

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1470233  
Vendor Name: Radiation Detection Company  
Invoice Number: 4987046  
Invoice Date: 07/25/20  
PO Number: B0370454  
Check Number: E0081387  
Check Amount: \$ 1,584.75  
Check Date: 09/02/2020  
Department ID: 00253  
Reviewer Name: Colleen Gonzalez  
Voucher Number: V0640547  
Redaction Type: None  
Document Type: AP Invoice

Document Below



# RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	07/25/2020	4987046	358274	\$700.00

## Bill To

College of DuPage  
Attn: Shelli Thacker or Colleen Prola  
425 Fawell Blvd  
Glen Ellyn IL 60137

## Ship To

College of DuPage  
Attn: Shelli Thacker or Colleen Prola  
425 Fawell Blvd  
Glen Ellyn IL 60137

BO# 370454  
GL - 01-10-00253-5401002

## Unreturned Dosimeter Charges

Group	Order	Shipped	Unreturned Dosimeters	Quantity	Price	Amount
3	2316144.1	01/13/2020	04/17/2020 PIN 2804941	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2880855	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977624	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977626	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977627	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977628	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977631	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977632	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977633	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977634	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977635	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977636	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977637	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977638	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977639	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977640	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977641	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977642	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977643	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977644	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977645	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977648	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977649	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977650	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977652	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977655	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977658	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977660	1	20.00	20.00

**APPROVED**  
**08/28/20 - DILYSS GALLYOT**  
**INVOICE REVIEWED**  
**OKAY TO PAY**  
**COLLEEN GONZALEZ 08/26/20**

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	07/25/2020	4987046	358274	\$700.00

## Please remit payment to:

Radiation Detection Company, Inc.  
3527 Snead Drive  
Georgetown, TX 78626

You may pay online using MyRadCare

## Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

RADIATION DETECTION CO

Group	Order	Shipped	Unreturned Dosimeters	Quantity	Price	Amount
3	2316144.1	01/13/2020	04/17/2020 PIN 2977661	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977662	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977663	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977664	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977667	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977669	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977670	1	20.00	20.00
3	2316144.1	01/13/2020	04/17/2020 PIN 2977671	1	20.00	20.00

-----  
From: prolac@cod.edu  
Sent: Tue Aug 25 21:22:20 CDT 2020  
To: invoicing@cod.edu  
CC:  
Subject: Invoice for approval  
-----

Please route to Dilyss Gallyot for approval; GL# 00253.

Thank you!

*Colleen Profa-Gonzalez*

**Program Support Specialist, Nursing and Health Sciences Division**

**College of DuPage** | 425 Fawell Blvd | Glen Ellyn, IL 60137

prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1470233  
Vendor Name: Radiation Detection Company  
Invoice Number: 4990847  
Invoice Date: 08/10/20  
PO Number: B0370454  
Check Number: E0081387  
Check Amount: \$ 1,584.75  
Check Date: 09/02/2020  
Department ID: 00221  
Reviewer Name: Colleen Gonzalez  
Voucher Number: V0640548  
Redaction Type: None  
Document Type: AP Invoice

Document Below



## RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	08/10/2020	4990847	370454	\$461.25

**Bill To**

College of DuPage  
Attn: Shelli Thacker or Colleen Prola  
425 Fawell Blvd  
Glen Ellyn IL 60137

**Ship To**

College of DuPage  
Attn: Shelli Thacker or Colleen Prola  
425 Fawell Blvd  
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
0	2416564.1	07/31/2020	82 TLD XBG Badge	08/24/2020-11/23/2020	1	0.00	0.00
0	2416564.1	07/31/2020	82 TLD XBG Badge	08/24/2020-11/23/2020	41	11.25	461.25

**INVOICE REVIEWED  
OKAY TO PAY**

Terms: Net 30 days. A late payment charge of 1.5% per month may be charged on all invoices not paid within terms of sale.

**COLLEEN GONZALEZ 08/26/20**  
**APPROVED**  
**08/28/20 - DILYSS GALLYOT**

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	08/10/2020	4990847	370454	\$461.25

**Please remit payment to:**

Radiation Detection Company, Inc.  
3527 Snead Drive  
Georgetown, TX 78626

You may pay online using MyRadCare

**Please charge my credit card**



Name on Card	
Card Number	
Expiration Date	Amount

-----  
From: prolac@cod.edu  
Sent: Tue Aug 25 21:43:14 CDT 2020  
To: invoicing@cod.edu  
CC:  
Subject: Route invoice for approval  
-----

Please route the attached to Dilyss Gallyot for approval; GL # 00253.

Thank you!

*Colleen Profa-Gonzalez*

**Program Support Specialist, Nursing and Health Sciences Division**

**College of DuPage** | 425 Fawell Blvd | Glen Ellyn, IL 60137

prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1470233  
Vendor Name: Radiation Detection Company  
Invoice Number: 4996617  
Invoice Date: 08/25/20  
PO Number: B0370454  
Check Number: E0081387  
Check Amount: \$ 1,584.75  
Check Date: 09/02/2020  
Department ID: 00221  
Reviewer Name: Colleen Gonzalez  
Voucher Number: V0640551  
Redaction Type: None  
Document Type: AP Invoice

Document Below





## RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	08/25/2020	4996617	PO # 347117	\$33.90

**Bill To**

College of DuPage  
Attn: Shelli Thacker or Colleen Prola  
425 Fawell Blvd  
Glen Ellyn IL 60137

**Ship To**

Amy Yarshen  
2845 N. Bulrush Ct.  
Coal City IL 60416

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
2	2423467.1	08/13/2020	82 TLD XBG Badge	08/24/2020-09/23/2020	1	0.00	0.00
2	2423467.1	08/13/2020	82 TLD XBG Badge	08/24/2020-09/23/2020	6	5.65	33.90

**APPROVED**  
**08/28/20 - DILYSS GALLYOT**

**INVOICE REVIEWED**

Terms: Net 30 days. Late payment charge of 1.5% per month may be charged on all invoices not paid within terms of sale.

**OKAY TO PAY**

**COLLEEN GONZALEZ 08/26/20**

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	08/25/2020	4996617	PO # 347117	\$33.90

**Please remit payment to:**

Radiation Detection Company, Inc.  
3527 Snead Drive  
Georgetown, TX 78626

You may pay online using MyRadCare

**Please charge my credit card**



Name on Card	
Card Number	
Expiration Date	Amount

-----  
From: prolac@cod.edu  
Sent: Tue Aug 25 21:44:20 CDT 2020  
To: invoicing@cod.edu  
CC:  
Subject: Radiation Detection invoice route for approval  
-----

Please route the attached to Dilyss Gallyot for approval; GL # 00221.

Thank you!

*Colleen Profa-Gonzalez*

**Program Support Specialist, Nursing and Health Sciences Division**

**College of DuPage** | 425 Fawell Blvd | Glen Ellyn, IL 60137

prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1470233  
Vendor Name: Radiation Detection Company  
Invoice Number: 4993341  
Invoice Date: 08/25/20  
PO Number: B0370454  
Check Number: E0081387  
Check Amount: \$ 1,584.75  
Check Date: 09/02/2020  
Department ID: 00221  
Reviewer Name: Colleen Gonzalez  
Voucher Number: V0640552  
Redaction Type: None  
Document Type: AP Invoice

Document Below



## RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	08/25/2020	4993341	PO # 347117	\$8.00

**Bill To**

College of DuPage  
Attn: Shelli Thacker or Colleen Prola  
425 Fawell Blvd  
Glen Ellyn IL 60137

**Ship To**

Amy Yarshen  
2845 N. Bulrush Ct.  
Coal City IL 60416

Date	Description	Quantity	Price	Amount
08/13/2020	EasyReturn Label - Shipment 2027626 Group 2	1	8.00	8.00

**APPROVED**  
**08/28/20 - DILYSS GALLYOT**

**INVOICE REVIEWED**

Terms: Net 30 days. Late payment charge 1.5% per month. No charge on all invoices if paid within terms of sale.

**OKAY TO PAY**

**COLLEEN GONZALEZ 08/26/20**

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	08/25/2020	4993341	PO # 347117	\$8.00

**Please remit payment to:**

Radiation Detection Company, Inc.  
3527 Snead Drive  
Georgetown, TX 78626

You may pay online using MyRadCare

**Please charge my credit card**



Name on Card	
Card Number	
Expiration Date	Amount

-----  
From: prolac@cod.edu  
Sent: Tue Aug 25 21:44:35 CDT 2020  
To: invoicing@cod.edu  
CC:  
Subject: Radiation invoice for approval  
-----

Please route the attached to Dilyss Gallyot for approval; GL # 00221.

Thank you!

*Colleen Profa-Gonzalez*

**Program Support Specialist, Nursing and Health Sciences Division**

**College of DuPage** | 425 Fawell Blvd | Glen Ellyn, IL 60137

prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1470233  
Vendor Name: Radiation Detection Company  
Invoice Number: 4996616  
Invoice Date: 08/25/20  
PO Number: B0370454  
Check Number: E0081387  
Check Amount: \$ 1,584.75  
Check Date: 09/02/2020  
Department ID: 00221  
Reviewer Name: Colleen Gonzalez  
Voucher Number: V0640553  
Redaction Type: None  
Document Type: AP Invoice

Document Below



## RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	08/25/2020	4996616	PO # 347117	\$125.40

**Bill To**

College of DuPage  
Attn: Shelli Thacker or Colleen Prola  
425 Fawell Blvd  
Glen Ellyn IL 60137

**Ship To**

Amy Yarshen  
2845 N. Bulrush Ct.  
Coal City IL 60416

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
1	2423466.1	08/13/2020	05 TLD Plastic Ring	08/24/2020-09/23/2020	1	0.00	0.00
1	2423466.1	08/13/2020	05 TLD Plastic Ring	08/24/2020-09/23/2020	11	5.75	63.25
1	2423466.2	08/13/2020	82 TLD XBG Badge	08/24/2020-09/23/2020	1	0.00	0.00
1	2423466.2	08/13/2020	82 TLD XBG Badge	08/24/2020-09/23/2020	11	5.65	62.15

**APPROVED**  
**08/28/20 - DILYSS GALLYOT**

**INVOICE REVIEWED**

Terms: Net 30 days. A late payment charge of 1.5% per month may be charged on all invoices not paid within terms of sale.

THIS IS AN ANNUAL PERCENTAGE RATE OF 18%

**OKAY TO PAY**

**COLLEEN GONZALEZ 08/26/20**

Please detach and return this portion with your payment.

Account	Date	Invoice	Purchase Order	Amount
104874	08/25/2020	4996616	PO # 347117	\$125.40

**Please remit payment to:**

Radiation Detection Company, Inc.  
3527 Snead Drive  
Georgetown, TX 78626

You may pay online using MyRadCare

**Please charge my credit card**



Name on Card	
Card Number	
Expiration Date	Amount



-----  
From: prolac@cod.edu  
Sent: Tue Aug 25 21:43:53 CDT 2020  
To: invoicing@cod.edu  
CC:  
Subject: Invoice for approval - Radiation \$125.40  
-----

Please route the attached to Dilyss Gallyot for approval; GL # 00221.

Thank you!

*Colleen Profa-Gonzalez*

**Program Support Specialist, Nursing and Health Sciences Division**

**College of DuPage** | 425 Fawell Blvd | Glen Ellyn, IL 60137

prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)



Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1470233  
Vendor Name: Radiation Detection Company  
Invoice Number: 4992582  
Invoice Date: 08/10/20  
PO Number: B0370454  
Check Number: E0081387  
Check Amount: \$ 1,584.75  
Check Date: 09/02/2020  
Department ID: 00221  
Reviewer Name: Colleen Gonzalez  
Voucher Number: V0640554  
Redaction Type: None  
Document Type: AP Invoice

Document Below



## RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	08/10/2020	4992582	PO # 347117	\$100.00

**Bill To**

College of DuPage  
Attn: Shelli Thacker or Colleen Prola  
425 Fawell Blvd  
Glen Ellyn IL 60137

**Ship To**

College of DuPage  
Attention: HSC - Amy Yarshen  
425 Fawell Blvd  
Glen Ellyn IL 60137

**Unreturned Dosimeter Charges**

Group	Order	Shipped	Unreturned Dosimeters	Quantity	Price	Amount
2	2348751.1	03/13/2020	04/27/2020 PIN 2803177 Control	1	20.00	20.00
2	2348751.1	03/13/2020	04/27/2020 PIN 2894174 Regan, Lesenia	1	20.00	20.00
2	2348751.1	03/13/2020	04/27/2020 PIN 3139414 Eldal, J	1	20.00	20.00
2	2348751.1	03/13/2020	04/27/2020 PIN 3151519 Rodgers, Stephanie	1	20.00	20.00
2	2348751.1	03/13/2020	04/27/2020 PIN 3115090 Subijano, Rudy	1	20.00	20.00

**INVOICE REVIEWED**  
**OKAY TO PAY**  
**COLLEEN GONZALEZ 08/26/20**

**APPROVED**  
**08/28/20 - DILYSS GALLYOT**

Terms: Net 30 days. A late payment charge of 1.5% per month may be charged on all invoices not paid within terms of sale.

**THIS IS AN ANNUAL PERCENTAGE RATE OF 18%**

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	08/10/2020	4992582	PO # 347117	\$100.00

**Please remit payment to:**

Radiation Detection Company, Inc.  
3527 Snead Drive  
Georgetown, TX 78626

**You may pay online using MyRadCare**

**Please charge my credit card**



Name on Card	
Card Number	
Expiration Date	Amount

-----  
From: prolac@cod.edu  
Sent: Tue Aug 25 21:45:19 CDT 2020  
To: invoicing@cod.edu  
CC:  
Subject: Route invoice for approval  
-----

Please route the attached to Dilyss Gallyot for approval; GL # 00221.

Thank you!

*Colleen Profa-Gonzalez*

**Program Support Specialist, Nursing and Health Sciences Division**

**College of DuPage** | 425 Fawell Blvd | Glen Ellyn, IL 60137

prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1470233  
Vendor Name: Radiation Detection Company  
Invoice Number: 4990848  
Invoice Date: 08/10/20  
PO Number: B0370454  
Check Number: E0081387  
Check Amount: \$ 1,584.75  
Check Date: 09/02/2020  
Department ID: 00221  
Reviewer Name: Colleen Gonzalez  
Voucher Number: V0640555  
Redaction Type: None  
Document Type: AP Invoice

Document Below



## RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	08/10/2020	4990848	PO # 347117	\$136.80

**Bill To**

College of DuPage  
Attn: Shelli Thacker or Colleen Prola  
425 Fawell Blvd  
Glen Ellyn IL 60137

**Ship To**

College of DuPage  
Attention: HSC-Amy Yarshen  
425 Fawell Blvd  
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
1	2414013.1	07/28/2020	82 TLD XBG Badge	07/29/2020-08/28/2020	1	0.00	0.00
1	2414013.1	07/28/2020	82 TLD XBG Badge	07/29/2020-08/28/2020	6	5.65	33.90
1	2414013.2	07/28/2020	05 TLD Plastic Ring	07/29/2020-08/28/2020	1	0.00	0.00
1	2414013.2	07/28/2020	05 TLD Plastic Ring	07/29/2020-08/28/2020	6	5.75	34.50
1	2414490.1	07/28/2020	05 TLD Plastic Ring	07/28/2020-08/27/2020	1	0.00	0.00
1	2414490.1	07/28/2020	05 TLD Plastic Ring	07/28/2020-08/27/2020	6	5.75	34.50
1	2414490.2	07/28/2020	82 TLD XBG Badge	07/28/2020-08/27/2020	1	0.00	0.00
1	2414490.2	07/28/2020	82 TLD XBG Badge	07/28/2020-08/27/2020	6	5.65	33.90

**APPROVED**  
**08/28/20 - DILYSS GALLYOT**

**INVOICE REVIEWED**

**OKAY TO PAY**

Terms: Net 30 days. A late charge of 5% per month may be charged on all invoices not paid within terms of sale.  
THIS IS AN ANNUAL PERCENTAGE RATE OF 10%

**COLLEEN GONZALEZ 08/26/20**

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	08/10/2020	4990848	PO # 347117	\$136.80

**Please remit payment to:**

Radiation Detection Company, Inc.  
3527 Snead Drive  
Georgetown, TX 78626

You may pay online using MyRadCare

**Please charge my credit card**

Name on Card	
Card Number	
Expiration Date	Amount

-----  
From: prolac@cod.edu  
Sent: Tue Aug 25 21:45:05 CDT 2020  
To: invoicing@cod.edu  
CC:  
Subject: Invoice for approval  
-----

Please route the attached to Dilyss Gallyot for approval; GL # 00221.

Thank you!

*Colleen Profa-Gonzalez*

**Program Support Specialist, Nursing and Health Sciences Division**

**College of DuPage** | 425 Fawell Blvd | Glen Ellyn, IL 60137

prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1470233  
Vendor Name: Radiation Detection Company  
Invoice Number: 4993340  
Invoice Date: 08/25/20  
PO Number: B0370454  
Check Number: E0081387  
Check Amount: \$ 1,584.75  
Check Date: 09/02/2020  
Department ID: 00221  
Reviewer Name: Colleen Gonzalez  
Voucher Number: V0640556  
Redaction Type: None  
Document Type: AP Invoice

Document Below





## RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	08/25/2020	4993340	PO # 347117	\$8.00

**Bill To**

College of DuPage  
Attn: Shelli Thacker or Colleen Prola  
425 Fawell Blvd  
Glen Ellyn IL 60137

**Ship To**

Amy Yarshen  
2845 N. Bulrush Ct.  
Coal City IL 60416

Date	Description	Quantity	Price	Amount
08/13/2020	EasyReturn Label - Shipment 2027621 Group 1	1	8.00	8.00

**APPROVED**  
**08/28/20 - DILYSS GALL**

**INVOICE REVIEWED**  
**OKAY TO PAY**  
**COLLEEN GONZALEZ 08/26/20**

Term: Net 30 days. A late payment charge of 1.5% per month will be charged on all unpaid bills after the due date. THIS IS AN ANNUAL PERCENTAGE RATE OF 18%

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	08/25/2020	4993340	PO # 347117	\$8.00

**Please remit payment to:**

Radiation Detection Company, Inc.  
3527 Snead Drive  
Georgetown, TX 78626

You may pay online using MyRadCare

**Please charge my credit card**



Name on Card	
Card Number	
Expiration Date	Amount



-----  
From: prolac@cod.edu  
Sent: Tue Aug 25 21:44:50 CDT 2020  
To: invoicing@cod.edu  
CC:  
Subject: Radiation Detection - invoice for approval  
-----

Please route the attached to Dilyss Gallyot for approval; GL # 00221.

Thank you!

*Colleen Profa-Gonzalez*

**Program Support Specialist, Nursing and Health Sciences Division**

**College of DuPage** | 425 Fawell Blvd | Glen Ellyn, IL 60137

prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1470233  
Vendor Name: Radiation Detection Company  
Invoice Number: 4990849  
Invoice Date: 08/10/20  
PO Number: B0370454  
Check Number: E0081387  
Check Amount: \$ 1,584.75  
Check Date: 09/02/2020  
Department ID: 00221  
Reviewer Name: Colleen Gonzalez  
Voucher Number: V0640628  
Redaction Type: None  
Document Type: AP Invoice

Document Below



## RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	08/10/2020	4990849		\$11.40

**Bill To**

College of DuPage  
Attn: Shelli Thacker or Colleen Prola  
425 Fawell Blvd  
Glen Ellyn IL 60137

**Ship To**

College of DuPage  
Attention: HSC-Amy Yarshen  
425 Fawell Blvd  
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Quantity	Price	Amount
5	2417012.1	08/03/2020	05 TLD Plastic Ring	1	0.00	0.00
5	2417012.1	08/03/2020	05 TLD Plastic Ring	1	5.75	5.75
5	2417012.2	08/03/2020	82 TLD XBG Badge	1	0.00	0.00
5	2417012.2	08/03/2020	82 TLD XBG Badge	1	5.65	5.65

**APPROVED**  
**08/28/20 - DILYSS GALLYOT**

**INVOICE REVIEWED**  
**OKAY TO PAY**

Terms: Net 30 days. A late payment charge of 1.5% per month may be charged on all invoices not paid within terms of sale.

THIS IS AN ANNUAL PERCENTAGE RATE OF 18%

**COLLEEN GONZALEZ 08/27/20**

Please detach and return this portion with your payment

Account	Date	Invoice	Purchase Order	Amount
104874	08/10/2020	4990849		\$11.40

**Please remit payment to:**

Radiation Detection Company, Inc.  
3527 Snead Drive  
Georgetown, TX 78626

You may pay online using MyRadCare

**Please charge my credit card**

Name on Card	
Card Number	
Expiration Date	Amount

-----  
From: prolac@cod.edu  
Sent: Tue Aug 25 21:45:39 CDT 2020  
To: invoicing@cod.edu  
CC:  
Subject: Route invoice for approval  
-----

Please route the attached to Dilyss Gallyot for approval; GL # 00221.

Thank you!

*Colleen Profa-Gonzalez*

**Program Support Specialist, Nursing and Health Sciences Division**

**College of DuPage** | 425 Fawell Blvd | Glen Ellyn, IL 60137

prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)