

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1555600
Vendor Name: Alexian Brothers Ambulatory Gr
Invoice Number: 659197
Invoice Date: 08/01/18
PO Number: B0359764
Check Number: E0068953
Check Amount: \$ 348.00
Check Date: 08/29/2018
Department ID: 00797
Reviewer Name:
Voucher Number: V0523669
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

V 523669

Alexian Brothers Medical Group
25466 Network Place
Chicago, IL 60673-1254

RECEIVED

AUG 13 2018

BO# 359764

OK to pay

APPROVED 08/22/18

Must have Mia's approval/signature
HUMAN RESOURCES

Invoice

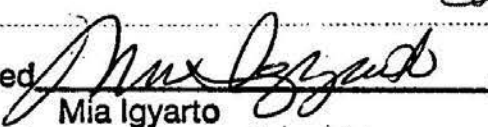
AP VERIFIED

08/24/18 - MARIA ZERRUDO

Please have Mia or Beth approve this invoice

and route it back. Thank you 8/22/18

Invoice # 659197

Proc Code	Date	Description	Qty	Charge	Receipt	Adjust	Balance
99201	07/27/2018	Physical Exam Occupational Health	1.00	50.00			50.00
99450	07/27/2018	Back Evaluation/Lift Test	1.00	45.00			45.00
Katherine Schutz 900-20-6210 Balance Due:							95.00
99201	07/31/2018	Physical Exam Occupational Health	1.00	50.00			50.00
99450	07/31/2018	Back Evaluation/Lift Test	1.00	44.00			44.00
Anthony Spears 900-20-6420 Balance Due:							94.00
Approved  Mia Igyarto							Invoice # 659197 Balance Due: 189.00

INVOICE REVIEWED
OKAY TO PAY
JACQUELYN CAMPAGNOLO 08/21/

Cut and return with payment

Please remit 189.00 to

Please place invoice number 659197 on check

Alexian Brothers Corporate Health Services
25466 Network Place
Chicago, IL 60673-1254
Phone: 847-506-6670

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1555600

Vendor Name: Alexian Brothers Ambulatory Gr

Invoice Number: 659036

Invoice Date: 08/01/18

PO Number: B0359764

Check Number: E0068953

Check Amount: \$ 348.00

Check Date: 08/29/2018

Department ID: 00797

Reviewer Name:

Voucher Number: V0523670

Redaction Type: None

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

Document Below

Alexian Brothers Medical Group
25466 Network Place
Chicago, IL 60673-1254

V523670

BO#

359764

RECEIVED

Must have Mia's approval/signature

AUG 13 2018

ok to pay
[Signature]

Invoice
August 01, 2018

HUMAN RESOURCES

Bill to: Michelle Olson Rzeminski
College of DuPage
425 Fawell Blvd.
Glen Ellyn, IL 60137-

For: College of DuPage
addison screenings 7/18

Please have Mia or Beth approve this invoice
and route it back. Thanks 8/22/18

Invoice # 659036

Proc Code	Date	Description	Qty	Charge	Receipt	Adjust	Balance
80305	07/26/2018	5 Panel Rapid Drug Screen	1.00	45.00		-45.00	
92551	07/26/2018	Audiogram	1.00	30.00			30.00
99172	07/26/2018	Eye Exam - Ishihara	1.00	35.00			35.00
99201	07/26/2018	Physical Exam Occupational Health	1.00	50.00			50.00
99450	07/26/2018	Back Evaluation/Lift Test	1.00	44.00			44.00

[Signature] Michael G Kellenberger 900-20-6095 Balance Due: 159.00

Invoice # 659036 Balance Due: 159.00

APPROVED 08/22/18

Approved

[Signature]
Mia Igyarto

AP VERIFIED
08/24/18 - MARIA ZERRUDO

Cut and return with payment

INVOICE REVIEWED

Please remit 159.00 to Alexian Brothers Corporate Health Services

Please place invoice number 659036 on check

OKAY TO PAY

JACQUELYN CAMPAGNOLO 08/2