	02/04/18

**AP VERIFIED**

**01/16/18 - BETHANY CRUSE**

D&B#:01-243-0880

WHSE DEA# RH0162494 Fed ID: 11-3136595

LINE NO.	ITEM CODE	UNIT SIZE	DESCRIPTION & STRENGTH	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM STATUS	UNIT PRICE	EXTENSION	BOX NO	REM
			This order has been processed by our MIDWEST D.C. 5315 WEST 74TH STREET INDIANAPOLIS, IN 46268							
			THANK YOU FOR YOUR ORDER, KEVIN WI X3935 SPOKE WITH CINDY FISK FROM OFFICE SAVINGS ON THIS ORDER: \$317.71							
1	118-3469	100/BX	SHIELD FACE OPTICAL DISP 13X7"	1	1		139.94	139.94	1	
			* SPECIAL SCHEIN PRICE REDUCTION *							
			PRODUCT IS BEING SHIPPED TO YOU DIRECTLY FROM THE MANUFACTURER.							
2	203-0003	16/BX	ORAMOIST DRY MOUTH DISC	2	2		8.99	17.98	1	
			* SPECIAL SCHEIN PRICE REDUCTION *							
3	104-2538	EA	KNIFE-LAB PLASTER 7R	17	17		11.69	198.73	1	
			* SPECIAL SCHEIN PRICE REDUCTION *							
4	547-0497	50BX	WAX BITE WAFERS YELLOW NO FOIL	2	2		23.21	46.42	1	
			* SPECIAL SCHEIN PRICE REDUCTION *							
5	900-4574	12/PK	IMPRESSION TRAYS #8 UR/LL SOLID	5	5		5.19	25.95	1	
			** SPECIAL CONTRACT PRICE **							
6	900-4573	12/PK	IMPRESSION TRAYS #7 UL/LR SOLID	5	5		5.19	25.95	1	
			** SPECIAL CONTRACT PRICE **							
7	112-6864	48/BG	MAXIMA HP MIXING TIPS PNK 5.4MM	2	2		22.79	45.58	1	
			** SPECIAL CONTRACT PRICE **							

BILL TO	SHIP TO	INVOICE#	INVOICE AMOUNT
2310297	837747	49054000	736.19
ORDER#	ORDER DATE	INVOICE DATE	# OF BOXES
59467363	01/04/18	1/05/18	1
CUSTOMER PO#			PAGE#
355639			1

### ITEM STATUS KEY

B - Backordered; Item will follow  
D - Discontinued; Item no longer available  
F - Special offer  
M - Manufacturer will ship item directly to you  
P - Prescription Drug; Return Authorization Required  
R - Refrigerated Item; May be shipped separately  
S - Special Schein Pricing  
T - Taxable Item  
U - Temporarily unavailable; please reorder  
\* - Item has SDS

### REM KEY

SK - School Kit  
NC - No Charge

Continued on Next Page .....



135 Duryea Road, Melville, NY 11747  
1.800.472.4346  
www.henryschein.com  
Questions: 1-800-472-4346

# INVOICE

Cindy Fisk 1/8/18

SHIP TO/SOLD TO:  
Coll Of DuPage-Dental Hygiene DSH  
425 Fawell Blvd Rm 1122  
Dr Edward Chavez  
Glen Ellyn, IL 60137-6599

010000231029749054000110000000000736190105186

BILL TO:  
College Of DuPage DSH  
425 Fawell Blvd  
Attn: Purchasing Cindy Fisk  
Glen Ellyn, IL 60137-6599


College Of DuPage  
425 Fawell Blvd  
Attn: Purchasing Cindy Fisk  
Glen Ellyn, IL 60137-6599

BILL TO	SHIP TO	INVOICE AMOUNT
2310297	837747	736.19
INVOICE#	INVOICE DATE	
49054000	1/05/18	
CUSTOMER PO#		
355639		

Please detach here and mail the above with your payment

ORDER#	ORDER DATE	DUE DATE
59467363	01/04/18	02/04/18

D&B#:01-243-0880  
WHSE DEA# RH0162494 Fed ID: 11-3136595

LINE NO.	ITEM CODE	UNIT SIZE	DESCRIPTION & STRENGTH	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM STATUS	UNIT PRICE	EXTENSION	BOX NO	REM
8	102-3434	PU 4/BX	VP MIX HP FAST SET LB	10	10		23.29	232.90	1	
GO TO YOUR ONLINE ACCOUNT TO RETRIEVE THIS MSDS/SDS, 1055771 - IF YOU CAN'T ACCESS ONLINE OPTIONS, CALL 1-800-472-4346.										
** SPECIAL CONTRACT PRICE **										
=====										
YOUR ORDER 59467363 HAS BEEN SPLIT INTO MULTIPLE SHIPMENTS. CERTAIN ITEMS WILL BE SHIPPED SEPARATELY. YOU WILL BE BILLED FOR THESE ITEMS WHEN THEY ARE SHIPPED.										
=====										
PLEASE REFER TO BACK OF PAPERWORK FOR DISCLOSURES/TERMS OF SALE										
=====										
MERCHANDISE TOTAL								733.45		
FREIGHT CHARGES								2.74		
Invoice Date + 30 days								736.19		
Please remit payments only to the following address: Henry Schein, Inc. Dept CH 10241 Palatine, IL 60055-0241										
 M. Ahmad Chaudhry GL# : 01-10-00153-5401002										

BILL TO	SHIP TO	INVOICE#	INVOICE AMOUNT
2310297	837747	49054000	736.19
ORDER#	ORDER DATE	INVOICE DATE	# OF BOXES
59467363	01/04/18	1/05/18	1
CUSTOMER PO#			PAGE#
355639			2

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