

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1180319

Vendor Name: Labsource

Invoice Number: 006458572

Invoice Date: 03/07/18

PO Number: P0356509

Check Number: 0234915

Check Amount: \$ 1,247.40

Check Date: 04/11/2018

Department ID: 00145

Reviewer Name:

Voucher Number: V0508062

Redaction Type: None

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

Document Below

From: jollymc@cod.edu
Sent: Thu Apr 05 15:35:13 CDT 2018
To: invoicing@cod.edu
CC:
Subject: Invoice from LabSource

Good afternoon, Please find attached an invoice sent to me from Kristine Murphy who placed an order with vendor LabSource. Kristine has sent the invoice to me and I'm forwarding to you. Laurel Laurel Jolly-McCarthy Math & Natural Sciences Division | BIC 2E06 | x2055

[attachment: Labsource invoice.pdf]



Science and Safety

INVOICE

LABSOURCE, INC
97400 Eagle Way
Chicago, IL 60678-9740
PH:800-545-8823 * FAX:630-343-1701 * FEIN#36-3631684

Billing Questions:AR@LABSOURCE.COM

3 WAY MATCH

Sold To:
College of DuPage
KRISTINE MURPHY
425 FAWELL BLVD
GLEN ELLYN IL 60137

BILLING INQUIRIES

(800)545-8823

Page 1 of 1

ACCOUNT NUMBER 1001939154
TERMS Net 30
INVOICE NUMBER 006458572
INVOICE DATE 03/07/2018
DUE DATE 04/06/2018
SHIP VIA Best Way
P.O. NUMBER 356509

SALES ORDER 7146424
FOB SHIPPING POINT F.O.B. Shipping Point

Ship To:
KRISTINE MURPHY
KRISTINE MURPHY
425 FAWELL BLVD
GLEN ELLYN IL 60137

ITEM	ITEM DESCRIPTION	WH	ORD	SHP	BO	UOM	PRICE	TOTAL
N291	Glove, Nitrile Exam,, PF, S, 100/pk10pk/cs	LS1	4	4		CS/10PK	66.00	264.00
N292	Glove, Nitrile Exam,, PF, M, 100/pk10pk/cs	LS1	5	5		CS/10PK	66.00	330.00
N293	Glove, Nitrile Exam,, PF, L, 100/pk,10pk/cs	LS1	5	5		CS/10PK	66.00	330.00
N294	Glove, Nitrile Exam,, PF, XL, 100/pk10pk/cs	LS1	4	4		CS/10PK	66.00	264.00
all rec'd 3/8/18								

15225037

Subtotal: 1,188.00
Shipping & Handling: 59.40
Tax: 118.80
CREDIT/PREPAYMENTS: \$0.00
AMOUNT DUE 1,366.20



Science and Safety

To ensure proper payment application, please write your account number on your check, and include the attached coupon with your payment

INVOICE DATE 03/07/2018

DUE DATE 04/06/2018

ACCOUNT NUMBER 1001939154

AMOUNT DUE 1,366.20

INVOICE NUMBER 006458572

Bill To:
College of DuPage
KRISTINE MURPHY
425 FAWELL BLVD
GLEN ELLYN IL 60137

Payable To:
LABSOURCE, INC
97400 Eagle Way
Chicago, IL 60678-9740
PH:800-545-8823 * FAX:630-343-1701 * FEIN#36-3631684

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