

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087182
Vendor Name: Organization for Associate Degree Nursi
Invoice Number: OADN2022-1336
Invoice Date: 3/20/2022
PO Number: P0002633
Check Number: 0299211
Check Amount: \$ 575.00
Check Date: 05/13/2022
Voucher Number: V0738389
Document Type: AP Invoice

Document Below



Edwardsville, IL 62025

Payment address: Send checks to - 219 Second Avenue, Suite B Edwardsville, IL 62025 ; for credit card payments, see member portal instructions below or call 800.809.6260

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"Heller, Jeffrey" <hellerj704@cod.edu>

Invoice for OADN (Organization for Associate Degree Nursing)

"Heller, Jeffrey" <hellerj704@cod.edu>

Thu, Mar 24, 2022 at 01:00 PM GMT

CC:

BCC:

Hi,

I have attached an invoice from OADN (Organization for Associate Degree Nursing) for annual membership renewal.

If you have any questions or need more information, please do not hesitate to contact me.

Best wishes,

Jeff

Jeff Heller

Program Support Specialist-Associate Degree Nursing (ADN)

Nursing and Health Sciences Division

College of DuPage

425 Fawell Boulevard

Glen Ellyn, IL 60137

Phone: (630)-942-2617

Fax: (630) 942-4222

Email: hellerj704@cod.edu

Website: <https://www.cod.edu/academics/programs/nursing/index.aspx>

1 attachment

OADN Renewal Invoice.pdf