

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1082081

Vendor Name: Advocate Good Samaritan

Invoice Number: 205

Invoice Date: 08/11/21

PO Number:

Check Number: 0283763

Check Amount: \$ 90.00

Check Date: 08/17/2021

Department ID: 00253

Reviewer Name:

Voucher Number: V0693846

Redaction Type: Other

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: Gonzalez, Colleen <prolac@cod.edu>
Sent: Thu Aug 12 10:26:17 CDT 2021
To: invoicing@cod.edu
CC:
Subject: Route for approval

Please route the attached invoice to Jared Deane, 00253 for approval.

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: FY22 Nuc Med Good Sam invoice & voucher sent AP 8.12.21.pdf]



Advocate Good Samaritan Hospital

Inspiring medicine. Changing lives.

INVOICE

INVOICE # 205
DATE: AUGUST 11, 2021

Advocate Good Samaritan Hospital
Diagnostic Imaging Services
3815 Highland Avenue
Downers Grove, IL 60515

Lee Baker, Coordinator, Special Projects
Phone: 630-275-1294
Fax: 630-963-9410
E-Mail: Lee.Baker@aah.org

TO Colleen Gonzalez
College of DuPage
425 Fawell Boulevard
Glen Ellyn, IL 60137
Phone: 630-942-2994
E-mail: prolac@cod.edu
Cc: dumfords@cod.edu
Cc: langi@cod.edu

MODALITY	DUE DATE
Nuclear Medicine	Due on Receipt

SEMESTER	STUDENT	UNIT PRICE	LINE TOTAL
Summer 2021	[REDACTED] hr	45	\$45
Summer 2021	[REDACTED] r	45	\$45
<div>AP VERIFIED 08/12/21 - MARIA ZERRUDO</div>			
SUBTOTAL			\$90
SALES TAX			NA
TOTAL			\$90

Jared Deane

8/12/2021

Make all checks payable to: Advocate Good Samaritan Hospital

THANK YOU FOR YOUR BUSINESS!

From: acctpay@cod.edu
To: [Gonzalez, Colleen](#)
Subject: Voucher Confirmation: V0693846
Date: Wednesday, August 11, 2021 3:07:18 PM

Voucher Number V0693846
Voucher Status In Progress (Unfinished)

Requestor Name Ms Colleen E. Gonzalez

Voucher Date 08/11/21
Due Date 08/12/21
Vendor ID and/or Name 1082081 Advocate Good Samaritan
AP Type IM Invoices < \$15,000
Voucher Total \$90.00

ITEM 1

Item Description Nuc Med student D.P.
Quantity 3.000
Price \$15.0000
Extended Price \$45.00
GL Distribution 01-10-00253-5308001
Tax Info

ITEM 2

Item Description Nuc Med student R.S.
Quantity 3.000
Price \$15.0000
Extended Price \$45.00
GL Distribution 01-10-00253-5308001
Tax Info

COMMENTS


APPROVAL

8/12/2021
DATE

NEXT APPROVALS