

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1553849
Vendor Name: Northwestern Memorial Foundation
Invoice Number: 96000000432
Invoice Date: 7/31/2021
PO Number: P0000480
Check Number: 0299666
Check Amount: \$ 3,680.00
Check Date: 06/07/2022
Voucher Number: V0740075
Document Type: AP Invoice

Document Below

M Northwestern
Memorial HealthCare
INVOICE

College of DuPage

Ryan Kaiser

425 Fawell Blvd.

Glen Ellyn, IL 60137

For questions, please contact us:

@ 1-312-926-2835 or miscbilling@nm.org

Invoice Date: July 31, 2021

Customer ID: 0000003303

Payment Terms #: NET30

Invoice #: 96000000432

Due Date: August 30, 2021

PO 480

Description	Amount
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Current Charges

Student Athlete Physicals

\$3,680.00

July 2021 92 physicals at \$40 each for a total of \$3,680.00

Total Due	\$3,680.00
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----- Please Return With Your Payment -----

541 N. Fairbanks
Floor 16 Suite 1600
Chicago, IL 60611

Invoice Date: 07/31/2021
Customer ID: 0000003303
Invoice #: 96000000432
Amount Due: \$3,680.00

Amount Enclosed: _____

BILL TO:
College of DuPage
Ryan Kaiser
Athletic Training Department
425 Fawell Blvd.
Glen Ellyn, IL 60137

SEND REMITTANCE TO:
please include customer ID# on check
Northwestern Memorial HealthCare
P.O. Box 73690
Chicago, IL 60673-7690

"Smith, Bev" <smithb244@cod.edu>

Attached Image

"Smith, Bev" <smithb244@cod.edu>

Wed, May 11, 2022 at 08:39 PM GMT

CC:

BCC:

1 attachment

2519_001.pdf