

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1082249

Vendor Name: Advanced Rehabilitation

Invoice Number: 00269218

Invoice Date: 11/09/18

PO Number: P0360702

Check Number: E0070292

Check Amount: \$ 664.20

Check Date: 11/14/2018

Department ID: 00237

Reviewer Name:

Voucher Number: V0542455

Redaction Type: None

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

Document Below

-----  
From: jstengele@ptstuff.com  
Sent: Mon Nov 12 14:44:24 CST 2018  
To: invoicing@cod.edu  
CC:  
Subject: Invoice 00269218 From Advanced Rehabilitation Systems,  
-----

Please see attached for your invoice.

Please let me know if you have any questions.

Thanks.

Bob Jr  
Advanced Rehab Systems  
800-998-3383



We Keep You Moving!

Planning | Delivery | Installation | Maintenance

Invoice #: 00269218

325 RocBaar Drive, Romeoville, IL 60446  
PH: 800-998-3383 Fax: 888-329-2771 PTSuff.com

**3 WAY MATCH**

Bill To:

College of DuPage  
425 Fawell  
ATTN: Accounts Payable  
Glen Ellyn, IL 60137-6599

Ship To:

College of DuPage  
425 Fawell  
Attn: Shipping & Receiving  
Glen Ellyn, IL 60137

SALESPERSON		YOUR PO#	SHIP VIA	SHIP DATE	DUE DATE		DATE	PG.
		360702			12/9/2018		11/9/2018	1
QTY.	ITEM NO.	DESCRIPTION	PRICE	UNIT	DISC %	EXTENDED	TX.	
24	026350	Advanced Therapy Lotion: 8oz	\$10.95	ea		\$262.80		
4	061242	Legacy BP Cuff, Adult: Black	\$43.00	ea		\$172.00		
4	061252	Adult Blood Pressure Kit, LF	\$31.85	ea		\$127.40		
1	061241	Legacy BP Cuff, Child/Black	\$39.00	ea		\$39.00		
1	061243	Legacy BP Cuff, Large Adult	\$54.00	ea		\$54.00		
email invoices				SALE AMT.		\$655.20		
				FREIGHT		\$9.00		
				SALES TAX		\$0.00		
				TOTAL AMT.		\$664.20		
				PAID TODAY		\$0.00		
				BALANCE DUE		\$664.20		