

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087485

Vendor Name: Medline Industries

Invoice Number: 1842135448

Invoice Date: 01/09/18

PO Number: P0355648

Check Number: 0230076

Check Amount: \$ 2,556.54

Check Date: 01/17/2018

Department ID: 00225

Reviewer Name:

Voucher Number: V0491004

Redaction Type: None

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

Document Below

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From: CustomerInvoices@medline.com  
Sent: Tue Jan 09 04:31:47 CST 2018  
To: invoicing@cod.edu  
CC:  
Subject: Medline Invoices 1070839  
-----

Attached are Medline invoice/s.



www.medline.com

# INVOICE

Customer PO #	Invoice Date	Invoice #
355648	01/09/2018	1842135448

**Sold To:**

COLLEGE OF DU PAGE

425 FAWELL BLVD

GLEN ELLYN, IL 60137-6599

**Ship To:**

COLLEGE OF DU PAGE

425 FAWELL BLVD

GLEN ELLYN, IL 60137-6599

**3 WAY MATCH**

SALES REP #		SALES ORDER #		CARRIER		FREIGHT TERMS		CUSTOMER #		CURRENCY		AMOUNT DUE	
3536		467294928		FEDEX GROUND		MEDLINE		1070839		USD		\$170.54	
LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION		CODE*	DELIVERY #		UNIT PRICE		AMOUNT		

310	2.00	EA	2.00	CFU22F81	TE,C	922607575	40.33	80.66
				/SET,NEBULIZER,LC PLUS,W/ TUBING				
320	4.00	BX	4.00	B-D305905Z	TE,C	922608127	22.47	89.88
				/SYRINGE, 3ML, 23G X 1",SAFETYGLIDE				

GROSS	TAX AMOUNT	FREIGHT	TOTAL
170.54	0.00	0.00	\$170.54

Eligible Gross Amount \$170.54

Discount amount \$1.71 if recd. by 01/19/18

\* Code

TE - Tax Exempt

C - Customer Freight

CUSTOMER SHALL PAY THE FREIGHT CHARGES INDICATED ON THIS INVOICE. ALL CLAIMS OF SHORT SHIPMENTS, MIS-SHIPMENTS AND OTHER ERRORS IN DELIVERY SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN TWO BUSINESS DAYS OF THE INVOICE DATE, OR THEY ARE DEEMED WAIVED. ALL CLAIMS FOR PRICING AND BILLING ERRORS SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN 180 DAYS OF INVOICE DATE, OR THEY ARE DEEMED WAIVED.

EXPORT PROHIBITED CONTRARY TO U.S. FEDERAL LAWS. NO RETURNS WILL BE ALLOWED WITHOUT WRITTEN AUTHORIZATION.(PH: 800-307-8386)

INTEREST WILL BE CHARGED AT THE RATE OF 1.5% PER MONTH ON PAST DUE BALANCE

MEDLINE INDUSTRIES, INC. INCLUDES MEDLINE INDUSTRIES, INC. AND/OR ITS WHOLLY OWNED CONSOLIDATED SUBSIDIARIES, MEDLINE INDUSTRIES HOLDINGS, LP, A DELAWARE PARTNERSHIP, AND MEDCAL SALES, LLC, AN ILLINOIS LIMITED LIABILITY COMPANY, AS APPLICABLE

Billing Inquiries: 1-800-388-2147, A/R Svcs Rep: TJ McGlothlin x 7704770

## REMITTANCE

**Bill To:**

COLLEGE OF DU PAGE

425 FAWELL BLVD

GLEN ELLYN IL 60137-6599

Customer # 1070839

Invoice # 1842135448

Invoice Date 01/09/2018

Sales Rep # 3536

Payment Terms 1% 10, Net 45

Amount Due \$170.54

**Remit To:**

Medline Industries, Inc.

Dept CH 14400

Palatine IL 60055-4400

AMOUNT PAID \$ \_\_\_\_\_

Detach and return this portion with your payment

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087485

Vendor Name: Medline Industries

Invoice Number: 1842377638

Invoice Date: 01/11/18

PO Number: P0355648

Check Number: 0230076

Check Amount: \$ 2,556.54

Check Date: 01/17/2018

Department ID: 00225

Reviewer Name:

Voucher Number: V0491488

Redaction Type: None

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

Document Below

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From: CustomerInvoices@medline.com  
Sent: Thu Jan 11 05:14:09 CST 2018  
To: invoicing@cod.edu  
CC:  
Subject: Medline Invoices 1070839  
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Attached are Medline invoice/s.



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**INVOICE****3 WAY MATCH**

COLLEGE OF DU PAGE  
425 FAWELL BLVD  
GLEN ELLYN, IL 60137-6599

**Ship To:**  
COLLEGE OF DU PAGE  
425 FAWELL BLVD  
GLEN ELLYN, IL 60137-6599

Customer PO #	Invoice Date	Invoice #
355648	01/11/2018	1842377638

SALES REP #		SALES ORDER #		CARRIER		FREIGHT TERMS		CUSTOMER #		CURRENCY		AMOUNT DUE		
3536		467294928		MEDTRANS		MEDLINE		1070839		USD		\$2,386.00		
LINE NO.	ORDER QTY		U/M	INVOICE QTY		ITEM NO. / DESCRIPTION		CODE*	DELIVERY #		UNIT PRICE		AMOUNT	

10	1.00	CS	1.00	DYND40971 /KIT,CATHETER,SUCTION,12FR,WHISTL,2 GLVS	TE	922607375	49.99	49.99
HCPCS Code #: A4624 + A4930								
40	3.00	CS	3.00	MDS090735 /PAD,PREP,ALCOHOL,STERILE,MEDIUM,2-PLY	TE	922607375	32.50	97.50
HCPCS Code #: A4245								
50	2.00	CS	2.00	CUR02278RB /BANDAGE,PLASTIC,CURAD,3/4"X3",80CT	TE	922607375	29.45	58.90
60	1.00	BX	1.00	B-D303345Z /CANNULA, IV, INTERLINK 17G, STERILE LF	TE	922607375	37.14	37.14
70	1.00	CS	1.00	NON243277 /PAPER,TISSUE,FACE,STAND,FLAT,90SHT/30BX	TE	922607375	18.87	18.87
80	1.00	CS	1.00	DYND75222 /TRAY,DRESSING,CENT LN,CHG,CHLORAPREP,LF	TE	922607375	119.59	119.59
HCPCS Code #: A4221								

CUSTOMER SHALL PAY THE FREIGHT CHARGES INDICATED ON THIS INVOICE. ALL CLAIMS OF SHORT SHIPMENTS, MIS-SHIPMENTS AND OTHER ERRORS IN DELIVERY SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN TWO BUSINESS DAYS OF THE INVOICE DATE, OR THEY ARE DEEMED WAIVED. ALL CLAIMS FOR PRICING AND BILLING ERRORS SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN 180 DAYS OF INVOICE DATE, OR THEY ARE DEEMED WAIVED.

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INTEREST WILL BE CHARGED AT THE RATE OF 1.5% PER MONTH ON PAST DUE BALANCE

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Billing Inquiries: 1-800-388-2147, A/R Svcs Rep: TJ McGlothlin x 7704770

**REMITTANCE**

**Bill To:**  
COLLEGE OF DU PAGE  
425 FAWELL BLVD  
GLEN ELLYN IL 60137-6599

**Customer #** 1070839  
**Invoice #** 1842377638  
**Invoice Date** 01/11/2018  
**Sales Rep #** 3536  
**Payment Terms** 1% 10, Net 45  
**Amount Due** \$2,386.00

**Remit To:**  
Medline Industries, Inc.  
Dept CH 14400  
Palatine IL 60055-4400

AMOUNT PAID \$ \_\_\_\_\_

Detach and return this portion with your payment



www.medline.com

# INVOICE

Customer PO #	Invoice Date	Invoice #
355648	01/11/2018	1842377638

**Ship To:**  
COLLEGE OF DU PAGE  
425 FAWELL BLVD  
GLEN ELLYN, IL 60137-6599

LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION	CODE*	DELIVERY #	UNIT PRICE	AMOUNT
100	3.00	CS	3.00	MDS193076 /GLOVE,EXAM,VINYL,ULTRA,PF,LF,LG	TE	922607375	43.00	129.00
HCPCS Code #: A4927								
110	3.00	CS	3.00	MDS193074 /GLOVE,EXAM,VINYL,ULTRA,PF,LF,SM	TE	922607375	43.00	129.00
HCPCS Code #: A4927								
120	5.00	CS	5.00	MDS193075 /GLOVE,EXAM,VINYL,ULTRA,PF,LF,MD	TE	922607375	43.00	215.00
HCPCS Code #: A4927								
130	1.00	CS	1.00	MDS193077 /GLOVE,EXAM,VINYL,ULTRA,PF,LF,XL	TE	922607375	50.00	50.00
HCPCS Code #: A4927								
140	1.00	BX	1.00	B-D305932ZZ /SYRINGE, INSULIN, 0.5ML, 29GX 1/2"	TE	922607375	40.35	40.35
160	1.00	BX	1.00	NOV185275 /NDL SFTY NOVOFINE AUTOCOVER 30G X8MM DSP	TE	922607375	84.71	84.71
170	1.00	CS	1.00	EMZ11240 /SYRINGE, 10ML SALINE IN 10ML	TE	922607375	61.34	61.34
180	2.00	PK	2.00	MDS131040 /PENLIGHT, DISPOSABLE	TE	922607375	10.12	20.24
190	1.00	BX	1.00	MPOP7X13Z /PHYS OFF POUCH, SELF SEAL, 7.5 X 13	TE	922607375	24.77	24.77
200	2.00	CS	2.00	MDS194085 /GLOVE,EXAM,NITRILE,ALOE,STRL,12",PAIR,S	TE	922607375	139.17	278.34
210	3.00	CS	3.00	MDS194086 /GLOVE,EXAM,NITRILE,ALOE,STRL,12",PAIR,M	TE	922607375	139.17	417.51
220	1.00	CS	1.00	MDS194087 /GLOVE,EXAM,NITRILE,ALOE,STRL,12",PAIR,L	TE	922607375	139.17	139.17
230	1.00	BX	1.00	EMZSCXT32000Z /SWABCAP,XT LUER ACCESS VALVE CAP,LF	TE	922607375	97.52	97.52
240	1.00	BX	1.00	MSC2302 /DRESSING,TRNSPRNT,SURESITE,2.375"X2.75"	TE	922607375	50.00	50.00
HCPCS Code #: A6257								
250	2.00	BX	2.00	MDS9607 /SHEATH,DIGITAL THERMOMETER,ORAL,100/BX	TE	922607375	3.15	6.30
260	3.00	BX	3.00	MDS202075Z /BLADE,TONGUE,6",STERILE	TE	922607375	6.80	20.40
270	20.00	EA	20.00	DYND40982H /TRAY,CATHETER,SUCTION,14 FR,2 GLV,MINI	TE	922607375	1.42	28.40
HCPCS Code #: A4624 + A4930								
280	1.00	CS	1.00	DYND40589 /TRAY,TRACH,SALINE,PEROXIDE	TE	922607375	57.38	57.38
HCPCS Code #: A4626 + A4930 + A6402 + A9999								



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355648	01/11/2018	1842377638

**Ship To:**  
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425 FAWELL BLVD  
GLEN ELLYN, IL 60137-6599

LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION	CODE*	DELIVERY #	UNIT PRICE	AMOUNT
290	10.00	DZ	10.00	MDTWC3C11HDZ /WASHCLOTH,WHI,12X12,.70 LB/DZ,CTN	TE	922607375	4.39	43.90
320	4.00	BX	4.00	B-D305904ZZ /SYRINGE, 3ML, 25G X 5/8",SAFETYGLIDE	TE	922607375	27.67	110.68

GROSS	TAX AMOUNT	FREIGHT	TOTAL
2,386.00	0.00	0.00	\$2,386.00

Eligible Gross Amount \$2,386.00  
Discount amount \$23.86 if recd. by 01/21/18

\* Code  
TE - Tax Exempt  
C - Customer Freight