

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1089219  
Vendor Name: Sunstar Butler  
Invoice Number: 948625  
Invoice Date: 2/23/2023  
PO Number: B0000799  
Check Number: E0094241  
Check Amount: \$ 298.40  
Check Date: 03/14/2023  
Voucher Number: V0776977  
Document Type: AP Invoice

Document Below

# INVOICE

# SUNSTAR

SUNSTAR AMERICAS, INC.

301 E. Central Road, Schaumburg, IL 60195  
(773) 777-4000

Order Department & Customer Service: (800) 528-8537  
DUNS 02-506-6358

**NEW! Pay your invoices on line at [pay.gumbrand.com](http://pay.gumbrand.com)**

Purchase Order Number		Customer Acct.	Sales#	Terms	Phone	Invoice No	Invoice Date	Page
BO 000799		59709	123	NET 30 DAYS		948625	2/23/23	1
Ship Via						Order No.		
U11						934892		

Sold To

**College Of Dupage**  
**Comm College Dist 502**  
**425 Fawell Blvd**  
**GLEN ELLYN IL 60137**

Ship To

**COLLEGE OF DUPAGE**  
**SHIPPING & RECEIVING**  
**425 FAWELL (FORMERLY 22ND)**  
**HOURS: 7:30-4:00PM**  
**GLEN ELLYN IL 60137**

ORDERED	QUANTITY		ITEM	UM	DESCRIPTION	UNIT PRICE	AMOUNT
	SHIPPED	BACK ORD					
12	12		591PH	DZ	Step: 1 BRUSH COMP CARE;COMP;SFT;PROF;BLSTR	6.20	74.40
6	0	6	898PQ	BX	Step: 2 FLOSS GUM ANGLED CLEAN FLOSSER PICKS	5.70	.00
2	2		670P	BX	Step: 3 CUSTOM CARE SFTPCCK;COMFLX;MINT;4/72;PRO;US	21.00	42.00
2	2		414PQF	BX	Step: 4 BUTLER OPERATORY GUM PROXABRUSH REFILLS TIGHT	5.20	10.40
Order by email per purchasing(Cindy) sg 2/1/2023 Purchase Order# BO 000799							

PLEASE PAY FROM THIS INVOICE

1 1/2% SERVICE CHARGE  
ADDED AFTER 30 DAYS  
18% ANNUALLY

Sales Tax .00

Total Invoice 126.80

Paid in Advance .00

Amount Due 126.80

PLEASE SHOW INVOICE AND CUSTOMER NUMBER WHEN REMITTING OR CORRESPONDING

NO CREDIT WILL BE ISSUED FOR UNAUTHORIZED RETURNS. FOR FULL RETURN POLICY SEE [WWW.SUNSTARAMERICAS.COM](http://WWW.SUNSTARAMERICAS.COM)

^DETACH AND RETURN THIS PART WITH PAYMENT^

The invoice may reflect a discount, rebate or other price reduction. Discounts may be involved in bundled product arrangements. Buyer is obligated to fully and accurately disclose and appropriately reflect the amount of the discount, rebate or other price reduction in any required cost or charge report to the Medicare or Medicaid programs and to provide appropriate documentation of the price reduction and net cost of the product to the Secretary of the Department of Health and Human Services on request. Seller will provide periodic information to the Buyer reflecting discounts, and other price reductions provided. Buyer may request additional information from the Seller in order to meet Buyer's reporting and disclosure obligations.

If you would like to receive your invoice/statement via e-mail or by fax, please provide the information below.

Fax Number OR Email



## REMITTANCE ADVICE

Make Check Payable and Mail To:

**Sunstar Americas Inc Professional**  
**P.O. Box 735207**  
**Chicago, Illinois 60673-5207**

Please visit [pay.gumbrand.com](http://pay.gumbrand.com) to pay via e-check or credit card.

Customer Login ID: 59709

Initial Password: 5970960137

Once you log in, you will be asked to change your password.

Terr	Cust. Number	Customer Name	Invoice No	Invoice Date	Amount Due
123	59709	College Of Dupage	948625	2/23/23	126.80

Original Invoice

**"Zerrudo, Marivic"** <zerrudom@cod.edu>

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**Attached Image**

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**"Zerrudo, Marivic"** <zerrudom@cod.edu>

Mon, Mar 6, 2023 at 08:17 PM UTC

CC:

BCC:

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**1 attachment**

2967\_001.pdf

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1089219  
Vendor Name: Sunstar Butler  
Invoice Number: 948221  
Invoice Date: 2/23/2023  
PO Number: B0000799  
Check Number: E0094241  
Check Amount: \$ 298.40  
Check Date: 03/14/2023  
Voucher Number: V0777007  
Document Type: AP Invoice

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Purchase Order Number		Customer Acct.	Sales#	Terms	Phone	Ship Via	Invoice No	Invoice Date	Page
BO-000799		59709	123	NET 30 DAYS		U11	948221	2/23/23	1
Order No.							930307		

Sold To

**College Of Dupage**  
**Comm College Dist 502**  
**425 Fawell Blvd**  
**GLEN ELLYN IL 60137**

Ship To

**COLLEGE OF DUPAGE**  
**SHIPPING & RECEIVING**  
**425 FAWELL (FORMERLY 22ND)**  
**HOURS: 7:30-4:00PM**  
**GLEN ELLYN IL 60137**



ORDERED	QUANTITY		ITEM	UM	DESCRIPTION	UNIT PRICE	AMOUNT
	SHIPPED	BACK ORD					
1	0	1	2010PQ	BX	Step: 2 FLOSS GUM EEZ-THRU FLOSS 4YD	30.40	.00
1	0	1	2014PQ	BX	GUM EEZ-THRU FLOSS MINT 4 YD	30.40	.00
2	0	2	885PQ	BX	GUM PROFESSIONAL CLEAN PLUS	5.70	.00
6	6		3614PQ	BX	Step: 3 CUSTOM CARE GUM WIDE PROXABRUSH GO-	14.30	85.80
3	3		871PQ	BX	Step: 4 BUTLER OPERATORY GUM ULTRA-TIGHT PROXABRUSH GO-	14.30	42.90
3	3		872PQ	BX	GUM TIGHT PROXABRUSH GO-	14.30	42.90

Order by email per Cindy Conley sg 1/9/2023  
Purchase Order# BO-000799

PLEASE PAY FROM THIS INVOICE

1 1/2% SERVICE CHARGE  
ADDED AFTER 30 DAYS  
18% ANNUALLY

Sales Tax .00

Total Invoice 171.60

Paid in Advance .00

Amount Due 171.60

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Initial Password: 5970960137

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Terr	Cust. Number	Customer Name	Invoice No	Invoice Date	Amount Due
123	59709	College Of Dupage	948221	2/23/23	171.60

Original Invoice

**"Zerrudo, Marivic"** <zerrudom@cod.edu>

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**Attached Image**

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**"Zerrudo, Marivic"** <zerrudom@cod.edu>

Mon, Mar 6, 2023 at 08:17 PM UTC

CC:

BCC:

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**1 attachment**

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