

**Information:**

**Drawer:** Accounts Payable - Invoices **Vendor Number:** 1735021 **Vendor Name:** OMNI Solutions LLC

**Check Details:**

**Check Number:** E0111127 **Check Amount:** \$ 40.00 **Check Date:** 12/16/2025

**Invoice Details:**

**Invoice Number:** 18518 **Invoice Date:** 12/1/2025 **PO Number:** B0003235  
**Voucher Number:** V0916300

**Document Type:** AP Invoice

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**Document Below**

OMNI Solutions LLC  
700 Moore St / PO Box 214  
Baraboo, WI 53913-2713  
+18444006664  
accounting@omnisaves.com

## Invoice



### BILL TO

College of DuPage Athletics  
425 Fawell Blvd  
Glen Ellyn, IL 60137

### SHIP TO

College of DuPage Athletics  
425 Fawell Blvd  
Glen Ellyn, IL 60137

# BO 3235

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
18518	12/01/2025	\$40.00	01/30/2026	Net 60	

DATE	DESCRIPTION	QTY	RATE	AMOUNT
	Lease - LUX MAX System	1	40.00	40.00T

Complete Installation equipment,  
specified UV/Ozone hybrid  
generators, stainless steel housing,  
all mounting hardware and fittings,  
287 and/or 484 Venturi injection  
bypass manifolds Included.

SUBTOTAL	40.00
TAX	0.00
TOTAL	40.00
BALANCE DUE	<b>\$40.00</b>

Pay invoice

**"Smith, Bev"** <smithb244@cod.edu>

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**Attached Image**

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**"Smith, Bev"** <smithb244@cod.edu>

Mon, Dec 1, 2025 at 06:18 PM UTC

CC:

BCC:

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**1 attachment**

1796\_001.pdf