

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 78177846
Invoice Date: 02/26/20
PO Number: P0367733
Check Number: 0272506
Check Amount: \$ 491.75
Check Date: 09/15/2020
Department ID: 00277
Reviewer Name: Colleen Gonzalez
Voucher Number: V0606227
Redaction Type: None
Document Type: AP Invoice

Document Below

From: MMS.Credit@McKesson.com
Sent: Thu Feb 27 06:52:57 CST 2020
To: invoicing@cod.edu
CC:
Subject: McKesson Medical-Surgical Customer Invoice(s)

This electronic mail message and attachments contain information which may be (a) LEGALLY PRIVILEGED, CONFIDENTIAL AND PROPRIETARY IN NATURE, OR OTHERWISE PROTECTED BY LAW FROM DISCLOSURE, and is (b) intended only for the use of the Addressee(s) named herein. If you are not the Addressee(s), or the person responsible for delivering this message to the Addressee(s), you are hereby notified that reading, copying, or distributing this message is prohibited. If you have received this electronic mail message in error, please contact us immediately (by reply e-mail) to inform us of the error and take the steps necessary to delete the message completely from your computer system and any related data. Thank you.

[attachment: MMS_00002230_INV0078177846_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Credit Memo

Page 1 of 2

RCHE1DPD01

Bill To: 58723600

Shipped From:

McKESSON MEDICAL-SURGICAL INC(CHICAGO)
CHICAGO #52
300 AIRPORT ROAD UNIT 2
ELGIN,IL 60123

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

District License 004.003700

Shipped To: 58723601

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD

GLEN ELLYN IL 60137-6708

Ordered By: KAREN COSS

Regulator License MMC_TEACHING

Payment Account Balance Inquires 1-800-234-1464
Phone:

Customer Service Phone: 1-800-877-1919

APPROVED
03/03/20 - KIRK OVERSTREET

Sales Order Number	56012565
Sales Order Date	02/18/2020
PO Number	367733
Sales Rep Name	COSS, KAREN A.

Credit Number	78177846
Credit Date	02/26/2020
Original Invoice Number	73773851
Credit Amount	(\$668.21)

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1014908	Vendor: KEYSUR Vend Cat#: MT-9110	INSTRUMENT TRAY, MESH W/CVR & PO LN 4	-7	EA	0	194.15	.00	.00	
120469	Vendor: BRDMED Vend Cat#: 892116	CATH TRAY, FOLEY W/URINE MTR 1 PO LN 7	-7	CS	-7	191.84	-1342.88	.00	
	SHIPPED: 02/26/2020	Elgin							
	Vend Cat#:	RESTOCKING CHARGE PO LN 8	1	EA	1	674.67	674.67	.00	

INVOICE REVIEWED
OKAY TO PAY
COLLEEN GONZALEZ 02/27/20

Credit Memo

RCHE1DPD01

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Account Number	58723600	Date	02/26/2020
Document Number	78177846	Terms	AR NET 30 DAYS
(\$668.21)			

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:

CREDIT MEMORANDUM
DO NOT PAY

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Credit Memo

Page 2 of 2

RCHE1DPD01

Bill To: 58723600
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Shipped To:
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
Ordered By: KAREN COSS

Invoice Number 78177846	PO Number 367733	Invoice Date 02/26/2020
-------------------------	------------------	-------------------------

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
SALES TAX									
			STATE	COUNTY	CITY	DISTRICT	OTHER		
			\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
SUB TOTAL		HANDLING	COLD CHAIN	HAZMAT	BULK	STD/EXP FREIGHT	TOTAL FREIGHT	TOTAL TAX	TOTAL AMOUNT
(\$668.21)		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$668.21)

The purchase listed on this invoice may be subject to a discount or other promotional consideration that may require you to report the value of such discount or promotional consideration, if any, as a discount. In addition, the prices on this invoice may include fees for services that may not be reimbursable under the Medicare/Medicaid statutes. You can receive an itemized list of any fees included in the prices upon request.

PRICING IS CONFIDENTIAL AND PROPRIETARY.

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 78313149
Invoice Date: 02/27/20
PO Number: P0367733
Check Number: 0272506
Check Amount: \$ 491.75
Check Date: 09/15/2020
Department ID: 00277
Reviewer Name: Colleen Gonzalez
Voucher Number: V0606532
Redaction Type: None
Document Type: AP Invoice

Document Below

From: MMS.Credit@McKesson.com
Sent: Fri Feb 28 06:42:36 CST 2020
To: invoicing@cod.edu
CC:
Subject: McKesson Medical-Surgical Customer Invoice(s)

This electronic mail message and attachments contain information which may be (a) LEGALLY PRIVILEGED, CONFIDENTIAL AND PROPRIETARY IN NATURE, OR OTHERWISE PROTECTED BY LAW FROM DISCLOSURE, and is (b) intended only for the use of the Addressee(s) named herein. If you are not the Addressee(s), or the person responsible for delivering this message to the Addressee(s), you are hereby notified that reading, copying, or distributing this message is prohibited. If you have received this electronic mail message in error, please contact us immediately (by reply e-mail) to inform us of the error and take the steps necessary to delete the message completely from your computer system and any related data. Thank you.

[attachment: MMS_00000851_INV0078313149_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Credit Memo

Page 1 of 1

RCHE1DPD01

Bill To: 58723600

Shipped From:

McKESSON MEDICAL-SURGICAL INC(CHICAGO)
CHICAGO #52
300 AIRPORT ROAD UNIT 2
ELGIN,IL 60123

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

APPROVED

03/09/20 - DILYSS GALLYOT

Document License 004.003700

Shipped To: 58723601

COLLEGE OF DUPAGE

SHIPPING AND RECEIVING

425 FAWELL BLVD

GLEN ELLYN IL 60137-6708

Ordered By: KAREN COSS

Regulatory License MMC_TEACHING

Payment / Account Balance Inquires 1-800-234-1464

Phone:

Customer Service Phone: 1-800-877-1919

APPROVED 03/05/20

Sales Order Number	56012565	Credit Number	78313149
Sales Order Date	02/18/2020	Credit Date	02/27/2020
PO Number	367733	Original Invoice Number	74783648
Sales Rep Name	COSS, KAREN A.	Credit Amount	(\$1,359.05)

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1014908	Vendor: KEYSUR Vend Cat#: MT-9110	INSTRUMENT TRAY, MESH W/CVR & PO LN 4	-7	EA	-7	194.15	-1359.05	.00	
	SHIPPED: 02/27/2020	Elgin							

SALES TAX

	STATE	COUNTY	CITY	DISTRICT	OTHER			
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
SUB TOTAL	HANDLING	COLD CHAIN	HAZMAT	BULK	STD/EXP FREIGHT	TOTAL FREIGHT	TOTAL TAX	TOTAL AMOUNT
(\$1,359.05)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$1,359.05)

The purchase listed on this invoice may be subject to a discount or other promotional consideration that may require you to report the value of such discount or promotional consideration, if any, as a discount. In addition, the prices on this invoice may include fees for services that may not be reimbursable under the Medicare/Medicaid statutes. You can receive an itemized list of any fees included in the prices upon request.

PRICING IS CONFIDENTIAL AND PROPRIETARY.

Credit Memo

RCHE1DPD01

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Account Number 58723600

Document Number 78313149

Date 02/27/2020

AR NET 30 DAYS

(\$1,359.05)

INVOICE REVIEWED

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:

REMITMENT ACCOUNT

AND PAY

OKAY TO PAY
INVOICE REVIEWED
COLLEEN GONZALEZ 03/02/20
OKAY TO PAY

COLLEEN GONZALEZ 03/02/20

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 78556085
Invoice Date: 03/02/20
PO Number: P0369018
Check Number: 0272506
Check Amount: \$ 491.75
Check Date: 09/15/2020
Department ID: 00277
Reviewer Name:
Voucher Number: V0606774
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: MMS.Credit@McKesson.com
Sent: Tue Mar 03 07:14:01 CST 2020
To: invoicing@cod.edu
CC:
Subject: McKesson Medical-Surgical Customer Invoice(s)

This electronic mail message and attachments contain information which may be (a) LEGALLY PRIVILEGED, CONFIDENTIAL AND PROPRIETARY IN NATURE, OR OTHERWISE PROTECTED BY LAW FROM DISCLOSURE, and is (b) intended only for the use of the Addressee(s) named herein. If you are not the Addressee(s), or the person responsible for delivering this message to the Addressee(s), you are hereby notified that reading, copying, or distributing this message is prohibited. If you have received this electronic mail message in error, please contact us immediately (by reply e-mail) to inform us of the error and take the steps necessary to delete the message completely from your computer system and any related data. Thank you.

[attachment: MMS_00002340_INV0078556085_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Bill 3 WAY MATCH 8 23600

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Invoice

Page 1 of 2

RCHE1DPD01

Shipped From:

McKESSON MEDICAL-SURGICAL INC(CHICAGO)
CHICAGO #52
300 AIRPORT ROAD UNIT 2
ELGIN,IL 60123

District License 004.003700

Shipped To: 58723601

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Ordered By: EMAIL

Regulatory License MMC_TEACHING

Payment / Account Balance Inquires 1-800-234-1464

Phone:

Customer Service Phone: 1-800-877-1919

Sales Order Number	57100224	Invoice Number	78556085
Sales Order Date	03/02/2020	Invoice Date	03/02/2020
PO Number	369018	Payment Due Date	04/01/2020
Sales Rep Name	COSS, KAREN A.	Invoice Amount	\$369.73

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
362546	Vendor: BDSURG Vend Cat#: 371163	SCRUBBRUSH/SPONGE, W/PCMX (30/	2	CS	0	241.16	.00	.00	
437989	Vendor: 3M Vend Cat#: 9200 1ZR3X6020314956344	CLEANSER, AVAGARD HAND 16OZ BT	1	CS	1	369.73	369.73	.00	
	SHIPPED: 03/02/2020	Elgin		UPS GROUND					
237329	Vendor: MGM16 Vend Cat#: 40181100	CAP, BOUF LF SB 24" BLU (100/B	10	CS	0	23.35	.00	.00	
808521	Vendor: UNDSTR Vend Cat#: CRW-BKH15	GLASSES,MAGNIFIER,1.5 CLR	25	EA	0	7.40	.00	.00	

Invoice

RCHE1DPD01

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Account Number	58723600	Date	03/02/2020
Document Number	78556085	Terms	AR NET 30 DAYS
Pay This Amount Before	04/01/2020		\$369.73

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:

McKESSON MEDICAL SURGICAL
PO BOX 933027
ATLANTA GA 31193-3027

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Invoice

Page 2 of 2

RCHE1DPD01

Bill To: 58723600
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Shipped To:
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
Ordered By: EMAIL

Invoice Number 78556085	PO Number 369018	Invoice Date 03/02/2020
-------------------------	------------------	-------------------------

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
SALES TAX									
			STATE	COUNTY	CITY	DISTRICT	OTHER		
			\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
SUB TOTAL	HANDLING	COLD CHAIN	HAZMAT	BULK	STD/EXP FREIGHT	TOTAL FREIGHT	TOTAL TAX	TOTAL AMOUNT	
\$369.73	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$369.73	

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PRICING IS CONFIDENTIAL AND PROPRIETARY.

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 78935466
Invoice Date: 03/04/20
PO Number: P0369018
Check Number: 0272506
Check Amount: \$ 491.75
Check Date: 09/15/2020
Department ID: 00277
Reviewer Name:
Voucher Number: V0606963
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: MMS.Credit@McKesson.com
Sent: Thu Mar 05 07:07:40 CST 2020
To: invoicing@cod.edu
CC:
Subject: McKesson Medical-Surgical Customer Invoice(s)

This electronic mail message and attachments contain information which may be (a) LEGALLY PRIVILEGED, CONFIDENTIAL AND PROPRIETARY IN NATURE, OR OTHERWISE PROTECTED BY LAW FROM DISCLOSURE, and is (b) intended only for the use of the Addressee(s) named herein. If you are not the Addressee(s), or the person responsible for delivering this message to the Addressee(s), you are hereby notified that reading, copying, or distributing this message is prohibited. If you have received this electronic mail message in error, please contact us immediately (by reply e-mail) to inform us of the error and take the steps necessary to delete the message completely from your computer system and any related data. Thank you.

[attachment: MMS_00000793_INV0078935466_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Invoice

Page 1 of 1

RCHE1DPD01

Bill To: 58723600

3 WAY MATCH

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Shipped From:
MCKESSON MEDICAL-SURGICAL INC(URBANCREST
COLUMBUS #072
3500 CENTERPOINT DRIVE STE A
URBANCREST, OH 43123

District License 004.002791
Shipped To: 58723601
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
Ordered By: EMAIL
Regulatory License MMC_TEACHING
Payment / Account Balance Inquires 1-800-234-1464
Phone:
Customer Service Phone: 1-800-877-1919

Sales Order Number	57100224	Invoice Number	78935466
Sales Order Date	03/02/2020	Invoice Date	03/04/2020
PO Number	369018	Payment Due Date	04/03/2020
Sales Rep Name	COSS, KAREN A.	Invoice Amount	\$233.50

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.
Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
237329	Vendor: MGM16 Vend Cat#: 40181100	CAP, BOUF LF SB 24" BLU (100/B PO LN 3	10	CS	10	23.35	233.50	.00	
	1Z4862300371158638	1Z4862300371158674			1Z4862300371158718				
	SHIPPED: 03/04/2020	Columbus		UPS GROUND					

SALES TAX

	STATE	COUNTY	CITY	DISTRICT	OTHER				
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00				
SUB TOTAL	HANDLING	COLD CHAIN	HAZMAT	BULK	STD/EXP FREIGHT	TOTAL FREIGHT	TOTAL TAX	TOTAL AMOUNT	
\$233.50	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$233.50	

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PRICING IS CONFIDENTIAL AND PROPRIETARY.

Invoice

RCHE1DPD01

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Account Number	58723600	Date	03/04/2020
Document Number	78935466	Terms	AR NET 30 DAYS
Pay This Amount Before	04/03/2020		\$233.50

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:
MCKESSON MEDICAL SURGICAL
PO BOX 933027
ATLANTA GA 31193-3027

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 80486387
Invoice Date: 03/06/20
PO Number: P0369018
Check Number: 0272506
Check Amount: \$ 491.75
Check Date: 09/15/2020
Department ID: 00277
Reviewer Name:
Voucher Number: V0607463
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: MMS.Credit@McKesson.com
Sent: Sat Mar 07 06:43:10 CST 2020
To: invoicing@cod.edu
CC:
Subject: McKesson Medical-Surgical Customer Invoice(s)

This electronic mail message and attachments contain information which may be (a) LEGALLY PRIVILEGED, CONFIDENTIAL AND PROPRIETARY IN NATURE, OR OTHERWISE PROTECTED BY LAW FROM DISCLOSURE, and is (b) intended only for the use of the Addressee(s) named herein. If you are not the Addressee(s), or the person responsible for delivering this message to the Addressee(s), you are hereby notified that reading, copying, or distributing this message is prohibited. If you have received this electronic mail message in error, please contact us immediately (by reply e-mail) to inform us of the error and take the steps necessary to delete the message completely from your computer system and any related data. Thank you.

[attachment: MMS_00001286_INV0080486387_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Invoice

Page 1 of 1

RCHE1DPD01

Bill To: 58723600

3 WAY MATCH

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Shipped From:
MCKESSON MEDICAL-SURGICAL INC(CHICAGO)
CHICAGO #52
300 AIRPORT ROAD UNIT 2
ELGIN,IL 60123

District License 004.003700
Shipped To: 58723601
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
Ordered By: EMAIL
Regulatory License MMC_TEACHING
Payment / Account Balance Inquires 1-800-234-1464
Phone:
Customer Service Phone: 1-800-877-1919

Sales Order Number	57100224	Invoice Number	80486387
Sales Order Date	03/02/2020	Invoice Date	03/06/2020
PO Number	369018	Payment Due Date	04/05/2020
Sales Rep Name	COSS, KAREN A.	Invoice Amount	\$220.00

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.
Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
808521	Vendor: UNDSTR Vend Cat#: CRW-BKH15	GLASSES,MAGNIFIER,1.5 CLR PO LN 4	25	EA	25	7.40	185.00	.00	
MMS PO#		26095626							

SALES TAX

		STATE	COUNTY	CITY	DISTRICT	OTHER			
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
SUB TOTAL	HANDLING	COLD CHAIN	HAZMAT	BULK	STD/EXP FREIGHT	TOTAL FREIGHT	TOTAL TAX	TOTAL AMOUNT	
\$185.00	\$0.00	\$0.00	\$0.00	\$0.00	\$35.00	\$35.00	\$0.00	\$220.00	

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PRICING IS CONFIDENTIAL AND PROPRIETARY.

Invoice

RCHE1DPD01

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Account Number	58723600	Date	03/06/2020
Document Number	80486387	Terms	AR NET 30 DAYS
Pay This Amount Before	04/05/2020		\$220.00

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:
MCKESSON MEDICAL SURGICAL
PO BOX 933027
ATLANTA GA 31193-3027

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 89821192
Invoice Date: 03/17/20
PO Number: P0369018
Check Number: 0272506
Check Amount: \$ 491.75
Check Date: 09/15/2020
Department ID: 00277
Reviewer Name:
Voucher Number: V0608782
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: MMS.Credit@McKesson.com
Sent: Wed Mar 18 07:46:24 CDT 2020
To: invoicing@cod.edu
CC:
Subject: McKesson Medical-Surgical Customer Invoice(s)

This electronic mail message and attachments contain information which may be (a) LEGALLY PRIVILEGED, CONFIDENTIAL AND PROPRIETARY IN NATURE, OR OTHERWISE PROTECTED BY LAW FROM DISCLOSURE, and is (b) intended only for the use of the Addressee(s) named herein. If you are not the Addressee(s), or the person responsible for delivering this message to the Addressee(s), you are hereby notified that reading, copying, or distributing this message is prohibited. If you have received this electronic mail message in error, please contact us immediately (by reply e-mail) to inform us of the error and take the steps necessary to delete the message completely from your computer system and any related data. Thank you.

[attachment: MMS_00003722_INV0089821192_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Bill To: 58723600

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

3 WAY MATCH

Invoice

Page 1 of 1

RCHAP6519

Shipped From:

McKESSON MEDICAL-SURGICAL INC(CHICAGO)
CHICAGO #52
300 AIRPORT ROAD UNIT 2
ELGIN,IL 60123

District License 004.003700

Shipped To: 58723601

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
Ordered By: EMAIL

Regulatory License MMC_TEACHING

Payment / Account Balance Inquires 1-800-234-1464
Phone:

Customer Service Phone: 1-800-877-1919

Sales Order Number	57100224	Invoice Number	89821192
Sales Order Date	03/02/2020	Invoice Date	03/17/2020
PO Number	369018	Payment Due Date	04/16/2020
Sales Rep Name	COSS, KAREN A.	Invoice Amount	\$482.32

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
362546	Vendor: BDSURG Vend Cat#: 371163	SCRUBBRUSH/SPONGE, W/PCMX (30/ PO LN 1	2	CS	2	241.16	482.32	.00	
Tracking # 1ZR3X6020315096978									
Shipped: 03/17/2020 From: Elgin Via: UPS GROUND									

SALES TAX

		STATE	COUNTY	CITY	DISTRICT	OTHER			
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
SUB TOTAL	HANDLING	COLD CHAIN	HAZMAT	BULK	STD/EXP FREIGHT	TOTAL FREIGHT	TOTAL TAX	TOTAL AMOUNT	
\$482.32	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$482.32	

The purchase listed on this invoice may be subject to a discount or other promotional consideration that may require you to report the value of such discount or promotional consideration, if any, as a discount. In addition, the prices on this invoice may include fees for services that may not be reimbursable under the Medicare/Medicaid statutes. You can receive an itemized list of any fees included in the prices upon request.

PRICING IS CONFIDENTIAL AND PROPRIETARY.

Invoice

RCHAP6519

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Account Number	58723600	Date	03/17/2020
Document Number	89821192	Terms	AR NET 30 DAYS
Pay This Amount Before	04/16/2020		\$482.32

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:

McKESSON MEDICAL SURGICAL
PO BOX 933027
ATLANTA GA 31193-3027

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 94332069/00891469
Invoice Date: 03/23/20
PO Number: P0369017
Check Number: 0272506
Check Amount: \$ 491.75
Check Date: 09/15/2020
Department ID: 00141
Reviewer Name: Adrianna Costello
Voucher Number: V0611857
Redaction Type: None
Document Type: AP Invoice

Document Below

From: MMS.Credit@McKesson.com
Sent: Tue Mar 24 07:05:23 CDT 2020
To: invoicing@cod.edu
CC:
Subject: McKesson Medical-Surgical Customer Invoice(s)

This electronic mail message and attachments contain information which may be (a) LEGALLY PRIVILEGED, CONFIDENTIAL AND PROPRIETARY IN NATURE, OR OTHERWISE PROTECTED BY LAW FROM DISCLOSURE, and is (b) intended only for the use of the Addressee(s) named herein. If you are not the Addressee(s), or the person responsible for delivering this message to the Addressee(s), you are hereby notified that reading, copying, or distributing this message is prohibited. If you have received this electronic mail message in error, please contact us immediately (by reply e-mail) to inform us of the error and take the steps necessary to delete the message completely from your computer system and any related data. Thank you.

[attachment: MMS_00000160_INV0094332069_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Bill To: 58723600

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Invoice

Page 1 of 2

RCHAP6519

Shipped From:

McKESSON MEDICAL-SURGICAL INC(CHICAGO)
CHICAGO #52
300 AIRPORT ROAD UNIT 2
ELGIN,IL 60123

District License 004.003700

Shipped To: 58723601

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
Ordered By: EMAIL

Regulatory License MMC_TEACHING

Payment / Account Balance Inquires 1-800-234-1464

Phone:

Customer Service Phone: 1-800-877-1919

Sales Order Number	57100199	Invoice Number	94332069
Sales Order Date	03/02/2020	Invoice Date	03/23/2020
PO Number	5007	Payment Due Date	04/22/2020
Sales Rep Name	COSS, KAREN A.	Invoice Amount	\$1,040.88

APPROVED

05/20/20 - KIRK OVERSTREET

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/dam/mckesson/usa/Custom/US/terms> for reviewing the Terms of Sale in full.
Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
924504	Vendor: EZWAYI Vend Cat#: 11871	BATTERY, F/EZ LIFT PO LN 1	3	EA	3	193.71	581.13	.00	
	Tracking # 1ZR3X6020315139083								
	Shipped: 03/23/2020 From: Elgin								
924503	Vendor: EZWAYI Vend Cat#: 11860	BATTERY CHARGER, F/EZ LIFT PO LN 2	1	EA	1	459.75	459.75	.00	
	Tracking # 1ZR3X6020315139083								
	Shipped: 03/23/2020 From: Elgin								

SALES TAX

STATE	COUNTY	CITY	DISTRICT	OTHER
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Invoice

RCHAP6519

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Account Number	58723600	Date	03/23/2020
Document Number	94332069	Terms	AR NET 30 DAYS
Pay This Amount Before	04/22/2020		\$1,040.88

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:

McKESSON MEDICAL SURGICAL
PO BOX 933027
ATLANTA GA 31193-3027

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Invoice

Page 2 of 2

RCHAP6519

Bill To: 58723600
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Shipped To:
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
Ordered By: EMAIL

Invoice Number 94332069	PO Number 369017	Invoice Date 03/23/2020
-------------------------	------------------	-------------------------

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
	SUB								
	TOTAL	HANDLING	COLD CHAIN	HAZMAT	BULK	STD/EXP FREIGHT	TOTAL FREIGHT	TOTAL TAX	TOTAL AMOUNT
	\$1,040.88	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,040.88

The purchase listed on this invoice may be subject to a discount or other promotional consideration that may require you to report the value of such discount or promotional consideration, if any, as a discount. In addition, the prices on this invoice may include fees for services that may not be reimbursable under the Medicare/Medicaid statutes. You can receive an itemized list of any fees included in the prices upon request.

PRICING IS CONFIDENTIAL AND PROPRIETARY.

From: MMS.Credit@McKesson.com
Sent: Thu Apr 02 06:41:04 CDT 2020
To: invoicing@cod.edu
CC:
Subject: McKesson Medical-Surgical Customer Invoice(s)

This electronic mail message and attachments contain information which may be (a) LEGALLY PRIVILEGED, CONFIDENTIAL AND PROPRIETARY IN NATURE, OR OTHERWISE PROTECTED BY LAW FROM DISCLOSURE, and is (b) intended only for the use of the Addressee(s) named herein. If you are not the Addressee(s), or the person responsible for delivering this message to the Addressee(s), you are hereby notified that reading, copying, or distributing this message is prohibited. If you have received this electronic mail message in error, please contact us immediately (by reply e-mail) to inform us of the error and take the steps necessary to delete the message completely from your computer system and any related data. Thank you.

[attachment: MMS_00000562_INV0000891469_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Bill To: 58723600

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Credit Memo

Page 1 of 2

RCHAP6519

Shipped From:

McKESSON MEDICAL-SURGICAL INC(CHICAGO)
CHICAGO #52
300 AIRPORT ROAD UNIT 2
ELGIN,IL 60123

District License 004.003700

Shipped To: 58723601

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
Ordered By: EMYVW1L

Regulatory License MMC_TEACHING

Payment / Account Balance Inquires 1-800-453-5180

Phone:

Customer Service Phone: 1-800-877-1919

Sales Order Number	60555656	Credit Number	00891469
Sales Order Date	03/30/2020	Credit Date	04/01/2020
PO Number	369017	Original Invoice Number	94332069
Sales Rep Name	COSS, KAREN A.	Credit Amount	(\$1,040.88)

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
924504	Vendor: EZWAYI Vend Cat#: 11871	BATTERY, F/EZ LIFT PO LN 1	-3	EA	-3	193.71	-581.13	.00	
Shipped: 04/01/2020 From: Elgin UPS RETURNED THIS TO THE WAREHOUSE - NO REASON GIVEN									
924503	Vendor: EZWAYI Vend Cat#: 11860	BATTERY CHARGER, F/EZ LIFT PO LN 2	-1	EA	-1	459.75	-459.75	.00	
Shipped: 04/01/2020 From: Elgin UPS RETURNED THIS TO THE WAREHOUSE - NO REASON GIVEN									

SALES TAX

STATE	COUNTY	CITY	DISTRICT	OTHER
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Credit Memo

RCHAP6519

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Account Number	58723600	Date	04/01/2020
Document Number	00891469	Terms	AR NET 30 DAYS
(\$1,040.88)			

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:

CREDIT MEMORANDUM
DO NOT PAY

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Credit Memo

Page 2 of 2

RCHAP6519

Bill To: 58723600
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Shipped To:
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
Ordered By: EMYVW1L

Invoice Number 00891469	PO Number 369017	Invoice Date 04/01/2020
-------------------------	------------------	-------------------------

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
	SUB								
	TOTAL	HANDLING	COLD CHAIN	HAZMAT	BULK	STD/EXP FREIGHT	TOTAL FREIGHT	TOTAL TAX	TOTAL AMOUNT
	(\$1,040.88)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$1,040.88)

The purchase listed on this invoice may be subject to a discount or other promotional consideration that may require you to report the value of such discount or promotional consideration, if any, as a discount. In addition, the prices on this invoice may include fees for services that may not be reimbursable under the Medicare/Medicaid statutes. You can receive an itemized list of any fees included in the prices upon request.

PRICING IS CONFIDENTIAL AND PROPRIETARY.

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 06289535
Invoice Date: 06/03/20
PO Number: P0369017
Check Number: 0272506
Check Amount: \$ 491.75
Check Date: 09/15/2020
Department ID: 00141
Reviewer Name: Adrianna Costello
Voucher Number: V0625545
Redaction Type: None
Document Type: AP Invoice

Document Below

From: MMS.Credit@McKesson.com
Sent: Thu Jun 04 06:44:07 CDT 2020
To: invoicing@cod.edu
CC:
Subject: McKesson Medical-Surgical Customer Invoice(s)

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[attachment: MMS_00003182_INV0006289535_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Bill To: 58723600

Invoice

Page 1 of 1

RCHAP6519

Shipped From:

McKESSON MEDICAL-SURGICAL INC(CHICAGO)
CHICAGO #52
300 AIRPORT ROAD UNIT 2
ELGIN,IL 60123

COLLEGE OF DUPAGE

SHIPPING AND RECEIVING

425 FAWELL BLVD

GLEN ELLYN IL 60137-6708

APPROVED
06/15/20 - DILYSS GALLYOT

District License 004.003700

Shipped To: 58723601

COLLEGE OF DUPAGE

SHIPPING AND RECEIVING

425 FAWELL BLVD

GLEN ELLYN IL 60137-6708

Ordered By: REP

Regulatory License MMC_TEACHING

Payment / Account Balance Inquires 1-800-453-5180

Phone:

Customer Service Phone: 1-800-877-1919

Sales Order Number	67004613	Invoice Number	06289535
Sales Order Date	06/03/2020	Invoice Date	06/03/2020
PO Number	369017	Payment Due Date	07/03/2020
Sales Rep Name	COSS, KAREN A.	Invoice Amount	\$459.75

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
924503	Vendor: EZWAYI Vend Cat#: 11860	BATTERY CHARGER, F/EZ LIFT POL LN 1	1	EA	1	459.75	459.75	.00	
	Tracking # 1ZR3X6020315487233								
	Shipped: 06/03/2020 From: Elgin								

SALES TAX

	STATE	COUNTY	CITY	DISTRICT	OTHER				
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00				
SUB TOTAL						STD/EXP FREIGHT	TOTAL FREIGHT	TOTAL TAX	TOTAL AMOUNT
\$459.75						\$0.00	\$0.00	\$0.00	\$459.75

The purchase listed on this invoice may be subject to a discount or other promotional consideration that may require you to report the value of such discount or promotional consideration, if any, as a discount. In addition, the prices on this invoice may include fees for services that may not be reimbursable under the Medicare/Medicaid statutes. You can receive an itemized list of any fees included in the prices upon request.

PRICING IS CONFIDENTIAL AND PROPRIETARY.

Invoice

RCHAP6519

McKESSON

McKesson Medical-Surgical
9954 Mayland Drive Suite 4000
Richmond, VA 23233

Account Number	58723600	Date	06/03/2020
Document Number	06289535	Terms	AR NET 30 DAYS
Pay This Amount Before	07/03/2020		\$459.75

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:

McKESSON MEDICAL SURGICAL

PO BOX 933027

ATLANTA, GA 30333-0272

INVOICE REVIEWED
OKAY TO PAY

APRIANNA COSTELLO 06/09/20

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 11848514
Invoice Date: 08/07/20
PO Number: P0370445
Check Number: 0272506
Check Amount: \$ 491.75
Check Date: 09/15/2020
Department ID: 00141
Reviewer Name: Adrianna Costello
Voucher Number: V0639732
Redaction Type: None
Document Type: AP Invoice

Document Below

From: MMS.Credit@McKesson.com
Sent: Sat Aug 08 06:53:26 CDT 2020
To: invoicing@cod.edu
CC:
Subject: McKesson Medical-Surgical Customer Invoice(s)

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[attachment: MMS_00001108_INV0011848514_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical, Inc
9954 Mayland Drive Suite 4000
Henrico, VA 23233

Bill To: 58723600

Invoice

Page 1 of 1

RCHAP6519

Shipped From:

McKESSON MEDICAL-SURGICAL INC(CHICAGO)
CHICAGO #52
300 AIRPORT ROAD UNIT 2
ELGIN,IL 60123

District License 004.003700

Shipped To: 58723601

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Ordered By: REP EMAIL

Regulatory License MMC_TEACHING

Payment / Account Balance Inquires 1-800-453-5180
Phone:

Customer Service Phone: 1-800-877-1919

Sales Order Number	72330941	Invoice Number	11848514
Sales Order Date	07/28/2020	Invoice Date	08/07/2020
PO Number	370445	Payment Due Date	09/06/2020
Sales Rep Name	COSS, KAREN A.	Invoice Amount	\$581.13

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.
Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
924504	Vendor: EZWAYI Vend Cat#: 11871	BATTERY, F/EZ LIFT PO LN 1	3	EA	3	193.71	581.13	.00	
Tracking # 1ZR3X6020315864763									
Shipped: 08/07/2020		From: Elgin	Via: UPS GROUND						

SUB TOTAL	FREIGHT	TAX	AMOUNT
\$581.13	\$0.00	\$0.00	\$581.13

The purchase listed on this invoice may be subject to a discount or other promotional consideration that may require you to report the value of such discount or promotional consideration, if any, as a discount. In addition, the prices on this invoice may include fees for services that may not be reimbursable under the Medicare/Medicaid statutes. You can receive an itemized list of any fees included in the prices upon request.

PRICING IS CONFIDENTIAL AND PROPRIETARY.

Invoice

RCHAP6519

McKESSON

McKesson Medical-Surgical, Inc
9954 Mayland Drive Suite 4000
Henrico, VA 23233

Account Number	58723600	Date	08/07/2020
Document Number	11848514	Terms	AR NET 30 DAYS
Pay This Amount Before		09/06/2020	\$581.13

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

INVOICE REVIEWED
OKAY TO PAY

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:

McKESSON MEDICAL SURGICAL

CHICAGO #52

TEL: 312-311-3327

ADRIANNA COSTELLO 08/17/20

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087607
Vendor Name: McKesson Medical-Surgical Inc
Invoice Number: 12144233
Invoice Date: 08/17/20
PO Number: P0370674
Check Number: 0272506
Check Amount: \$ 491.75
Check Date: 09/15/2020
Department ID: 00258
Reviewer Name: Colleen Gonzalez
Voucher Number: V0640208
Redaction Type: None
Document Type: AP Invoice

Document Below

From: MMS.Credit@McKesson.com
Sent: Tue Aug 18 06:59:42 CDT 2020
To: invoicing@cod.edu
CC:
Subject: McKesson Medical-Surgical Customer Invoice(s)

This electronic mail message and attachments contain information which may be (a) LEGALLY PRIVILEGED, CONFIDENTIAL AND PROPRIETARY IN NATURE, OR OTHERWISE PROTECTED BY LAW FROM DISCLOSURE, and is (b) intended only for the use of the Addressee(s) named herein. If you are not the Addressee(s), or the person responsible for delivering this message to the Addressee(s), you are hereby notified that reading, copying, or distributing this message is prohibited. If you have received this electronic mail message in error, please contact us immediately (by reply e-mail) to inform us of the error and take the steps necessary to delete the message completely from your computer system and any related data. Thank you.

[attachment: MMS_00004830_INV0012144233_MMGD001.PDF]

McKESSON

McKesson Medical-Surgical, Inc
9954 Mayland Drive Suite 4000
Henrico, VA 23233

Bill To: 58723600

COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708

Invoice

Page 1 of 1

RCHAP6519

Shipped From:
McKESSON MEDICAL-SURGICAL (ROGERS)
ROGERS #21
12999 WILFRED LANE STE #100
ROGERS, MN 55374

District License 004.004068
Shipped To: 58723601
COLLEGE OF DUPAGE
SHIPPING AND RECEIVING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
Ordered By: REP/EMAIL
Regulatory License MMC_TEACHING

Payment / Account Balance Inquires 1-800-453-5180
none

Customer Service Phone: 1-800-877-1919

APPROVED
08/28/20 - DILYSS GALLYOT

Sales Order Number	71110000	Invoice Number	12144233
Sales Order Date	08/17/2020	Invoice Date	08/17/2020
PO Number	370674	Payment Due Date	09/16/2020
Sales Rep Name	COSS, KAREN A.	Invoice Amount	\$172.58

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.
Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
206485	Vendor: MGM16 Vend Cat#: 91-1200	MASK, FACE SURG POUCH-STYLE W/ PO LN 1	2	BX	0	5.58	.00	.00	
795984	Vendor: BBRAUN Vend Cat#: 354205	IV ADMIN SET, UNIV 15DRP W/3 C PO LN 2	1	CS	1	172.58	172.58	.00	
	Tracking # 1ZY8E8030317273288 Shipped: 08/17/2020 From: Rogers Via: UPS GROUND								
729273	Vendor: EDWARD Vend Cat#: 48VMP160	VAMP KIT, 60" W/SAMPLE SITE & PO LN 3	1	CS	0	876.34	.00	.00	

SUB TOTAL	FREIGHT	TAX	AMOUNT
\$172.58	\$0.00	\$0.00	\$172.58

The purchase listed on this invoice may be subject to a discount or other promotional consideration that may require you to report the value of such discount or promotional consideration, if any, as a discount. In addition, the prices on this invoice may include fees for services that may not be reimbursed under the Medicare/Medicaid rules. You may receive notice of these fees included in the prices upon request.

INVOICE REVIEWED
PRICING IS CONFIDENTIAL AND PROPRIETARY.

OKAY TO PAY

Invoice

McKESSON

McKesson Medical-Surgical, Inc
9954 Mayland Drive Suite 4000
Henrico, VA 23233

RCHAP6519

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