

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087629

Vendor Name: Pocket Nurse

Invoice Number: 1070832-1

Invoice Date: 08/06/18

PO Number: P0359506

Check Number: E0068752

Check Amount: \$ 234.45

Check Date: 08/15/2018

Department ID: 00225

Reviewer Name:

Voucher Number: V0522840

Redaction Type: None

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

Document Below

# Invoice

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

**3 WAY MATCH**

Phone: (630) 942-2229  
 Ship to: College of DuPage  
 425 FAWELL BLVD  
 Shipping & Receiving  
 GLEN ELLYN, IL 60137-6784

Phone: (630) 942-2576  
 Attn: Janelle Walker/PO359506

Invoice Number : **1070832-1**

Customer# : 011855

Invoice Date : 08/06/2018

Due Date : 09/05/2018

Ordered By : J. Towne

Entered By : Brenda Gaona

Account Manager : Terry Kitchen

Terms : NET 30

Shipping Method : Ground

Ship Acct# :

Customer PO : 359506

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 Free shipping on all FEDEX ground orders Does not include freight, drop-ships, or requested expedited shipping charges

Pricing based on NIPA Contract R140102

Line	Order	Ship	B/O	U/M	Item #	Description	Price	Per	Extension
0001	4	2	2	PK	06-54-0001	IV Time Label Flo-Meter® 1000mL	6.30	PK	12.60
0002	10	10	0	EA	05-87-2002-12FR	Pocket Nurse® Closed Insert Foley Tray NS and LF	11.37	EA	113.70
0003	20	20	0	EA	06-93-1020-1000ML	Demo-Dose® .9PCT NaCl IV Fluid	2.10	EA	42.00
0004	10	10	0	EA	06-93-1100	Demo Dose® EPINEPHrin Adrenaln 10mL Syringe	2.94	EA	29.40
0005	25	25	0	EA	06-93-1422	Demo Dose® Vitamn K 1mg/0.5mL Vial 1mL	1.47	EA	36.75
Package Information:						Tracking #	Weight		
						455002038118	2.75		
						455002038015	20.05		
						455002037980	29.20		
						455002037924	7.20		

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 234.45

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

Total 234.45

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From: mkosanovich@pocketnurse.com  
Sent: Mon Aug 06 15:02:40 CDT 2018  
To: invoicing@cod.edu  
CC:  
Subject: Invoice 1070832 for 011855 College Of Dupage  
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See the Following attached Files:e00177969.pdf

Please contact [accounting@pocketnurse.com](mailto: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](mailto:cs@pocketnurse.com) or 1-800-225-1600, option 1.

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