

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1191260

Vendor Name: Elmhurst Memorial Hospital

Check Details:

Check Number: 0337285

Check Amount: \$ 450.00

Check Date: 3/18/2025

Invoice Details:

Invoice Number: 2025-1

Invoice Date: 3/11/2025

PO Number: NULL

Voucher Number: V0876062

Document Type: AP Invoice

Document Below

INVOICE

Endeavor Health Elmhurst Hospital
155 E Brush Hill Rd
Elmhurst, IL 60126

INVOICE # 2025-1
Date: 3-11/2025

TO Colleen Prola Gonzalez
College of DuPage
425 Fawell Boulevard
Glen Ellyn, IL 60137
Phone: 630-942-2349
E-mail: prolac@cod.edu
Cc: dumfords@cod.edu

Vendor# 1191260
GL# 01-10-00253-5308001

MODALITY	PAYMENT TERMS	DUE DATE
DMIR - Radiography	Due on receipt	March 18, 2025

DATE OF SEMESTER	DESCRIPTION	UNIT PRICE	LINE TOTAL
Spring 2025	Alyssa Simi, Crystal Guadarrama, Kaitlin Quinn, Lluvia Lopez, Stephanie Martinez, Maria Varela	45	\$270
Spring 2025	Anna Bennici, Gianna Pavone, Jennifer Quintanilla, Kailey Krajewski, Sally Moore, Nathan George	30	\$180
	Subtotal		\$450
SALES TAX			NA
TOTAL			\$450

Make all checks payable to:

THANK YOU FOR YOUR BUSINESS!

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

Elmhurst invoice

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

Tue, Mar 11, 2025 at 06:49 PM UTC

CC:

BCC:

1 attachment

Elmhurst Invoice Spring 2025 (002).pdf