

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1602952
Vendor Name: Acadental Inc
Invoice Number: 43831
Invoice Date: 03/25/20
PO Number: P0369377
Check Number: E0079756
Check Amount: \$ 407.50
Check Date: 04/08/2020
Department ID: 00153
Reviewer Name: Jessica Lang
Voucher Number: V0614661
Redaction Type: None
Document Type: AP Invoice

Document Below

From: acctpay@cod.edu
Sent: Fri Mar 27 09:33:51 CDT 2020
To: invoicing@cod.edu
CC:
Subject: FW: Acadental invoice

From: cwellman@acadental.com <cwellman@acadental.com>
Sent: Thursday, March 26, 2020 2:23 PM
To: Accounts Payable <acctpay@cod.edu>
Subject: Acadental invoice



PO Box 19567
Lenexa KS 66285
913-384-7390 Fax: 913-291-0428
sales@acadental.com
www.acadental.com

INVOICE

43831

3/25/2020

Remit To: Acadental, Inc. P.O. Box 19567, Lenexa, KS 66285

BILL TO:

College of DuPage Accounts Payable
425 Fawll Blvd.
Glen Ellyn IL 60137 UNITED STATES

SHIP TO:

College of DuPage Shipping & Receiving
425 Fawell Blvd.
Cindy Conley
Glen Ellyn IA 60137 UNITED STATES

TERMS: NET 30

DUE DATE: 4/24/2020

Quantity	Item Number	Description	FOB:	PREPAID&ADD
Pack Slip #	PO# 369377	Order Date	Ship Via: FedEx Ground	Price
				Extension

43077	1	MP_DH520CT 369377	ModuPRO DH Calibration w/ articulator Misc. Comment:	395.500000 EACH	395.50
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APPROVED
04/01/20 - DILYSS GALLYOT

INVOICE REVIEWED
OKAY TO PAY
JESSICA LANG 03/27/20

All Prices Are Shown in United States Dollar

Return Policy:

You may return any unused product within 30 days of the invoice date. A return authorization number and a copy of the original invoice must accompany all returns. Additional information on Acadental's return policy can be found at <http://www.acadental.com/policies>
You are responsible for ensuring the product(s) you have ordered properly fit to where they will be used.

Subtotal:	395.50
Tax:	0.00
Freight:	12.00
Total:	407.50

Thank You