

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1081536
Vendor Name: ACERT
Invoice Number: 092021
Invoice Date: 9/20/2021
PO Number:
Check Number: E0086389
Check Amount: \$ 150.00
Check Date: 09/29/2021
Voucher Number: V0700583
Document Type: AP Invoice

Document Below



**ASSOCIATION OF COLLEGIATE EDUCATORS IN
RADIOLOGIC TECHNOLOGY
47th ANNUAL CONFERENCE
February 9-11, 2022**

GL# 01-20-00429-5406002

College of Dupage

ACERT INSTUTIONAL MEBERSHIP FEE INVOICE

Online Payment or Payment Postmarked by **December 15, 2021**
Institutional Membership fee = **\$150.00**

ONLINE CONFERENCE REGISTRATION AT:
<http://ACERT.org>

PAYMENT BY CHECK: Mail check payable to ACERT to:
**ACERT
PO BOX 855
OGDEN UT 84402-0855**

REFUND POLICY: A 20% fee plus credit card fees are deducted for cancellation.
Refund requests must be received by e-mail (acert@acert.org) one week prior to this
activity. **No refunds for requests received after January 15, 2021.**

Questions may be sent to: acert@acert.org
Attention: Stephanie Kawamura
ACERT CMT Member

"Gonzalez, Colleen" <prolac@cod.edu>

Invoice ACERT

"Gonzalez, Colleen" <prolac@cod.edu>

Mon, Sep 20, 2021 at 07:08 PM GMT

CC:

BCC:

Please route to Jared Deane 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)

1 attachment

ACERT \$150 sent AP 9.20.21.pdf