

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1087629  
Vendor Name: Pocket Nurse  
Invoice Number: 1066539-1  
Invoice Date: 06/22/18  
PO Number: P0358607  
Check Number: E0068120  
Check Amount: \$ 40.00  
Check Date: 07/11/2018  
Department ID: 64001  
Reviewer Name: Yvonne Bedford  
Voucher Number: V0517328  
Redaction Type: None  
Document Type: AP Invoice

Document Below

-----  
From: mkosanovich@pocketnurse.com  
Sent: Fri Jun 22 15:38:42 CDT 2018  
To: invoicing@cod.edu  
CC:  
Subject: Invoice 1066539 for 011855 College Of Dupage  
-----

See the Following attached Files:e00162304.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 : **1066539-1**

Customer# : 011855

Invoice Date : 06/22/2018

Due Date : 07/22/2018

Ordered By : J. Towne

Entered By : Ashlee Shirley

Account Manager : Terry Kitchen

Terms : NET 30

Shipping Method : Ground

Ship Acct# :

Customer PO : 358607

Phone: (630) 942-2229

Ship to: College of DuPage

425 Fawell Blvd

Warehouse Manager

GLEN ELLYN, IL 60137

**APPROVED**

**07/02/18 - JOANNE IVORY**

Phone: (630) 942-2576

Attn: Danielle Kuglin SRC-1111

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 NIPA Contract R140102

Line	Order	Ship	B/O	U/M	Item #	Description	Price	Per	Extension
0001	50	50	0	EA	06-93-0631	Demo Dose® Steril Water for Injection 20mL	0.80	EA	40.00
Package Information:						Tracking #	Weight		
						448983641757	4.05		

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 40.00

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

Total 40.00