

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087485
Vendor Name: Medline Industries, Inc.
Invoice Number: 1951127181
Invoice Date: 05/07/21
PO Number: P0373573
Check Number: 0281714
Check Amount: \$ 237.95
Check Date: 06/08/2021
Department ID: 00141
Reviewer Name: Adrianna Costello
Voucher Number: V0674075
Redaction Type: None
Document Type: AP Invoice

Document Below



www.medline.com

INVOICE

Customer PO #	Invoice Date	Invoice #
373573	05/07/2021	1951127181

Sold To:

COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

3 WAY MATCH

Ship To:

COLLEGE OF DU PAGE**
425 FAWELL BLVD
GLEN ELLYN, IL 60137-6599

SALES REP #		SALES ORDER #		CARRIER		FREIGHT TERMS		CUSTOMER #		CURRENCY		AMOUNT DUE	
3531		527506455		FEDEX GROUND		MEDLINE		1070839		USD		\$237.95	
LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION		CODE*	DELIVERY #		UNIT PRICE		AMOUNT		

10	5.00	BX	5.00	SQH4505Z	TE	8040108121	47.59	237.95
/SHIELD, FULL FACE DISPOSABLE								

GROSS	TAX AMOUNT	FREIGHT	TOTAL
237.95	0.00	0.00	\$237.95

Eligible Gross Amount \$237.95

Discount amount \$2.38 if recd. by 05/17/21

** Special Ship-To

* Code

TE - Tax Exempt

C - Customer Freight

CUSTOMER SHALL PAY THE FREIGHT CHARGES INDICATED ON THIS INVOICE. ALL CLAIMS OF SHORT SHIPMENTS, MIS-SHIPMENTS AND OTHER ERRORS IN DELIVERY SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN TWO BUSINESS DAYS OF THE INVOICE DATE, OR THEY ARE DEEMED WAIVED. ALL CLAIMS FOR PRICING AND BILLING ERRORS SHALL BE COMMUNICATED TO MEDLINE IN WRITING WITHIN 180 DAYS OF INVOICE DATE, OR THEY ARE DEEMED WAIVED.

EXPORT PROHIBITED CONTRARY TO U.S. FEDERAL LAWS. NO RETURNS WILL BE ALLOWED WITHOUT WRITTEN AUTHORIZATION. (PH: 800-307-8386)

INTEREST WILL BE CHARGED AT THE RATE OF 1.5% PER MONTH ON PAST DUE BALANCE

MEDLINE INDUSTRIES, INC. INCLUDES MEDLINE INDUSTRIES, INC. AND/OR ITS WHOLLY OWNED CONSOLIDATED SUBSIDIARIES, MEDLINE INDUSTRIES HOLDINGS, LP, A DELAWARE PARTNERSHIP, AND MEDCAL SALES, LLC, AN ILLINOIS LIMITED LIABILITY COMPANY, AS APPLICABLE

Billing Inquiries: 1-800-388-2147, A/R Svcs Rep: Kelly Schiel x7704778

REMITTANCE

Bill To:

COLLEGE OF DU PAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Customer #	1070839
Invoice #	1951127181
Invoice Date	05/07/2021
Sales Rep #	3531
Payment Terms	1% 10, Net 45
Amount Due	\$237.95

Remit To:

Medline Industries, Inc.
Dept CH 14400
Palatine IL 60055-4400

AMOUNT PAID \$ _____

Detach and return this portion with your payment

From: CustomerInvoices@medline.com <CustomerInvoices@medline.com >
Sent: Fri May 07 04:07:37 CDT 2021
To: invoicing@cod.edu
CC:
Subject: [External] Medline Invoices 1070839

CAUTION: This email originated from outside of COD's system. Do not click links, open attachments, or respond with sensitive information unless you recognize the sender and know the content is safe.

Attached are Medline invoice/s.

[attachment: 1951127181.PDF]