

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087629
Vendor Name: Pocket Nurse
Invoice Number: 1045530-1
Invoice Date: 01/16/18
PO Number: P0355757
Check Number: E0065077
Check Amount: \$ 236.12
Check Date: 01/24/2018
Department ID: 00141
Reviewer Name: Janelle Walker
Voucher Number: V0491681
Redaction Type: None
Document Type: AP Invoice

Document Below

From: ttunno@pocketnurse.com
Sent: Tue Jan 16 16:21:50 CST 2018
To: invoicing@cod.edu
CC:
Subject: Invoice 1045530 for 011855 College Of Dupage

See the Following attached Files:e00106120.pdf

Please contact accounting@pocketnurse.com for billing questions, copies of invoices or to make credit card payments. You may also call us at 1-800-225-1600, option 3.

For questions regarding your order, please contact our customer service department at cs@pocketnurse.com or 1-800-225-1600, option 1.

THE INFORMATION CONTAINED IN THIS EMAIL MESSAGE IS INTENDED ONLY FOR THE PROFESSIONAL AND CONFIDENTIAL USE OF THE INTENDED RECIPIENT(S). This email message and/or any attachments thereto may be confidential, legally privileged, and/or exempt from disclosure under applicable law. If the reader of this message is not an intended recipient, you are hereby notified that any review, use, disclosure, dissemination, forwarding or copying of this email message and/or attachments or taking of any action in reliance on the contents therein is strictly prohibited. Please notify Pocket Nurse immediately by reply email or telephone 724-480-3777, and delete the original message and all attachments from your system. Thank you.

Invoice

Bill to: College Of Dupage
 425 Fawell Blvd
 Glen Ellyn, IL 60137

Invoice Number : 1045530-1

Customer# : 011855

Invoice Date : 01/16/2018

Due Date : 02/15/2018

Ordered By : J. Walker

Entered By : Beth Hull

Account Manager : Terry Kitchen

Terms : NET 30

Shipping Method : Ground

Ship Acct# :

Customer PO : 355757

Phone: (630) 942-2229

Ship to: College of DuPage

425 Fawell Blvd

Warehouse Manager/ Ship - Rcvg

GLEN ELLYN, IL 60137

APPROVED

01/22/18 - MUHAMMAD CHAUDHRY

Remit To: Pocket Nurse

P.O. Box 649

Pittsburgh, PA 15264-4498

Tax ID : 25-1769855

All checks must reference invoice number to be processed in a timely manner.

Phone: (630) 942-2569

Attn: Janelle Walker

Customer/Order Instructions

Pricing based on TCPN Contract R140102

Line	Order	Ship	B/O	U/M	Item #	Description	Price	Per	Extension
0001	4	4	0	BX	03-75-2201	Face Mask with Earloop	5.30	BX	21.20
0002	1	1	0	BX	05-74-0648	Emery Board	5.01	BX	5.01
0003	2	2	0	EA	02-87-0200-1GAL	Pocket Nurse® Simulated Urine Gallon	11.42	EA	22.84
Package Information:						Tracking #	Weight		
						425751460663	3.60		

Transportation charges on shipments from Pocket Nurse cover dock-to-dock or dock-to-curb deliveries. Please read our complete Shipping Disclaimer in the Terms and Conditions. If additional shipping charges are incurred by Pocket Nurse due to customer requests or refusal of shipment charges will revert to the customer. Accessorial charges may include, but are not limited to; change of address, residential delivery, inside delivery, stair charges, redelivery, and storage.

INVOICE REVIEWED

OKAY TO PAY

JANELLE WALKER 01/22/18

Customer Service - cs@pocketnurse.com or 1.800.225.1600, option 1.

Billing - accounting@pocketnurse.com or 1.800.225.1600, option 3.

SubTotal

49.05

Total

49.05

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087629

Vendor Name: Pocket Nurse

Invoice Number: 1043981-2

Invoice Date: 01/17/18

PO Number: P0355543

Check Number: E0065077

Check Amount: \$ 236.12

Check Date: 01/24/2018

Department ID: 00225

Reviewer Name:

Voucher Number: V0491987

Redaction Type: None

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

Document Below

From: mkosanovich@pocketnurse.com
Sent: Wed Jan 17 14:53:04 CST 2018
To: invoicing@cod.edu
CC:
Subject: Invoice 1043981 for 011855 College Of Dupage

See the Following attached Files:e00106859.pdf

Please contact accounting@pocketnurse.com for billing questions, copies of invoices or to make credit card payments. You may also call us at 1-800-225-1600, option 3.

For questions regarding your order, please contact our customer service department at cs@pocketnurse.com or 1-800-225-1600, option 1.

THE INFORMATION CONTAINED IN THIS EMAIL MESSAGE IS INTENDED ONLY FOR THE PROFESSIONAL AND CONFIDENTIAL USE OF THE INTENDED RECIPIENT(S). This email message and/or any attachments thereto may be confidential, legally privileged, and/or exempt from disclosure under applicable law. If the reader of this message is not an intended recipient, you are hereby notified that any review, use, disclosure, dissemination, forwarding or copying of this email message and/or attachments or taking of any action in reliance on the contents therein is strictly prohibited. Please notify Pocket Nurse immediately by reply email or telephone 724-480-3777, and delete the original message and all attachments from your system. Thank you.

3 WAY MATCH

 Bill to: College Of DuPage
 425 Fawell Blvd
 Glen Ellyn, IL 60137

 Phone: (630) 942-2229
 Ship to: College of DuPage
 425 Fawell Blvd
 Warehouse Manager/ Ship - Rcvg
 GLEN ELLYN, IL 60137

 Phone: (630) 942-2569
 Attn: Janelle Walker

Invoice

Invoice Number : 1043981-2

Customer# : 011855

Invoice Date : 01/17/2018

Due Date : 02/16/2018

Ordered By : J. Walker

Entered By : Beth Hull

Account Manager : Terry Kitchen

Terms : NET 30

Shipping Method : Ground

Ship Acct# :

Customer PO : 355543

Remit To: Pocket Nurse

P.O Box 644898

Pittsburgh, PA 15264-4898

Tax ID : 25-1763055

 All checks must reference invoice number
 to be processed in a timely manner.

Customer/Order Instructions

Pricing based on TCPN Contract R140102

Line	Order	Ship	B/O	U/M	Item #	Description	Price	Per	Extension
0001	1	1	0	CS	05-87-4928	Urethral Catheter Tray 14FR	45.47	CS	45.47
0002	80	80	0	EA	06-93-1020-50ML	Demo Dose® .9PCT Sodim Chlorid 50mL	1.77	EA	141.60
Package Information:						Tracking #	Weight		
						426115887272	4.80		
						407155369738	13.65		

Transportation charges on shipments from Pocket Nurse cover dock-to-dock or dock-to-curb deliveries. Please read our complete Shipping Disclaimer in the Terms and Conditions. If additional shipping charges are incurred by Pocket Nurse due to customer requests or refusal of shipment charges will revert to the customer. Accessorial charges may include, but are not limited to; change of address, residential delivery, inside delivery, stair charges, redelivery, and storage.

SubTotal 187.07

 Customer Service - cs@pocketnurse.com or 1.800.225.1600, option 1.
 Billing - accounting@pocketnurse.com or 1.800.225.1600, option 3.

Total 187.07