

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1496983

Vendor Name: Parts Town, LLC

Invoice Number: 27921820

Invoice Date: 9/20/2021

PO Number: P0000787

Check Number: E0086594

Check Amount: \$ 76.40

Check Date: 10/12/2021

Voucher Number: V0710518

Document Type: AP Invoice

Document Below



**INVOICE # 27921820**

REMIT TO: **PARTS TOWN, LLC**  
**27787 NETWORK PLACE**  
**CHICAGO, IL 60673-1277**  
Phone: 800-438-8898  
Phone: 630-620-1635  
Fax: 888-513-0259

<b>Billing Address</b>	COLLEGE OF DUPAGE 425 FAWELL BLVD  GLEN ELLYN, IL 60137	5037751
		US

<b>Shipping address</b>	COLLEGE OF DUPAGE 425 FAWELL BLVD  GLEN ELLYN, IL 60137
<b>Shipping Method</b>	UPS GROUND

Sales Order	Invoice Date	Order Date	Ship Date	Invoice Terms	Customer Purchase Order
217034	09/20/2021	09/20/2021		NET 30	P0000787

Part Number	Description	WH	Ship Qty	B/O Qty	Unit Price	Ext Amount
ACCAT0E-3336-1	ROTARY ON OFF SWITCH - G1 GRID	PT	2	0	\$28.70	57.40
Tariff Code: 841990		Country of Origin: US				
UPS Tracking # 1Z6254550339173703						

Total gross	:	\$57.40
Total freight	:	\$19.00
Misc charges	:	\$0.00
Total Tax	:	\$0.00
Total amount	:	\$76.40

ALL SHORTAGES, DEFECTS, OR ERRORS MUST BE REPORTED WITHIN FIVE (5) DAYS. RETURN ORDERS ARE ACCEPTED UP TO THIRTY (30) DAYS ONLY.  
NO RETURNS ACCEPTED WITHOUT OUR AUTHORIZATION. RETURNS DUE TO CUSTOMER ERROR ARE SUBJECT TO A RESTOCKING CHARGE AND THE OUTBOUND  
FREIGHT CHARGE IS OWED BY THE CUSTOMER. ALL WARRANTY PARTS MUST BE RETURNED WITHIN THIRTY (30) DAYS. PLEASE REFER TO PARTS TOWN ORDER  
NUMBER OR INVOICE NUMBER ABOVE WHEN SENDING CORRESPONDENCE OR DELAYS MAY OCCUR.

Accounting <Accounting@partstown.com>

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**[External] FW: invoice copy request acct#5037751**

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Accounting <Accounting@partstown.com>

Fri, Oct 8, 2021 at 07:46 PM GMT

CC:

BCC:

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.

Thank you

Genuinely,

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**Lisa Anderson**

Revenue Retriever

*AKA: Accounts Receivable Coordinator*

1200 Greenbriar Dr

Addison, IL 60101

P 800 438 8898  
M 260 496 7653  
F 260 496 7653  
[landerson@partstown.com](mailto:landerson@partstown.com)

**DOWNLOAD THE PARTS TOWN APP NOW USING LINK BELOW**

<https://www.partstown.com/app?ptref=land>

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**From:** Cruse, Bethany <cruseb199@cod.edu>  
**Sent:** Friday, October 8, 2021 2:59 PM  
**To:** Accounting <Accounting@partstown.com>  
**Subject:** invoice copy request acct:#5037751

**EXTERNAL**  
**Heads-up! From outside. Be safe!**

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Hello,

Please send inv# 27921820 to: [invoicing@cod.edu](mailto:invoicing@cod.edu)

Thanks

Bethany Cruse

AP Lead

College of DuPage

Room SRC 2132

425 Fawell Boulevard

Glen Ellyn, IL 60137

630-942-4294

[cruseb199@cod.edu](mailto:cruseb199@cod.edu)

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**4 attachments**

image003.jpg

image002.png

Invoice 27921820.pdf

image001.png