

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1087487  
Vendor Name: Patterson Dental  
Invoice Number: 3003787726  
Invoice Date: 03/09/20  
PO Number: B0365216  
Check Number: E0079972  
Check Amount: \$ 94.95  
Check Date: 04/29/2020  
Department ID: 00153  
Reviewer Name: Jessica Lang  
Voucher Number: V0620917  
Redaction Type: None  
Document Type: AP Invoice

Document Below

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From: langj@cod.edu  
Sent: Tue Apr 21 16:19:50 CDT 2020  
To: invoicing@cod.edu  
CC: fiske@cod.edu  
Subject: FW: patterson  
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**From:** Conley, Cynthia <fiske@cod.edu>  
**Sent:** Tuesday, April 21, 2020 3:36 PM  
**To:** invoicing@cob.edu  
**Cc:** Lang, Jessica <langj@cod.edu>  
**Subject:** patterson





COLLEGE OF DUPAGE-HYGIENE  
DENTAL HYGIENE DEPARTMENT  
125 FAIRVIEW AVE

GLEN ELLYN IL 60137-6708  
US

Patterson Dental Supply, Inc.  
1226 MICHAEL DRIVE SUITE G  
WOOD DALE IL 60191-1005

US

## INVOICE

Order #	Pack Slip #	Invoice #
0611201662	8006312163	3003787726

Ship Date: Mar 9, 2020 11:41:54 AM

Invoice Date: Mar 9, 2020

Customer P.O.: BO 365 216

Shipped From:

Patterson Logistics Services, Inc.

1905 LAKEWOOD DR

BOONE IA 50036-7604

US

**APPROVED**

Customer #: 0200085769

**04/28/20 - KIRK OVERSTREET**

630-616-8202

Anthony Skrobowski

Product #	Ordered	Shipped	Unit	Vendor	Vendor #:	Description	Unit Price	Amount	TAX
71446236	3.000	3.000	BX	BRAVAL	1446236	MASK EARLOOP LEVEL 1 WHITE 50/BX	\$ 5.99	\$ 17.97	
71446251	3.000	3.000	BX	BRAVAL	1446251	MASK EARLOOP LEVEL 3 WHITE 50/BX	\$ 6.69	\$ 20.07	

**INVOICE REVIEWED  
OKAY TO PAY  
JESSICA LANG 04/22/20**

Total 6 6

Terms of Payment  
Net Due 30 Days from Inv. Date

Remit Payment to:  
Patterson Dental Supply, Inc.  
28244 Network Place  
Chicago IL 60673-1282

We apologize if your infection control product order has not been delivered in full. Patterson Dental is implementing special measures to ensure continuity of supply. These items are being monitored as we work with our manufacturing and Patterson Dental supply chain teams to meet the order needs of all Patterson customers. ALL SALES OF MASKS ARE FINAL AND NOT RETURNABLE. Customer may be obligated under federal law to disclose information from this invoice to Medicare, Medicaid, or similar state, federal or private payers for payment or review if any prices for products provided herein subject to or reflect credits, rebates, discounts, or other price reductions. Patterson has made DSCSA/state law transaction statements, info and history documents available to you by TraceLink. Enter <https://app.tracelink.com/login> into your web browser, to access this info. A one-time registration is required.

Sub Total		\$ 38.04
Local Tax	0%	\$0.00
State Tax	0%	\$0.00
Shipping and Handling		\$ 1.84
Discount		\$ 1.84-

Total \$ 38.04



Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1087487  
Vendor Name: Patterson Dental  
Invoice Number: 3003772089  
Invoice Date: 03/06/20  
PO Number: B0365216  
Check Number: E0079972  
Check Amount: \$ 94.95  
Check Date: 04/29/2020  
Department ID: 00153  
Reviewer Name: Jessica Lang  
Voucher Number: V0620923  
Redaction Type: None  
Document Type: AP Invoice

Document Below

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From: langj@cod.edu  
Sent: Tue Apr 21 16:19:37 CDT 2020  
To: invoicing@cod.edu  
CC: fiske@cod.edu  
Subject: FW: patterson  
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**Subject:** patterson





COLLEGE OF DUPAGE-HYGIENE  
DENTAL HYGIENE DEPARTMENT  
425 FAWELL AVE  
GLEN ELLYN IL 60137-6708  
US

Patterson Dental Supply, Inc.  
1226 MICHAEL DRIVE SUITE G  
WOOD DALE IL 60191-1005  
US

## INVOICE

Order #	Pack Slip #	Invoice #
0611189678	8006296196	3003772089

Ship Date: Mar 6, 2020 4:24:10 PM

Invoice Date: Mar 6, 2020

Customer P.O.: BO 365 216

Shipped From:

Patterson Logistics Services, Inc.

7055 CLEVELAND RD

SOUTH BEND IN 46628-7724

US

Customer #: 0200085769

Bill Contact: 250-4135  
Loyalty Status: Institution

Telephone: 630-616-8202  
Representative: Anthony Skrobowski

**APPROVED**  
**04/28/20 - KIRK OVERSTREET**

Product #	Ordered	Shipped	Unit	Vendor	Vendor #:	Description	Unit Price	Amount	TAX
71446202	3.000	3.000	BX	BRAVAL	1446202	MASK EARLOOP LEVEL 1 BLUE 50/BX	\$ 5.99	\$ 17.97	
71446244	3.000	3.000	BX	BRAVAL	1446244	MASK EARLOOP LEVEL 2 BLUE 50/BX	\$ 6.29	\$ 18.87	
71446269	3.000	3.000	BX	BRAVAL	1446269	MASK EARLOOP LEVEL 3 TEAL 50/BX	\$ 6.69	\$ 20.07	
71446210	3	0	BX	BRAVAL	1446210	MASK EARLOOP LEVEL 1 PINK 50/BX			
						Shipped from Boone Dental FC			
71446236	3	0	BX	BRAVAL	1446236	MASK EARLOOP LEVEL 1 WHITE 50/BX			
						Shipped from Mt. Joy Dental FC			
71446251	3	0	BX	BRAVAL	1446251	MASK EARLOOP LEVEL 3 WHITE 50/BX			
						Shipped from Mt. Joy Dental FC			
<b>INVOICE REVIEWED</b>									
<b>OKAY TO PAY</b>									
<b>JESSICA LANG 04/22/20</b>									
We apologize if our selection of products does not meet your needs in full. Patterson Dental is implementing several measures to ensure continuity of supply. These items are being monitored as we work with our manufacturing and Patterson Dental supply chain teams to meet the order needs of all Patterson customers. ALL SALES OF MASKS ARE FINAL AND NOT RETURNABLE. Customer may be obligated under federal law to disclose information from this invoice to Medicare, Medicaid, or similar state, federal or private payers for payment or review if any prices for products provided herein subject to or reflect credits, rebates, discounts, or other price reductions. Patterson has made DSCSA/state law transaction statements, info and history documents available to you by TraceLink. Enter <a href="https://app.tracelink.com/login">https://app.tracelink.com/login</a> into your web browser, to access this info. A one-time registration is required.									
Terms of Payment									
Net Due 30 Days from Inv. Date									
Remit Payment to:									
Patterson Dental Supply, Inc.									
28244 Network Place									
Chicago IL 60673-1282									
Total								\$ 56.91	
Local Tax							0%	\$ 0.00	
State Tax							0%	\$ 0.00	
Shipping and Handling								\$ 5.42	
Discount								\$ 5.42-	
Total								\$ 56.91	