

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1532212

Vendor Name: PSI Services Inc.

Invoice Number: 412681

Invoice Date: 03/10/20

PO Number: P0369041

Check Number: 0266701

Check Amount: \$ 3,060.00

Check Date: 04/14/2020

Department ID: 00257

Reviewer Name:

Voucher Number: V0616913

Redaction Type: None

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

Document Below

From: langj@cod.edu
Sent: Tue Apr 07 11:44:16 CDT 2020
To: invoicing@cod.edu
CC:
Subject: PSI Service Invoice

Hello,

I don't believe this ever went through Perceptive.

Thank you,

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

Lang, Jessica

From: Coe, Barb
Sent: Wednesday, March 11, 2020 5:30 PM
To: Lang, Jessica
Subject: FW: Your Logic eXtension Resources Order (Invoice)

Jessica,

All tests that were ordered are accounted for. You can pay this invoice at any time. If you need anything from me, don't hesitate to reach out to me.
b

AP VERIFIED
04/09/20 - BETHANY CRUSE

On 3/10/20, 2:00 PM, "LXROrders@goAMP.com" <LXROrders@goAMP.com> wrote:

This is your order summary. An invoice will be sent within 24 hours.

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INVOICE 412681

Order Date: 3/10/2020 1:13:25 PM
Account: Barbara Coe (coebarb@cod.edu)
Reference/PO: 369041

Due Date: 5/9/2020

Item	Description	Qty	UnitPrice	Price
WT2-6343-F-1767	Secure Comprehensive Therapist Multiple-Choice SAE (Form 2020)	34	\$45.00	\$1,530.00





* YOU WILL RECEIVE AN ADDITIONAL E-MAIL
WITH FURTHER INSTRUCTIONS.



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Wayne Weith (ID: 844527428)



WT2-6

45.00 \$1,530.00

Effective: 3/10/2020 through 6/8/2020

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Effective: 3/10/2020 through 6/8/2020

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Carl Ehl (ID: 111422772)





WITH FURTHER INSTRUCTIONS.





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Subtotal: \$3,060.00

TOTAL: \$3,060.00

BALANCE DUE: \$3,060.00 NBRC Net 60

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Please remit payment to:
AMP Corporate Headquarters
18000 W. 105th Street
Olathe, KS 66061-7543

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To avoid late fee, please submit the balance in full for our receipt prior to the due date.
Checks should be made payable to Applied Measurement Professionals, Inc.; please write invoice number on check.
To arrange for payment by credit card, call our office at the number below.
Late fees of 1.25% of the balance due will be added monthly for accounts 60 days past due.

Federal Tax ID: 48-0940267

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A few reminders about our store:

Web tests and surveys are delivered electronically--NOTHING is shipped. (A SEPARATE E-MAIL PROVIDES INSTRUCTIONS FOR EACH WEB TEST OR SURVEY ORDERED.)

For questions about your order, please contact:
Email: orders@lrx.com
Phone: 913-895-4828 (between the hours of 8:30a and 5:00p CST.)

****NEVER PROVIDE YOUR CREDIT CARD INFORMATION BY EMAIL****

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Applied Measurement Professionals, Inc.

Dilyss Gallyot

GL#: 01-10-00257-S401002