

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087167
Vendor Name: Praxair/Gas Tech
Invoice Number: 81873307
Invoice Date: 03/13/18
PO Number: B0352823
Check Number: 0234997
Check Amount: \$ 1,165.85
Check Date: 04/11/2018
Department ID: 00285
Reviewer Name: Bridget McFarland
Voucher Number: V0500933
Redaction Type: None
Document Type: AP Invoice

Document Below

From: mcfarl@cod.edu
Sent: Tue Mar 13 16:38:32 CDT 2018
To: invoicing@cod.edu
CC:
Subject: Fw: Praxair U.S. e-invoice delivery

Bridget McFarland
Business and Technology | Program Support Specialist
College of DuPage
425 Fawell Blvd. | Glen Ellyn, IL 60137-6599 | USA
phone 630.942.8419 | mcfarl@cod.edu

From: Praxair eInvoice <praxair@notify-now.com>
Sent: Tuesday, March 13, 2018 3:27 PM
To: McFarland, Bridget
Subject: Praxair U.S. e-invoice delivery

*****PLEASE DO NOT REPLY TO THIS EMAIL*****

For your convenience, your invoice(s) have been attached to this email for you to save and print.

----- For other requests regarding your e-invoicing registration or your charge account, please see the contact information below. -----

- To report email problems or request updates to your e-invoicing account, including changing the email address: Contact us at einvoices@praxair.com . Please include your account number(s).
- For account inquiries, invoice copies, proof of delivery, or to make a payment: Call 1-800-266-4369, select option 2 and follow the prompts.
- As an additional tool: Please see our website <https://express2.praxair.com> to monitor open orders, cylinder count and obtain PDF copies of unpaid invoices. Register as an existing customer and create your own username and password.

Thank you. We appreciate your business.

' Please click on the customer number below to retrieve your documents:

PAGE	CUSTOMER NUMBER	DATE	INVOICE NUMBER	AMOUNT DUE
1 OF 1	71966561	03/13/2018	81873307	416.94

Bill to
COLLEGE OF DUPAGE
WELD LAB DIVISION
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

4309 (E-A)

REMITTANCE INSTRUCTIONS:

PLEASE SHOW INVOICE NUMBER AND DATE
ON REMITTANCE, AND SEND TO:

PRAXAIR DISTRIBUTION, INC.
DEPT CH 10660
PALATINE IL 60055-0660
800-266-4369

Ship to COLLEGE OF DUPAGE
WELD LAB DIVISION
425 FAWELL BLVD
GLEN ELLYN IL 60137

AMOUNT ENCLOSED

APPROVED
03/20/18 - KRISTINE FAY

PLEASE DETACH AND RETURN TOP PORTION WITH PAYMENT

QUESTIONS:

PLEASE REFER INQUIRIES REGARDING THIS INVOICE TO:

PRAXAIR DISTRIBUTION, INC.
CUSTOMER SERVICE
12000 ROOSEVELT RD
HILLSDALE IL 60162
800-266-4369

COMMENTS:

Please note the format of your invoice has changed and now includes more information to help you manage your Praxair account.

If you wish to receive the document electronically in the future, please contact us.

Pay your bill online at www.praxairdirect.com/billpay or call 1-800-266-4369.

INVOICE DETAIL AND PURCHASE DESCRIPTION		TERMS:		Net 30 Days			PAYMENT DUE: 4/12/2018				
ITEM NUMBER	ITEM DESCRIPTION	QTY SHIP	QTY RETN	BACK ORDER	UOM	VOL/WT	UNIT PRICE	AMOUNT	TAX Y/N		
INVOICE NO:81873307		CUSTOMER:71966561 DATE:3/13/2018									
SHIP FROM		70597,PXPKG HILLSIDE IL HS									
ORDER REFERENCE		55717780 DT 2/23/2018 PT# 76107632									
CUSTOMER PO / RELEASE		B0352823									
SHIP VIA		Customer Pick Up									
		SHIP TO ACCOUNT: 71966561									
TWE95101110	CABLE CONNECTOR 2-AF TERMINAL	1			EA		27.40	27.40	N		
TWE95101110	CABLE CONNECTOR 2-AF TERMINAL	11			EA		27.40	301.40	N		
PRS53051	SCRATCH BRUSH CS 4X16 SHOE HN HNDL	3			EA		3.57	10.71	N		
PRS53051	SCRATCH BRUSH CS 4X16 SHOE HN HNDL	9			EA		3.57	32.13	N		
PRS51001	GRIND WHEEL 4.5X1/4X5/8-11A24R	2			EA		4.53	9.06	N		
PRS51001	GRIND WHEEL 4.5X1/4X5/8-11A24R	8			EA		4.53	36.24	N		
INVOICE REVIEWED OKAY TO PAY BRIDGEMAN AND 03/19/18											
ACCOUNTS PAYABLE WILL BE CHARGED WITH GREATER OF SERVICE CHARGE \$15.00 OR FINANCE CHARGE OF 1.5% PER MONTH (ANNUAL RATE) OF THE OUTSTANDING BALANCE, UNLESS OTHERWISE SPECIFIED IN THE CONTRACT.		PRAXAIR'S POLICY IS THAT ALL INVOICES ARE DUE 30 DAYS AFTER THE DATE OF THE INVOICE. PRAXAIR'S POLICY IS THAT ALL INVOICES ARE DUE 30 DAYS AFTER THE DATE OF THE INVOICE. PRAXAIR'S POLICY IS THAT ALL INVOICES ARE DUE 30 DAYS AFTER THE DATE OF THE INVOICE.		SUBTOTAL		TAX		MONTH		INVOICE AMOUNT	
				416.94		0.00		USD \$		416.94	

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087167
Vendor Name: Praxair/Gas Tech
Invoice Number: 82042696
Invoice Date: 03/21/18
PO Number: B0352823
Check Number: 0234997
Check Amount: \$ 1,165.85
Check Date: 04/11/2018
Department ID: 00285
Reviewer Name: Bridget McFarland
Voucher Number: V0502153
Redaction Type: None
Document Type: AP Invoice

Document Below

From: mcfarl@cod.edu
Sent: Sat Mar 24 07:33:45 CDT 2018
To: invoicing@cod.edu
CC:
Subject: Fw: Praxair U.S. e-invoice delivery

Bridget McFarland
Business and Technology | Program Support Specialist
College of DuPage
425 Fawell Blvd. | Glen Ellyn, IL 60137-6599 | USA
phone 630.942.8419 | mcfarl@cod.edu

From: Praxair eInvoice <praxair@notify-now.com>
Sent: Friday, March 23, 2018 8:01 PM
To: McFarland, Bridget
Subject: Praxair U.S. e-invoice delivery

*****PLEASE DO NOT REPLY TO THIS EMAIL*****

For your convenience, your invoice(s) have been attached to this email for you to save and print.

----- For other requests regarding your e-invoicing registration or your charge account, please see the contact information below. -----

- To report email problems or request updates to your e-invoicing account, including changing the email address: Contact us at einvoices@praxair.com . Please include your account number(s).
- For account inquiries, invoice copies, proof of delivery, or to make a payment: Call 1-800-266-4369, select option 2 and follow the prompts.
- As an additional tool: Please see our website <https://express2.praxair.com> to monitor open orders, cylinder count and obtain PDF copies of unpaid invoices. Register as an existing customer and create your own username and password.

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' Please click on the customer number below to retrieve your documents:

PAGE	CUSTOMER NUMBER	DATE	INVOICE NUMBER	AMOUNT DUE
1 OF 1	71966561	03/21/2018	82042696	350.96

Bill to
COLLEGE OF DUPAGE
WELD LAB DIVISION
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

30553 (E-A)

REMITTANCE INSTRUCTIONS:

PLEASE SHOW INVOICE NUMBER AND DATE
ON REMITTANCE, AND SEND TO:

PRAXAIR DISTRIBUTION, INC.
DEPT CH 10660
PALATINE IL 60055-0660
800-266-4369

Ship to COLLEGE OF DUPAGE
WELD LAB DIVISION
425 FAWELL BLVD
GLEN ELLYN IL 60137

AMOUNT ENCLOSED

71966561 82042696 000000350964

APPROVED

PLEASE DETACH AND RETURN TOP PORTION WITH PAYMENT

03/29/18 - KRISTINE FAY

COMMENTS:
PLEASE REFER INQUIRIES REGARDING THIS INVOICE TO: PRAXAIR DISTRIBUTION, INC. CUSTOMER SERVICE 12000 ROOSEVELT RD HILLSIDE IL 60162 800-266-4369
Please note the format of your invoice has changed and now includes more information to help you manage your Praxair account. If you wish to receive the document electronically in the future, please contact us. Pay your bill online at www.praxairdirect.com/billpay or call 1-800-266-4369.

RENTAL DETAIL AND DESCRIPTION		TERMS:		Net 30 Days			PAYMENT DUE: 4/20/2018				
ITEM NUMBER	ITEM DESCRIPTION	BEG BAL	CYL SHIP	CYL RETN	END BAL	LEASE OFFSET	TYPE	SUBJECT TO RENT	UNIT PRICE	AMOUNT	TAX Y/N
INVOICE NO:82042696	CUSTOMER:71966561 DATE:3/21/2018										
CUSTOMER PO / RELEASE PERIOD	B0352823 2/20/2018 TO 3/20/2018										
	SHIP TO ACCOUNT: 71966561 --CYLINDER RENT SUMMARY--										
RNTU020	Fuel gas < 200lbs		2		2		R2	16	0.1550	2.48	N
RNTU130	Industrial Acetylene	21	4	8	17		R2	560	0.2060	115.36	N
RNTU230	Ind High Pressure > 100cf	35	15	18	32		R2	974	0.2060	200.64	N
RNTU330	CO2 >= 50 lbs	2			2		R2	56	0.58	32.48	N
<div>INVOICE REVIEWED OKAY TO PAY BRIDGET MCFARLAND 03/28/18</div>											
ACCOUNTS PAST DUE WILL BE CHARGED THE GREATER OF A SERVICE CHARGE OF \$1, OR A FINANCE CHARGE OF 1.5% PER MONTH (18% ANNUAL RATE) OF THE OUTSTANDING BALANCE, UNLESS OTHERWISE SPECIFIED IN THE CONTRACT.		PLEASE NOTE PAYMENT OF THIS INVOICE ACKNOWLEDGES THAT THE ABOVE SHIPMENTS, RETURNS, AND/OR BALANCE OF THE PRAXAIR CYLINDERS IN YOUR POSSESSION IS CORRECT AT THE CLOSE OF BUSINESS ON THE DATE SHOWN ON THIS INVOICE. PAYMENT RECEIVED WITHOUT INVOICE APPLICATION INSTRUCTIONS WILL BE APPLIED PER PRAXAIR'S DISCRETION AT ANY TIME AFTER THE NINETIETH DAY FOLLOWING PAYMENT RECEIPT.				SUBTOTAL		TAX AMOUNT		INVOICE AMOUNT	
						350.96		0.00		USD \$	350.96

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087167
Vendor Name: Praxair/Gas Tech
Invoice Number: 82008220
Invoice Date: 03/21/18
PO Number: B0352921
Check Number: 0234997
Check Amount: \$ 1,165.85
Check Date: 04/11/2018
Department ID: 00073
Reviewer Name: Bridget McFarland
Voucher Number: V0507347
Redaction Type: None
Document Type: AP Invoice

Document Below

PAGE	CUSTOMER NUMBER	DATE	INVOICE NUMBER	AMOUNT DUE
1 OF 1	71424919	03/21/2018	82008220	68.00

Bill to
COLLEGE OF DUPAGE
ATTN ACCOUNTS PAYABLE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

5951- 1/1: 6018 (A1)

REMITTANCE INSTRUCTIONS: PLEASE SHOW INVOICE NUMBER AND DATE ON REMITTANCE, AND SEND TO:
PRAXAIR DISTRIBUTION, INC. DEPT CH 10660 PALATINE IL 60055-0660 800-266-4369

Ship to
COLLEGE OF DUPAGE
425 FAWELL BLVD
HVAC INSTRUCTION DEH
GLEN ELLYN IL 60137

AMOUNT ENCLOSED

71424919 82008220100000010009

APPROVED

03/30/18 - KRISTINE FAY

PLEASE DETACH AND RETURN TOP PORTION WITH PAYMENT

QUESTIONS:

PLEASE REFER INQUIRIES REGARDING THIS INVOICE TO:

PRAXAIR DISTRIBUTION, INC.
CUSTOMER SERVICE
12000 ROOSEVELT RD
HILLSDALE IL 60162
800-266-4369

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If you wish to receive the document electronically in the future, please contact us.

Pay your bill online at www.praxairdirect.com/billpay or call 1-800-266-4369.

RENTAL DETAIL AND DESCRIPTION		TERMS:		Net 30 Days			PAYMENT DUE: 4/20/2018				
ITEM NUMBER	ITEM DESCRIPTION	BEG BAL	CYL SHIP	CYL RETN	END BAL	LEASE OFFSET	TYPE	SUBJECT TO RENT	UNIT PRICE	AMOUNT	TAX Y/N
INVOICE NO:82008220	CUSTOMER:71424919 DATE:3/21/2018										
CUSTOMER PO / RELEASE PERIOD	193009S 2/20/2018 TO 3/20/2018										
	SHIP TO ACCOUNT: 76154733 --CYLINDER RENT SUMMARY--										
RNTU130	Industrial Acetylene	-9			-9		R2				N
RNTU210	Ind High Pressure < 100cf	-6			-6		R2				N
RNTU230	Ind High Pressure > 100cf	8			8		R2	224	0.1960	43.90	N
RNTU888	PROPANE RACK/CAGE	2			2		R1	2	5.25	10.50	N
UMZGOVM1	SAFETY & ENVIRONMENTAL SERV FE		1				EA		13.60	13.60	N
<div>INVOICE REVIEWED OKAY TO PAY BRIDGET MCFARLAND 03/30/18</div>											
ACCOUNTS PAST DUE WILL BE CHARGED THE GREATER OF A SERVICE CHARGE OF \$1, OR A FINANCE CHARGE OF 1.5% PER MONTH (18% ANNUAL RATE) OF THE OUTSTANDING BALANCE, UNLESS OTHERWISE SPECIFIED IN THE CONTRACT.		PLEASE NOTE PAYMENT OF THIS INVOICE ACKNOWLEDGES THAT THE ABOVE SHIPMENTS, RETURNS, AND/OR BALANCE OF THE PRAXAIR CYLINDERS IN YOUR POSSESSION IS CORRECT AT THE CLOSE OF BUSINESS ON THE DATE SHOWN ON THIS INVOICE. PAYMENT RECEIVED WITHOUT INVOICE APPLICATION INSTRUCTIONS WILL BE APPLIED PER PRAXAIR'S DISCRETION AT ANY TIME AFTER THE NINETIETH DAY FOLLOWING PAYMENT RECEIPT.			SUBTOTAL		TAX AMOUNT		INVOICE AMOUNT		
					68.00		0.00		USD	\$	68.00

TERMS & CONDITIONS

These terms and conditions represent the entire agreement between the parties hereto and there are no collateral, oral or other agreements or understandings, unless expressly stipulated on this invoice.

WARRANTIES-DISCLAIMER:

Seller warrants all cylinders, equipment, product or merchandise delivered herewith will meet their manufacturer's standard specifications. SELLER MAKES NO OTHER WARRANTY OF ANY KIND WHATSOEVER, EXPRESS OR IMPLIED, AND ALL IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE ARE HEREBY DISCLAIMED BY SELLER AND EXCLUDED FROM THIS TRANSACTION. No claim of any kind with respect to all cylinders, equipment, product or merchandise delivered, whether based on contract, negligence, warranty, strict liability or otherwise, shall be greater than the price paid for such item in respect to which such claim is made.

LIABILITY:

Customer understands and agrees that title to cylinders and equipment remains with the Seller, except in the case of a sale of cylinders, or equipment. In such event, title shall pass to Customer when invoices rendered covering said cylinders or equipment are paid in full. Customer assumes all liability for damages from accidents caused by or incurred in the use or transportation of said cylinders and/or equipment. Customer shall defend, indemnify and hold harmless Seller, its officers, agents, and employees from any and all damages and/or liability to any person whomsoever, arising out of or resulting from the usage, storage, or transportation of said cylinders, and/or equipment by the Customer or anyone while they are in the custody of the Customer. The Customer acknowledges receipt of the cylinders and/or equipment in good working condition and repair and agrees to return them in as good condition subject to reasonable wear and tear. Customer shall be liable for all damage to or loss of the cylinders and/or equipment regardless of the cause until they have been returned to, and receipted for, by the Seller. In the event of any accident involving said cylinders and/or equipment, Customer shall promptly furnish to Seller a complete report in writing, with names and addresses of witnesses and parties involved and Customer shall make all reports required by law. Seller will not be liable for any special, indirect, incidental or consequential damages, whether arising from negligence, warranty, strict liability or otherwise.

USE RESTRICTIONS:

None of the above cylinders and/or equipment shall be sublet or loaned by the Customer, nor shall it be removed from the location of the job for which it was intended to be used as above set forth, nor shall it be removed from the county in which it was delivered to Customer, except by prior written consent of Seller. If the law requires the user to be licensed, Customer shall not use or permit use without such license. In the event of damage, breakage, or mechanical failure of said cylinders and/or equipment for any cause, Customer, at its own expense, shall forthwith return the cylinders and/or equipment to Seller. Customer is not authorized, without prior written consent of Seller, to expend any money or incur any expense for Seller's or Customer's account for repairs to said cylinders and/or equipment. Seller may terminate any lease at any time by tender to Customer of unused rent in which event Customer shall forthwith return cylinders and/or equipment to the Seller at such place, within the county, as the Seller shall designate. Customer shall, at its own expense, maintain liability and fire insurance and such other insurance as Seller may request at the time of such leasing. In the event of the insolvency or bankruptcy of the Customer, or in the event the Customer violates any of the terms hereof, or fails to return the cylinders and/or equipment or in the event the cylinders and/or equipment are levied upon by any legal process, such lease shall, without notice, immediately terminate and all rights of the Customer to possession of the cylinders and/or equipment shall immediately terminate. Seller may repossess the same or any part thereof with or without notice and with or without legal process, and Seller and its agents are hereby authorized to go upon Customer's property and remove impediments and may use all force necessary to repossess said cylinders and/or equipment, and Customer hereby, for itself and its employees expressly waives all damages and claims of damage or trespass, physical or pecuniary, caused by the Seller in the process of taking and removing said cylinders and/or equipment. In the event of any breach by the Customer hereunder, said Customer promises and agrees to pay all expenses of enforcement hereof and the costs of retaking said cylinders and/or equipment and the Seller shall be entitled to judgement for such expenses and for all rentals, merchandise, product and damages due hereunder, and for reasonable attorney's fees and court costs.

NOTICE OF NON-WAIVER:

The failure by the Seller, at any one or more time, to insist upon the strict performance by the Customer of the covenants, conditions and/or terms of this agreement, shall not be construed as a waiver of Seller's right to demand strict compliance with and performance of all covenants, conditions and/or terms hereof. Notice of demand for strict compliance is hereby waived by the Customer.

RETURNED MERCHANDISE:

Original invoice must accompany merchandise, product, cylinders or equipment returned for credit.

RESTOCKING:

Restocking and handling charges will be made on regularly inventoried merchandise, product, cylinders or equipment returned. Special order items are not subject to return for credit.

RENTED CYLINDERS AND ITEMS:

By accepting rented cylinders or rented equipment, Buyer agrees to: return rented cylinders to Seller on demand; be responsible for any loss of, or damage to, rented cylinders or equipment and to reimburse Seller at the current rate of charges for such loss or damage; indemnify Seller against all losses arising out of injuries to persons, or damage to property connected with the use of the rented cylinders or equipment and/or the contents of the cylinders; reimburse Seller for any reasonable cost and/or attorney's fees incurred by Seller in collecting payment due or enforcing the terms of these conditions, and be responsible for cylinders or equipment as to proper care, maintenance, loss of or damage to them (normal wear and tear expected) until they are returned to Seller. PLEASE NOTE: YOUR PAYMENT OF THIS INVOICE IS YOUR ACKNOWLEDGMENT THAT THE CYLINDER RENTAL BALANCE OF OUR CYLINDERS IN YOUR HANDS SHOWN ON THIS INVOICE IS CORRECT AT THE CLOSE OF BUSINESS ON THE DATE SHOWN ON THIS INVOICE.

CUSTOMER'S REPRESENTATION OF SOLVENCY:

Buyer represents to Seller that Buyer has not ceased to pay its debts in the ordinary course of business, that it can pay its debts as they become due, and that Buyer is solvent within the meaning of the federal bankruptcy act.

LITIGATION:

In the event of litigation, the prevailing party shall be entitled to be reimbursed for reasonable attorney's fees and costs of suit.

CLAIMS:

All claims for defective material, shortages and discrepancies are waived unless made in writing within 30 days of receipt of delivery.

SURCHARGES:

The total amount due from the Customer may include various itemized charges, including: charges for the handling of hazardous materials and for compliance with laws and regulations concerning hazardous materials; charges for handling, delivery and shipping; and/or charges for energy or fuel. None of the charges represent a tax or fee paid to or imposed by any governmental authority, and all of the charges are retained by Seller.

DISCLOSURE STATEMENT

In compliance with the Federal Truth-In Lending Act, if applicable, Buyer may be charged any amount approved by Seller's credit department, subject to the following conditions: NO LATE CHARGE IF THE ACCOUNT IS PAID WITHIN 30 DAYS. ALL INVOICES UNPAID 30 DAYS FROM DELIVERY ARE SUBJECT TO A LATE CHARGE OF 1.5% PER MONTH (ANNUAL PERCENTAGE RATE OF 18%) OR A MINIMUM OF \$1.00 ON THE BALANCE DUE.

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087167
Vendor Name: Praxair/Gas Tech
Invoice Number: 81931179
Invoice Date: 03/17/18
PO Number: B0352823
Check Number: 0234997
Check Amount: \$ 1,165.85
Check Date: 04/11/2018
Department ID: 00285
Reviewer Name: Bridget McFarland
Voucher Number: V0507946
Redaction Type: None
Document Type: AP Invoice

Document Below

From: cruseb199@cod.edu
Sent: Thu Apr 05 10:46:41 CDT 2018
To: invoicing@cod.edu
CC:
Subject: FW: Praxair Invoices

From: Lang, Jessica
Sent: Thursday, April 5, 2018 10:42 AM
To: Cruse, Bethany <cruseb199@cod.edu>
Subject: Praxair Invoices

Good Morning Bethany,

One of our coordinators received the attached invoices from Praxair. Our department did not order these supplies. I contacted the store and the only information they had was that it was from a Dave in Welding; could you please forward to whoever is in charge of invoices in that department?

Thank you,

Jessica Lang

Program Support Specialist, Biology and Health Sciences
College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137
630.942.2447 Direct | 630.942.8331 Office | 630.942.4222 Fax
langj@cod.edu

PAGE	CUSTOMER NUMBER	DATE	INVOICE NUMBER	AMOUNT DUE
1 OF 1	71529252	03/17/2018	81931179	92.95

Bill to
COLLEGE OF DUPAGE
RESPIRATORY DEPARTMENT
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

4618- 2/2: 4750 (A1)

REMITTANCE INSTRUCTIONS:
PLEASE SHOW INVOICE NUMBER AND DATE ON REMITTANCE, AND SEND TO:
PRAXAIR DISTRIBUTION, INC. DEPT CH 10660 PALATINE IL 60055-0660 800-266-4369

Ship to COLLEGE OF DUPAGE
425 22ND ST
OCCUPATIONAL VOCATIONAL DEPT
GLEN ELLYN IL 60137

AMOUNT ENCLOSED

71529252 81931179100000092955

PLEASE DETACH AND RETURN TO PRAXAIR FOR PAYMENT

APPROVED

QUESTIONS:
PLEASE REFER INQUIRIES REGARDING THIS INVOICE TO:
PRAXAIR DISTRIBUTION, INC. CUSTOMER SERVICE 12000 ROOSEVELT RD HILLSIDE IL 60162 800-266-4369

COMMENTS:
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INVOICE DETAIL AND PURCHASE DESCRIPTION				TERMS:		Net 30 Days			PAYMENT DUE: 4/16/2018		
ITEM NUMBER	ITEM DESCRIPTION	QTY SHIP	QTY RETN	BACK ORDER	UOM	VOL/WT	UNIT PRICE	AMOUNT	TAX Y/N		
INVOICE NO:81931179	CUSTOMER:71529252 DATE:3/17/2018										
SHIP FROM	70597,PXPKG HILLSIDE IL HS										
ORDER REFERENCE	57010000 DT 3/16/2018 PT# 76534618										
CUSTOMER PO / RELEASE											
SHIP VIA	Customer Pick Up										
	SHIP TO ACCOUNT: 76160710										
PRS14-35	CONTACT TIP 14-35 035 PRS	25			EA		0.9484	23.71	N		
PRS23-62	MIG NOZZLE 23-62 5/8 TWE PRS	2			EA		17.3108	34.62	N		
PRS23-50	MIG NOZZLE 23-50 1/2 TWE PRS	2			EA		17.3108	34.62	N		
<div>INVOICE REVIEWED OKAY TO PAY BRIDGET MCFARLAND 04/05/18</div>											
ACCOUNTS PAST DUE WILL BE CHARGED THE GREATER OF A SERVICE CHARGE OF \$1, OR A FINANCE CHARGE OF 1.5% PER MONTH (18% ANNUAL RATE) OF THE OUTSTANDING BALANCE, UNLESS OTHERWISE SPECIFIED IN THE CONTRACT.		PLEASE NOTE PAYMENT OF THIS INVOICE ACKNOWLEDGES THAT THE ABOVE SHIPMENTS, RETURNS, AND/OR BALANCE OF THE PRAXAIR CYLINDERS IN YOUR POSSESSION IS CORRECT AT THE CLOSE OF BUSINESS ON THE DATE SHOWN ON THIS INVOICE. PAYMENT RECEIVED WITHOUT INVOICE APPLICATION INSTRUCTIONS WILL BE APPLIED PER PRAXAIR'S DISCRETION AT ANY TIME AFTER THE NINETIETH DAY FOLLOWING PAYMENT RECEIPT.		SUBTOTAL		TAX AMOUNT		INVOICE AMOUNT			
				92.95		0.00		USD \$	92.95		

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087167
Vendor Name: Praxair/Gas Tech
Invoice Number: 81931177
Invoice Date: 03/17/18
PO Number: B0352823
Check Number: 0234997
Check Amount: \$ 1,165.85
Check Date: 04/11/2018
Department ID: 00285
Reviewer Name: Bridget McFarland
Voucher Number: V0507955
Redaction Type: None
Document Type: AP Invoice

Document Below

From: cruseb199@cod.edu
Sent: Thu Apr 05 10:46:41 CDT 2018
To: invoicing@cod.edu
CC:
Subject: FW: Praxair Invoices

From: Lang, Jessica
Sent: Thursday, April 5, 2018 10:42 AM
To: Cruse, Bethany <cruseb199@cod.edu>
Subject: Praxair Invoices

Good Morning Bethany,

One of our coordinators received the attached invoices from Praxair. Our department did not order these supplies. I contacted the store and the only information they had was that it was from a Dave in Welding; could you please forward to whoever is in charge of invoices in that department?

Thank you,

Jessica Lang

Program Support Specialist, Biology and Health Sciences
College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137
630.942.2447 Direct | 630.942.8331 Office | 630.942.4222 Fax
langj@cod.edu

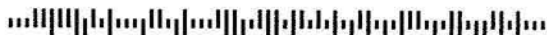
PAGE	CUSTOMER NUMBER	DATE	INVOICE NUMBER	AMOUNT DUE
1 OF 1	71529252	03/17/2018	81931177	237.00

REMITTANCE INSTRUCTIONS: PLEASE SHOW INVOICE NUMBER AND DATE ON REMITTANCE, AND SEND TO:
PRAXAIR DISTRIBUTION, INC. DEPT CH 10660 PALATINE IL 60055-0660 800-266-4369

Bill to
COLLEGE OF DUPAGE
RESPIRATORY DEPARTMENT
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

4618- 1/2: 4749 (A1)

Ship to
COLLEGE OF DUPAGE
425 22ND ST
OCCUPATIONAL VOCATIONAL DEPT
GLEN ELLYN IL 60137



AMOUNT ENCLOSED

71529252 81931177100000237008

PLEASE DETACH AND RETURN TOP PORTION WITH PAYMENT.

QUESTIONS:
PLEASE REFER INQUIRIES REGARDING THIS INVOICE TO:
PRAXAIR DISTRIBUTION, INC. CUSTOMER SERVICE 12000 ROOSEVELT RD HILLSDALE IL 60162 800-266-4369

COMMENTS:
<p>APPROVED</p> <p>04/09/18 - KRISTINE FAY</p> <p>Please note the format of your invoice has changed and now includes more information to help you manage your Praxair account.</p> <p>If you wish to receive the document electronically in the future, please contact us.</p> <p>Pay your bill online at www.praxairdirect.com/billpay or call 1-800-266-4369.</p>

INVOICE DETAIL AND PURCHASE DESCRIPTION		TERMS:		Net 30 Days			PAYMENT DUE: 4/16/2018		
ITEM NUMBER	ITEM DESCRIPTION	QTY SHIP	QTY RETN	BACK ORDER	UOM	VOL/WT	UNIT PRICE	AMOUNT	TAX Y/N
INVOICE NO:81931177	CUSTOMER:71529252 DATE:3/17/2018								
SHIP FROM	70597,PXPKG HILLSIDE IL HS								
ORDER REFERENCE	56751507 DT 3/16/2018 PT# 76438768								
CUSTOMER PO / RELEASE									
SHIP VIA	Customer Pick Up								
	SHIP TO ACCOUNT: 76160710								
TIL6230BS	JACKET FS 9OZ 30 BLUE SMAL	3			EA		22.00	66.00	N
TIL750S	GLOVES WELD GREY ELKSKIN SML	2			PR		28.50	57.00	N
TIL750M	GLOVES WELD GREY ELKSKIN MED	2			PR		28.50	57.00	N
TIL750M	GLOVES WELD GREY ELKSKIN MED	2			PR		28.50	57.00	N
INVOICE REVIEWED OKAY TO PAY BRIDGET MCFARLAND 04/05/18									
ACCOUNTS PAST DUE WILL BE CHARGED THE GREATER OF A SERVICE CHARGE OF \$1.00 OR A FINANCE CHARGE OF 1.5% PER MONTH (18% ANNUAL RATE) OF THE OUTSTANDING BALANCE, UNLESS OTHERWISE SPECIFIED IN THE CONTRACT.		PLEASE NOTE PAYMENT OF THIS INVOICE ACKNOWLEDGES THAT THE ABOVE SHIPMENTS, RETURNS, AND/OR BALANCE OF THE PRAXAIR CYLINDERS IN YOUR POSSESSION IS CORRECT AT THE CLOSE OF BUSINESS ON THE DATE SHOWN ON THIS INVOICE. PAYMENT RECEIVED WITHOUT INVOICE APPLICATION INSTRUCTIONS WILL BE APPLIED PER PRAXAIR'S DISCRETION AT ANY TIME AFTER THE NINETIETH DAY FOLLOWING PAYMENT RECEIPT.		SUBTOTAL		TAX AMOUNT		INVOICE AMOUNT	
				237.00		0.00		USD \$	237.00