

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1087485  
Vendor Name: Medline Industries, Inc.  
Invoice Number: 2212080676  
Invoice Date: 5/20/2022  
PO Number: P0003098  
Check Number: 0299653  
Check Amount: \$ 433.66  
Check Date: 06/07/2022  
Voucher Number: V0739731  
Document Type: AP Invoice

Document Below



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# INVOICE

Customer PO #	Invoice Date	Invoice #
P0003098	05/20/2022	2212080676

**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

SALES REP #		SALES ORDER #		CARRIER		FREIGHT TERMS		CUSTOMER #		CURRENCY		AMOUNT DUE		
3650		556382381		FEDEX GROUND		MEDLINE		1070839		USD		\$19.14		
LINE NO.	ORDER QTY		U/M	INVOICE QTY		ITEM NO. / DESCRIPTION		CODE*	DELIVERY #		UNIT PRICE		AMOUNT	

40	1.00	CS	1.00	HCS4504B	TE	8091197897	19.14	19.14
/CANNULA,SOFT TOUCH,CURVED TIP,4' TUBE								

HCPCS Code #: A4615

GROSS	TAX AMOUNT	FREIGHT	TOTAL
19.14	0.00	0.00	\$19.14

Eligible Gross Amount \$19.14

Discount amount \$0.19 if recd. by 05/30/22

\*\* Special Ship-To

\*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 OR AS OTHERWISE CONTRACTUALLY STIPULATED AGAINST PAST DUE BALANCES.  
MEDLINE INDUSTRIES, LP IS AN ILLINOIS LIMITED PARTNERSHIP AND INCLUDES ITS WHOLLY OWNED SUBSIDIARY MEDLINE INDUSTRIES HOLDINGS, LP, A DELAWARE LIMITED PARTNERSHIP

Billing Inquiries: 1-800-388-2147, A/R Svcs Rep: Carly Saul x7704271

# REMITTANCE

**Bill To:**

COLLEGE OF DU PAGE  
425 FAWELL BLVD  
GLEN ELLYN IL 60137-6599

**Customer #**

1070839

**Invoice #**

2212080676

**Invoice Date**

05/20/2022

**Sales Rep #**

3650

**Payment Terms**

1% 10, Net 45

**Amount Due**

\$19.14

**Remit To:**

Medline Industries, LP  
Dept Ch 14400  
Palatine IL 60055-4400

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

Detach and return this portion with your payment

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

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**[External] Medline Invoices 1070839**

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"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

Fri, May 20, 2022 at 09:48 AM GMT

CC:

BCC:

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Attached are Medline invoice/s.

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**1 attachment**

2212080676.PDF

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1087485  
Vendor Name: Medline Industries, Inc.  
Invoice Number: 2211662581  
Invoice Date: 5/18/2022  
PO Number: P0003098  
Check Number: 0299653  
Check Amount: \$ 433.66  
Check Date: 06/07/2022  
Voucher Number: V0740610  
Document Type: AP Invoice

Document Below



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# INVOICE

Customer PO #	Invoice Date	Invoice #
P0003098	05/18/2022	2211662581

**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

SALES REP #		SALES ORDER #		CARRIER		FREIGHT TERMS		CUSTOMER #		CURRENCY		AMOUNT DUE		
3650		556382381		FEDEX GROUND		MEDLINE		1070839		USD		\$414.52		
LINE NO.	ORDER QTY		U/M	INVOICE QTY		ITEM NO. / DESCRIPTION		CODE*	DELIVERY #		UNIT PRICE		AMOUNT	

20	1.00	CS	1.00	HUD1059	TE	8090668317	125.00	125.00
/MASK,OXYGEN,NON-REBREATH,ADULT,SC								

HCPCS Code #: A4620

30	1.00	CS	1.00	OM14258ML	TE	8090668317	125.32	125.32
/MASK,O2,OXYMASK,ELASTIC,7' UC								

HCPCS Code #: A4620

40	1.00	CS	1.00	HUD1088	TE	8090847285	164.20	164.20
/O2 MASK,MULTI-VENT,ADULT,7 TUB SC								

HCPCS Code #: A4620

GROSS	TAX AMOUNT	FREIGHT	TOTAL
414.52	0.00	0.00	\$414.52

Eligible Gross Amount \$414.52

Discount amount \$4.15 if recd. by 05/28/22

\*\* Special Ship-To

\*Code

TE - Tax Exempt

C - Customer Freight

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**Invoice #**

2211662581

**Invoice Date**

05/18/2022

**Sales Rep #**

3650

**Payment Terms**

1% 10, Net 45

**Amount Due**

\$414.52

**Remit To:**

Medline Industries, LP  
Dept Ch 14400  
Palatine IL 60055-4400

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

Detach and return this portion with your payment

"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

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**[External] Medline Invoices 1070839**

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"CustomerInvoices@medline.com" <CustomerInvoices@medline.com>

Wed, May 18, 2022 at 10:20 AM GMT

CC:

BCC:

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**1 attachment**

2211662581.PDF