

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1545259
Vendor Name: United States Cylinder Gas
Invoice Number: 342792
Invoice Date: 01/31/20
PO Number:
Check Number: E0079980
Check Amount: \$ 28.80
Check Date: 04/29/2020
Department ID: 00258
Reviewer Name:
Voucher Number: V0602540
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

AP VERIFIED

04/22/20 - ISABEL BARRIOS

Gonzalez, Colleen

From: acctpay@cod.edu
Sent: Monday, February 3, 2020 3:29 PM
To: Gonzalez, Colleen
Subject: Voucher Confirmation: V0602540

Voucher Number V0602540

Voucher Status In Progress (Unfinished)

Requestor Name Ms Colleen E. Gonzalez

Voucher Date 02/03/20

Due Date 03/05/20

Vendor ID and/or Name 1545259 United States Cylinder Gas
D/B/A US Gas

AP Type IM Invoices < \$15,000

Voucher Total \$14.40

ITEM 1

Item Description Cylinder - Anesthesia program

Quantity 2.000

Price \$7.2000

Extended Price \$14.40

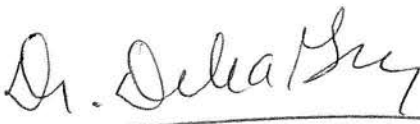
GL Distribution 01-10-00258-5401002

COMMENTS

APPROVAL

DATE

NEXT APPROVALS



Dr. Debra Gurney

RENTAL INVOICE

Medical Gas • Industrial Gas • Specialty Gas • Cryogenics • Welding Supplies

USGas

United States Cylinder Gas

11618 South Mayfield
Alsip, Illinois 60803
Phone: (708) 389-1402
Fax: (708) 389-1409

PLEASE REMIT TO:
US GAS
11618 South Mayfield
Alsip, IL 60803

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COLLEGE OF DUPAGE
425 FAWELL BLVD
ATTN: COLLEEN GONZALEZ
GLEN ELLYN, IL 60137

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COLLEGE OF DUPAGE
425 FAWELL BLVD
HEALTH SCIENCE BUILDING/2ND FLOOR
GLEN ELLYN, IL 60137

INVOICE NO.		CUSTOMER I.D.		PURCHASE ORDER NO.				DATE		PAGE		
342792		COLLE1 0		356812				01/31/20		1		
INVOICE	DATE	DESCRIPTION			BAL.	SHIP	RET'D	END	CREDITS	DUE	RATE	AMOUNT

01/01 THRU END CYLINDER RENT

0 0 2

----- C O M P U T A T I O N S -----

COMPUTATIONS: CYLINDER RENT

2 0 0 2 0 2 7.200 14.40

AP VERIFIED
04/22/20 - ISABEL BARRIOS

Dr. Delia Barry

01-10-00258-5401008

UNLESS OTHERWISE STATED, THE CYLINDERS ON
THIS DOCUMENT ARE PROPERTY OF THE VENDOR

CYLINDER VALUE

240.00

TERMS: NET 30 DAYS FROM INVOICE DATE
INVOICES NOT PAID IN ACCORDANCE WITH TERMS
ARE SUBJECT TO A SERVICE CHARGE OF 2% PER
MONTH, 24% PER YEAR.

SUB TOTAL
TAX EXEMPT

14.40

0.00

TOTAL DUE

14.40

From: langj@cod.edu
Sent: Tue Apr 21 16:25:10 CDT 2020
To: invoicing@cod.edu
CC:
Subject: US Gas INV#342792

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

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1545259
Vendor Name: United States Cylinder Gas
Invoice Number: 344525
Invoice Date: 02/29/20
PO Number:
Check Number: E0079980
Check Amount: \$ 28.80
Check Date: 04/29/2020
Department ID: 00258
Reviewer Name:
Voucher Number: V0606905
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

AP VERIFIED

04/22/20 - ISABEL BARRIOS

Gonzalez, Colleen

From: acctpay@cod.edu
Sent: Thursday, March 5, 2020 10:38 AM
To: Gonzalez, Colleen
Subject: Voucher Confirmation: V0606905

Voucher Number V0606905
Voucher Status In Progress (Unfinished)

Requestor Name Ms Colleen E. Gonzalez

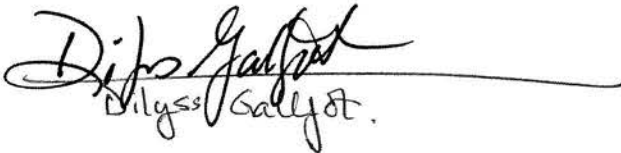
Voucher Date 03/05/20
Due Date 03/06/20
Vendor ID and/or Name 1545259 United States Cylinder Gas
D/B/A US Gas
AP Type IM Invoices < \$15,000
Voucher Total \$14.40

ITEM 1
Item Description Oxygen cyclinder
Quantity 2.000
Price \$7.2000
Extended Price \$14.40
GL Distribution 01-10-00258-5401002

COMMENTS

APPROVAL DATE

NEXT APPROVALS


Delys Galford

RENTAL INVOICE

Medical Gas • Industrial Gas • Specialty Gas • Cryogenics • Welding Supplies

USGas

United States Cylinder Gas

11618 South Mayfield
Alsip, Illinois 60803
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INVOICE	DATE	DESCRIPTION	BAL.	SHIP	RET'D	END	CREDITS	DUE	RATE	AMOUNT

02/01 THRU END CYLINDER RENT

0 0 2

----- C O M P U T A T I O N S -----

COMPUTATIONS: CYLINDER RENT 2 0 0 2 0 2 7.200 14.40

AP VERIFIED
04/22/20 - ISABEL BARRIOS

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TOTAL DUE

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From: langj@cod.edu
Sent: Tue Apr 21 16:25:03 CDT 2020
To: invoicing@cod.edu
CC:
Subject: US Gas INV#344525

Jessica Lang

Program Support Specialist, Nursing and Health Sciences
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630.942.2447 Direct | 630.942.8331 Office | 630.942.4222 Fax
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