

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1086894
Vendor Name: JRCNMT
Invoice Number: 21-012
Invoice Date: 01/02/21
PO Number: P0372061
Check Number: E0083014
Check Amount: \$ 5,325.00
Check Date: 01/20/2021
Department ID: 00429
Reviewer Name: Colleen Gonzalez
Voucher Number: V0658109
Redaction Type: None
Document Type: AP Invoice

Document Below

From: Gonzalez, Colleen <prolac@cod.edu>
Sent: Mon Jan 11 22:08:47 CST 2021
To: invoicing@cod.edu
CC:
Subject: Route invoice for approval

Hello,

Please route the attached invoice for Dilyss Gallyot for approval, GL# 01-20-00429.

Thank you!

Colleen Prola-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)

[attachment: JRCNMT invoice \$5,325 sent AP 1.12.21.pdf]

APPROVED

01/12/21 - DILYSS GALLYOT



JOINT REVIEW COMMITTEE ON EDUCATIONAL PROGRAMS IN NUCLEAR MEDICINE TECHNOLOGY

820 W. Danforth Road, #B1 Edmond, OK 73003

Phone (405) 285-0546 / Fax (405) 285-0579

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Amy Yarshen, MBA, CNMT
College of DuPage
Nuclear Medicine Technology Program
425 Fawell Blvd
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Purchase Order #	Duns Number	Cage Code	Terms	JRCNMT Federal ID	Invoice Number	Invoice Date
372061			March 1, 2021	# 36-3964285	21-012	January 2, 2021

2021 Annual Accreditation Fees

<u>Name of Affiliate</u>	<u>City and State</u>
Advocate Good Samaritan Hospital	Downers Grove, IL
AMITA Adventist Bolingbrook	Bolingbrook, IL
AMITA Adventist Hinsdale	Hinsdale, IL
AMITA Adventist La Grange	LaGrange, IL
CGH Medical Center	Sterling, IL
Edward Hospital	Naperville, IL
Elmhurst College	Elmhurst, IL
HSBS St. Anthony's Memorial Hospital	Effingham, IL
Jesse Brown VA Medical Center	Chicago, IL
Lewis University	Romeoville, IL
Lurie Children's Hospital of Chicago	Chicago, IL
Molecular Imaging of Suburban Chicago	Hinsdale, IL
Mount Sinai Hospital	Chicago, IL
Northwest Community Hospital	Arlington Heights, IL
OSF Saint Francis Medical Center	Peoria, IL
Riverside Medical Center	Kankakee, IL
Rush University Medical Center	Chicago, IL
Sarah Bush Lincoln Health Center	Mattoon, IL
Silver Cross Hospital	New Lenox, IL

Unit Price \$175.00 for each Clinical and Academic affiliate

Page 1 of 2

INVOICE REVIEWED

OKAY TO PAY

COLLEEN CONZALEZ 01/12/21

Name of Affiliate**Skokie Hospital****St. Alexius Medical Center****Swedish American Hospital****Thank You!****City and State****Skokie, IL****Hoffman Estates, IL****Rockford, IL****Sponsor Fee: \$1,475.00****Affiliates Fees: 22 = \$3,850.00****Invoice Total: \$5,325.00**

Jan M. Winn, M.Ed., RT(N), CNMT
Executive Director***The JRCNMT does not accept credit cards***