

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1082014
Vendor Name: American Dental Association
Invoice Number: 2492644
Invoice Date: 02/28/20
PO Number: P0369013
Check Number: 0266569
Check Amount: \$ 286.85
Check Date: 04/14/2020
Department ID: 00153
Reviewer Name:
Voucher Number: V0609818
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: langj@cod.edu
Sent: Fri Mar 20 13:25:02 CDT 2020
To: invoicing@cod.edu
CC:
Subject: FW: ADA Order Confirmation

Good Afternoon,

Please see attached invoice.

Thanks,

Jessica Lang

Program Support Specialist, Nursing and Health Sciences
College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137
630.942.2447 Direct | 630.942.8331 Office | 630.942.4222 Fax
langj@cod.edu

From: Conley, Cynthia <fiskc@cod.edu>
Sent: Friday, March 20, 2020 12:52 PM
To: Lang, Jessica <langj@cod.edu>
Subject: Fw: ADA Order Confirmation

Here is another one.

Thank you Jess,
Cindy

From: accountsreceivable <accountsreceivable@ada.org>
Sent: Friday, March 20, 2020 11:48:30 AM
To: Conley, Cynthia
Cc: Caron, Phillip
Subject: RE: ADA Order Confirmation

Here is a copy of the invoice you requested.

Josielen Calloway callowayj@ada.org
Accounts Receivable Analyst
Accounting Department
312.440.2610

American Dental Association 211 E. Chicago Ave. Chicago, IL 60611 www.ada.org

From: ADA Catalog
Sent: Friday, March 20, 2020 11:44 AM
To: accountsreceivable <accountsreceivable@ada.org>
Subject: FW: ADA Order Confirmation

Good morning –

It looks like Cindy needs her invoice for order **2492644**. Can you help her out with this?

Best,
Phil
Member Service Advisor
Member Service Center
312.440.2500

American Dental Association 211 E. Chicago Ave. Chicago, IL 60611 www.ada.org

From: Conley, Cynthia [mailto:fiskc@cod.edu]
Sent: Thursday, March 19, 2020 9:38 AM
To: ADA Catalog <catalog@ada.org>
Subject: Re: ADA Order Confirmation

Hi,
Can I get an invoice for this order emailed to me.
PO 369013 College of DuPage dental hygiene.
Thank you,
Cindy Conley

From: ADA Order Confirmation <catalog@ada.org>
Sent: Saturday, February 29, 2020 5:10:10 AM
To: Conley, Cynthia
Cc: Conley, Cynthia
Subject: ADA Order Confirmation



ORDER CONFIRMATION

Thank you for your ADA order.

2/28/2020

BILLING ADDRESS:

Cindy Conley
425 Fawell Blvd
Glen Ellyn, IL 60137-6708 United States

SHIPPING ADDRESS:

Cindy Conley
425 Fawell Blvd
Glen Ellyn, IL 60137-6708 United States

Order #: 2492644

Member Service Center Representative: Glenda Mixon

Product #	Name	Quantity	Price
J120BT	Fluoridation Facts	1	\$29.95
W510	Mouthguards and Sports Safety	1	\$28.00
P033	The ADA Practical Guide to Soft Tissue Oral Disease, Second Edition	1	\$99.95
W292	Sip and Snack All Day? Risk Decay!	1	\$28.00

Ship To:

College of Dupage - Dental Hygiene
425 Fawell Blvd
Shipping & Receiving
c/o Cindy Conley
Glen Ellyn, IL 60137-6708

Invoice Number: 2492644

Order Date: 02/28/2020

Customer Number: 544135

3 WAY MATCH

Bill To:

College of Dupage - Dental Hygiene
425 Fawell Blvd
Accounts Payable, SRC2049
Glen Ellyn, IL 60137-6708

AMOUNT DUE: \$286.85

ADA Customer ID #	Customer PO	Payment Method	Payment Term
544135	369013	Purchase Order	Due Upon Receipt
Representative	Shipping Method	Ship Date	
Glenda Mixon	UPS Ground commercial	03/02/2020	
Quantity	Item Description	Unit Price	Extended
1	J120BT - Fluoridation Facts	\$29.95	\$29.95
1	W510 - Mouthguards and Sports Safety	\$28.00	\$28.00
1	P033 - The ADA Practical Guide to Soft Tissue Oral Disease, Second Edition	\$99.95	\$99.95
1	W292 - Sip and Snack All Day? Risk Decay!	\$28.00	\$28.00
1	W297 ¿Bebidas y refrigerios todo el día? ¡Pues caries puede haber! (Sip and Snack All Day? Risk Decay!)	\$28.00	\$28.00
1	W613 - Scaling and Root Planing: A Treatment for Gum Disease	\$28.00	\$28.00
1	W299 - Destartraje y Alisado Radicular (Scaling and Root Planing)	\$28.00	\$28.00

Please remit check payments to:

American Dental Association
28094 Network Place
Chicago, IL 60673-1280

Subtotal	\$269.90
Sales Tax	\$0.00
Shipping/Handling	\$16.95
Grand Total	\$286.85
Payment Total	\$0.00
Amount Due	\$286.85

To pay with credit card, please complete the information below and either mail it to the remit address above, or fax to 312-440-2567. You may also call 1-800-947-4746 for any billing questions.

Circle One: Visa Mastercard American Express

Card Number: _____

Name on Card: _____

Signature of Card Holder: _____

Contact Phone #: _____

Expiration Date: _____

W292	Sip and Snack All Day? Risk Decay!	1	\$28.00
W297	¿Bebidas y refrigerios todo el día? ¡Pues caries puede haber! (Sip and Snack All Day? Risk Decay!)	1	\$28.00
W613	Scaling and Root Planing: A Treatment for Gum Disease	1	\$28.00
W299	Destartraje y Alisado Radicular (Scaling and Root Planing)	1	\$28.00

Subtotal: \$269.90

Taxes: \$0.00

Shipping: \$16.95

Handling: \$0.00

Discount: \$0.00

Total:
\$286.85

Thank you for your order. If you ordered an ADA Catalog **e-Book, e-Book bundle or streaming video**, please click here to go to your e-Bookshelf.

PLEASE DO NOT REPLY TO THIS EMAIL AS THIS IS AN OUTBOUND EMAIL BOX ONLY
IF YOU HAVE QUESTIONS PLEASE CALL THE ADA MEMBER SERVICE CENTER AT
800.947.4746