

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1087485  
Vendor Name: Medline Industries, Inc.  
Invoice Number: 1953001225  
Invoice Date: 05/25/21  
PO Number: P0373794  
Check Number: 0283866  
Check Amount: \$ 85.39  
Check Date: 08/17/2021  
Department ID: 00225  
Reviewer Name: Adrianna Costello  
Voucher Number: V0682671  
Redaction Type: None  
Document Type: AP Invoice

Document Below



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# INVOICE

Customer PO #	Invoice Date	Invoice #
373794	05/25/2021	1953001225

**Sold To:**

COLLEGE OF DU PAGE

425 FAWELL BLVD

GLEN ELLYN, IL 60137-6599

**Ship To:**

COLLEGE OF DU PAGE

425 FAWELL BLVD

GLEN ELLYN, IL 60137-6599

**3 WAY MATCH**

SALES REP #		SALES ORDER #		CARRIER		FREIGHT TERMS		CUSTOMER #		CURRENCY		AMOUNT DUE	
3531		528597016		FEDEX GROUND		CUSTOMER		1070839		USD		\$52.75	
LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION		CODE*	DELIVERY #		UNIT PRICE		AMOUNT		

10	2.00	BX	2.00	484405Z	TE	8041973190	23.30	46.60
/GLOVE, EXAM, VINYL, STERILE, PF, LF, PR, SM								

<b>GROSS</b>	<b>TAX AMOUNT</b>	<b>FREIGHT</b>	<b>TOTAL</b>
46.60	0.00	6.15	\$52.75

Eligible Gross Amount \$46.60

Discount amount \$0.47 if recd. by 06/04/21

\* 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 # 1953001225

Invoice Date 05/25/2021

Sales Rep # 3531

Payment Terms 1% 10, Net 45

Amount Due \$52.75

**Remit To:**

Medline Industries, Inc.

Dept CH 14400

Palatine IL 60055-4400

AMOUNT PAID \$ \_\_\_\_\_

Detach and return this portion with your payment

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From: CustomerInvoices@medline.com <CustomerInvoices@medline.com >  
Sent: Tue May 25 03:03:38 CDT 2021  
To: invoicing@cod.edu  
CC:  
Subject: [External] Medline Invoices 1070839  
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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: 1953001225.PDF]

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1087485  
Vendor Name: Medline Industries, Inc.  
Invoice Number: 1953227918  
Invoice Date: 05/26/21  
PO Number: P0373794  
Check Number: 0283866  
Check Amount: \$ 85.39  
Check Date: 08/17/2021  
Department ID: 00225  
Reviewer Name: Adrianna Costello  
Voucher Number: V0682750  
Redaction Type: None  
Document Type: AP Invoice

Document Below



www.medline.com

# INVOICE

Customer PO #	Invoice Date	Invoice #
373794	05/26/2021	1953227918

Sold To:

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

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		528597016		FEDEX GROUND		CUSTOMER		1070839		USD		\$32.64	
LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION		CODE*	DELIVERY #		UNIT PRICE		AMOUNT		

20	1.00	BX	1.00	MDS194036Z	TE	8041996877	28.84	28.84
/GLOVE, EXAM, LATEX, PF, STERILE, PAIRS, LG								

<b>GROSS</b>	<b>TAX AMOUNT</b>	<b>FREIGHT</b>	<b>TOTAL</b>
28.84	0.00	3.80	\$32.64

Eligible Gross Amount \$28.84

Discount amount \$0.29 if recd. by 06/05/21

\* 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.

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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 #	1953227918
Invoice Date	05/26/2021
Sales Rep #	3531
Payment Terms	1% 10, Net 45
Amount Due	\$32.64

Remit To:

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

AMOUNT PAID \$ \_\_\_\_\_

Detach and return this portion with your payment

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From: CustomerInvoices@medline.com <CustomerInvoices@medline.com >  
Sent: Wed May 26 04:51:28 CDT 2021  
To: invoicing@cod.edu  
CC:  
Subject: [External] Medline Invoices 1070839  
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Attached are Medline invoice/s.

[attachment: 1953227918.PDF]