

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087485
Vendor Name: Medline Industries, Inc.
Invoice Number: 2253863596
Invoice Date: 2/15/2023
PO Number: P0005629
Check Number: 0310306
Check Amount: \$ 32.34
Check Date: 03/14/2023
Voucher Number: V0771306
Document Type: AP Invoice

Document Below



www.medline.com

INVOICE

Customer PO #	Invoice Date	Invoice #
P0005629	02/15/2023	2253863596

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		580848527		FEDEX GROUND		MEDLINE		1070839		USD		\$32.34	
LINE NO.	ORDER QTY	U/M	INVOICE QTY	ITEM NO. / DESCRIPTION		CODE*	DELIVERY #	UNIT PRICE		AMOUNT			

130	3.00	EA	3.00	MDSR001241	TE	8133107625	10.78	32.34
/HOLDER,UTENSIL,PLASTIC BASE,WEIGHTED								

GROSS	TAX AMOUNT	FREIGHT	TOTAL
32.34	0.00	0.00	\$32.34

Eligible Gross Amount \$32.34

Discount amount \$0.32 if recd. by 02/25/23

** 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 #	2253863596
Invoice Date	02/15/2023
Sales Rep #	3650
Payment Terms	1% 10, Net 45
Amount Due	\$32.34

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>

[External] Medline Invoices 1070839

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

Wed, Feb 15, 2023 at 11:12 AM UTC

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.

Attached are Medline invoice/s.

1 attachment

2253863596.PDF