

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1630551
Vendor Name: Select Med Network Inc
Invoice Number: 0299
Invoice Date: 06/11/21
PO Number: B0373733
Check Number: E0085160
Check Amount: \$ 5,995.00
Check Date: 06/16/2021
Department ID: 00689
Reviewer Name: Kathy Striplin
Voucher Number: V0686765
Redaction Type: None
Document Type: AP Invoice

Document Below

SelectMed Network, Inc.
9 S. Elmhurst Road, #350
Prospect Heights, IL 60070
EIN: 26-1788797
Phone: 224-217-5210

June 11, 2021

Invoice 0299

Invoice

Bill To:

Attention: Accounts Payable
College of DuPage
425 Fawell Road
Glen Ellyn, IL 60137

APPROVED
06/15/21 - MONICA CHOWANIEC

Purchase Order Number: 373733
Re: 3 Onsite Hepatitis B Vaccines clinics

<u>Date of Service</u>	<u>Description</u>	<u>Fee</u>
June 7, 2021	Onsite Hepatitis B injections	
July 12, 2021	Onsite Hepatitis B injections	
December 13, 2021	Onsite Hepatitis B injections	

3 onsite visits for 60 injections ,
Includes-staffing/labor, supplies, travel-

Total amount due: \$5995.00

Please make check payable to: SelectMed Network, Inc

Please remit payment to: SelectMed Network, Inc.
P. O. Box 350
Prospect Heights, IL 60070

If you are paying by credit card, please contact us as a processing fee will be applied.

DUE UPON RECEIPT

Please include invoice number on remittance.

INVOICE REVIEWED
OKAY TO PAY
KATHY STRIPLIN 06/15/21

From: vicky Selectmednetwork.com <vicky@selectmednetwork.com >
Sent: Fri Jun 11 09:49:19 CDT 2021
To: invoicing@cod.edu
CC: chowaniecml57@cod.edu
Subject: [External] Purchase Order # 373733-Hepatitis B onsite

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.

Good morning,

Attached, please find the invoice for Purchase Order number 373733.
Please let me know if you have any questions.

Sincerely,
Vicky

Vicky Chiakulas
Selectmed Network, Inc.
9 S. Elmhurst Road, #350
Prospect Heights, IL 60070
Ph: 224-217-5210
Cell: 847-687-9535
www.selectmednetwork.com

[attachment: College Of DuPage Hep B onsite invoice.doc]