

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1083835
Vendor Name: Carlson Paint, Glass and
Invoice Number: G 140854
Invoice Date: 06/25/18
PO Number: P0358572
Check Number: E0068229
Check Amount: \$ 2,344.00
Check Date: 07/19/2018
Department ID: 00709
Reviewer Name: Kathy Striplin
Voucher Number: V0519233
Redaction Type: None
Document Type: AP Invoice

Document Below

INVOICE

CARLSON'S GLASS INC.

312 W. FRONT ST. carlsonsglass@sbcglobal.net

WHEATON IL. 60187 (630) 668-7234

INVOICE

INVOICE / ORDER NUMBER : G 140854

This copy printed at: 6/25/2018 9:16:52 AM

Account :

College of DuPage, Dist #502 (COD)

425 22nd Street

Glen Ellyn, IL 60137-6599

phone # 630-858-2800

Tax #

JOB:

, College of Dupage

Phone # 630-942-2320

PO # 358572

Physical Education Building HSC 9A

schacht@cod.edu -- Bryan

Glen Ellyn, IL 60137

Items:

Alternative 1

Quantity	Size
1	95 7/8 x 82

materials

Weight Room

Remove existing broken mirror and dispose.

Furnish new 1/4" mirror with polished edges and install on existing plywood backing within 30 days.

NOTE: Customer needs to move weight rack out of the way before we install the new mirror.

Item total
\$1,194.00

Quantity

X 1

Quantity Total
\$1,194.00

Subtotal for Alt # 1 :

Subtotal for Alt # 1

\$1,194.00

Please pay total amount indicated for the above work, as per estimate or current pricing:

TOTAL DUE: \$1,194.00

The above price includes material, tax(if applicable), labor, and any discounts (if applicable).

A 1 1/2% monthly service charge will be applied to any amount not paid in 30 days.

INVOICE REVIEWED

OKAY TO PAY

KATHY STRIPLIN 07/12/18

ORDER NUMBER :
140854

College of Dupage

Page # 1 of 1 Pages

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1083835
Vendor Name: Carlson Paint, Glass and
Invoice Number: G 141276
Invoice Date: 06/25/18
PO Number: P0357572
Check Number: E0068229
Check Amount: \$ 2,344.00
Check Date: 07/19/2018
Department ID: 00709
Reviewer Name: Kathy Striplin
Voucher Number: V0519234
Redaction Type: None
Document Type: AP Invoice

Document Below

INVOICE

CARLSON'S GLASS INC.
312 W. FRONT ST. carlsonsglass@shcglobal.net
WHEATON IL. 60187 (630) 668-7234

INVOICE

INVOICE / ORDER NUMBER : G 141276

This copy printed at: 6/25/2018 9:49:48 AM

Account :

College of DuPage, Accounts Payable
425 22nd Street
Glen Ellyn, IL 60137

phone # 630-942-2228, 858-9399 FAX

Tax #

JOB:

ssc #1201, College of DuPage

Phone # 630-673-0024

PO # 358572

Student Service Center

Schacht@cod.edu

Glen Ellyn, IL 60137

Items:

Alternative

Quantity Size
1 49 1/8 x 26 1/2 x
7/16

materials
3/8" Tempered Glass

Furnish new 3/8" tempered glass and install into existing window frame:

Item total		X	Quantity		=	Quantity Total
\$458.00			1			\$458.00

Subtotal for Alt # 1 :

Subtotal for Alt # 1

\$458.00

Please pay total amount indicated for the above work, as per estimate or current pricing:

TOTAL DUE: \$458.00

The above price includes material, tax(if applicable), labor, and any discounts (if applicable).

A 1 1/2% monthly service charge will be applied to any amount not paid in 30 days.

INVOICE REVIEWED
OKAY TO PAY
KATHY STRIPLIN 07/12/18

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1083835
Vendor Name: Carlson Paint, Glass and
Invoice Number: G 140853
Invoice Date: 06/25/18
PO Number: PO358572
Check Number: E0068229
Check Amount: \$ 2,344.00
Check Date: 07/19/2018
Department ID: 00709
Reviewer Name: Kathy Striplin
Voucher Number: V0519235
Redaction Type: None
Document Type: AP Invoice

Document Below

INVOICE

CARLSON'S GLASS INC.
 312 W. FRONT ST. carlsonsglass@sbcglobal.net
 WHEATON IL. 60187 (630) 668-7234

INVOICE

INVOICE / ORDER NUMBER : G 140853

This copy printed at: 6/25/2018 9:51:05 AM

Account :

College of DuPage, Dist #502 (COD)

phone # 630-858-2800

425 22nd Street

Glen Ellyn, IL 60137-6599

Tax #

JOB:

, College of DuPage

Phone # 630-673-0024

PO # 358572

Seton Center SCC Building

Glen Ellyn, IL 60137

Items:**Alternative 1**

Quantity	Size	materials	Item total	Quantity	Quantity Total
1	50 3/4 x 29 5/16 x 1/2"	Furnish new 1/2" clear tempered glass with flat polish edges. Install to existing railing frame on terrace.	\$692.00	1	\$692.00

Subtotal for Alt # 1 :

Subtotal for Alt # 1

\$692.00

Please pay total amount indicated for the above work, as per estimate or current pricing:

-TOTAL DUE: - \$692.00

The above price includes material, tax(if applicable), labor, and any discounts (if applicable).

A 1 1/2% monthly service charge will be applied to any amount not paid in 30 days.

INVOICE REVIEWED**OKAY TO PAY****KATHY STRIPLIN 07/12/18**