

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1409704
Vendor Name: Trajecsyst Corporation
Invoice Number: TIV_12_1_6441
Invoice Date: 6/1/2022
PO Number: P0003243
Check Number: E0090200
Check Amount: \$ 6,300.00
Check Date: 06/21/2022
Voucher Number: V0742260
Document Type: AP Invoice

Document Below



Trajecsyst Corporation
1800 Mendon Rd Ste E219
Cumberland, RI 02864 US
+1 8007417964
accountsreceivable@trajecsyst.com
www.trajecsyst.com

INVOICE

BILL TO

College of DuPage (Bookstore)
Diagnostic Medical Imaging
Sonography
425 Fawell Blvd.
Glen Ellyn, IL 60137

P0#003243

INVOICE # TIV_12_1_6441

DATE 06/01/2022

DUE DATE 06/01/2022

TERMS Due on receipt

ACTIVITY	QTY	RATE	AMOUNT
TRS - 12+ Trajecsyst Report System - 12-24 month access Radiography	42	150.00	6,300.00

BALANCE DUE

\$6,300.00

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

route for approval

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

Thu, Jun 2, 2022 at 02:10 AM GMT

CC:

BCC:

Thank you!

Colleen Prola-Gonzalez

Program Support Specialist, Health Sciences

College of DuPage 425 Fawell Blvd Glen Ellyn, IL 60137

prolac@cod.edu 630-942-2994 (ph) 630-942-4222 (fax)

1 attachment

Trajecsys \$6,300 SENT AP 6.1.22 Invoice_TIV1216441_from_Trajecsys_Corporation.pdf