

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

Check Details:

Check Number: E0114548 **Check Amount:** \$ 2,765.66 **Check Date:** 6/30/2026

Invoice Details:

Invoice Number: 5913304 **Invoice Date:** 5/31/2026 **PO Number:** B0003186
Voucher Number: V0944375

Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	05/31/2026	5913304		\$934.56

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
<i>Lab 2026-2028</i>							
27	3837814.1	05/20/2026	82 TLD XBG Badge	06/15/2026-09/14/2026	1	0.00	0.00
27	3837814.1	05/20/2026	82 TLD XBG Badge	06/15/2026-09/14/2026	59	15.84	934.56

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	05/31/2026	5913304		\$934.56

Please remit payment to:

Radiation Detection Co
3527 Snead Drive
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

A 2.75% credit card processing fee will be applied to all payments made by credit card.

"customercare@radetco.com" <customercare@radetco.com>

[External] Your Requested Invoice

"customercare@radetco.com" <customercare@radetco.com>

Mon, Jun 1, 2026 at 09:47 AM UTC

CC:

BCC:

body, td { font-family: Verdana, Arial, Helvetica, sans-serif; font-size: 11px; } .Personality1 { text-align: right; font-family: Verdana, Arial, Helvetica, sans-serif; font-weight: bold; font-size: 12px; color: #828282; } .GreyText { font-family: Verdana, Arial, Helvetica, sans-serif; font-size: 11px; color: #828282; } .ViewGrid { border: solid 1px #e6e6e6; line-height: 18px; } .ViewGridHeader { font-family: Trebuchet MS, Verdana, Arial, Helvetica, sans-serif; font-weight: normal; font-size: 11px; font-style: italic; color: #5c5c5c; line-height: 24px; } .ViewGridHeader th { padding-left: 4px; } .ViewGrid td { padding-left: 4px; } .ViewGridItem { background-color: #dce2e9; } .ViewGridAltItem { background-color: #fff; }

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Radiation Detection Company

Invoice Request

As requested, we are providing you with this invoice which has been issued for services on your account.

Thank you,
Radiation Detection Company

1 attachment

Invoice 5913304.pdf

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

Check Details:

Check Number: E0114548 **Check Amount:** \$ 2,765.66 **Check Date:** 6/30/2026

Invoice Details:

Invoice Number: 5913303 **Invoice Date:** 5/31/2026 **PO Number:** B0003186
Voucher Number: V0944381

Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	05/31/2026	5913303		\$871.20

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
<i>Clinical 2026-2028</i>							
26	3837813.1	05/20/2026	82 TLD XBG Badge	06/15/2026-09/14/2026	1	0.00	0.00
26	3837813.1	05/20/2026	82 TLD XBG Badge	06/15/2026-09/14/2026	54	15.84	855.36
26	3845380.1	05/30/2026	82 TLD XBG Badge	06/15/2026-09/14/2026	1	15.84	15.84

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	05/31/2026	5913303		\$871.20

Please remit payment to:

Radiation Detection Co
3527 Snead Drive
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

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"customercare@radetco.com" <customercare@radetco.com>

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Thank you,
Radiation Detection Company

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Invoice 5913303.pdf

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Drawer: Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

Check Details:

Check Number: E0114548 **Check Amount:** \$ 2,765.66 **Check Date:** 6/30/2026

Invoice Details:

Invoice Number: 5913302 **Invoice Date:** 5/31/2026 **PO Number:** B0003186
Voucher Number: V0944382

Document Type: AP Invoice

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RADIATION DETECTION CO

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Account	Date	Invoice	Purchase Order	Amount
104874	05/31/2026	5913302		\$601.92

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
<i>Clinical 2025-2027</i>							
23	3834653.1	05/18/2026	82 TLD XBG Badge	06/11/2026-09/10/2026	1	0.00	0.00
23	3834653.1	05/18/2026	82 TLD XBG Badge	06/11/2026-09/10/2026	38	15.84	601.92

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	05/31/2026	5913302		\$601.92

Please remit payment to:

Radiation Detection Co
3527 Snead Drive
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

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Radiation Detection Company

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Invoice 5913302.pdf

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

Check Details:

Check Number: E0114548 **Check Amount:** \$ 2,765.66 **Check Date:** 6/30/2026

Invoice Details:

Invoice Number: 5923369 **Invoice Date:** 6/15/2026 **PO Number:** B0003186
Voucher Number: V0944383

Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

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Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5923369		\$28.16

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Date	Description	Quantity	Price	Amount
06/10/2026	EasyReturn Label - Shipment 3279460 Group 25	1	28.16	28.16

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5923369		\$28.16

Please remit payment to:

Radiation Detection Co
3527 Snead Drive
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

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[External] Your Requested Invoice

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Tue, Jun 16, 2026 at 09:29 AM UTC

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Thank you,
Radiation Detection Company

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Invoice 5923369.pdf

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

Check Details:

Check Number: E0114548 **Check Amount:** \$ 2,765.66 **Check Date:** 6/30/2026

Invoice Details:

Invoice Number: 5923368 **Invoice Date:** 6/15/2026 **PO Number:** B0003186
Voucher Number: V0944384

Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

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Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5923368		\$20.86

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attention: Colleen Prola-Gonzalez
425 Fawell Blvd
Glen Ellyn IL 60137

Date	Description	Quantity	Price	Amount
06/10/2026	EasyReturn Label - Shipment 3279459 Group 5 Faculty (on-going)	1	20.86	20.86

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5923368		\$20.86

Please remit payment to:

Radiation Detection Co
3527 Snead Drive
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

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BCC:

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Radiation Detection Company

Invoice Request

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Thank you,
Radiation Detection Company

1 attachment

Invoice 5923368.pdf

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

Check Details:

Check Number: E0114548 **Check Amount:** \$ 2,765.66 **Check Date:** 6/30/2026

Invoice Details:

Invoice Number: 5926530 **Invoice Date:** 6/15/2026 **PO Number:** B0002980
Voucher Number: V0944386

Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

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Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5926530		\$259.95

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
<i>Nuclear Medicine Cohort 2026-2027</i>							
31	3859803.1	06/10/2026	82 TLD XBG Badge	07/01/2026-07/31/2026	1	0.00	0.00
31	3859803.1	06/10/2026	82 TLD XBG Badge	07/01/2026-07/31/2026	15	8.32	124.80
31	3859803.2	06/10/2026	ORA ORA Ring	07/01/2026-07/31/2026	1	0.00	0.00
31	3859803.2	06/10/2026	ORA ORA Ring	07/01/2026-07/31/2026	15	9.01	135.15

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5926530		\$259.95

Please remit payment to:

Radiation Detection Co
3527 Snead Drive
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

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"customercare@radetco.com" <customercare@radetco.com>

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"customercare@radetco.com" <customercare@radetco.com>

Tue, Jun 16, 2026 at 09:41 AM UTC

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Thank you,
Radiation Detection Company

1 attachment

Invoice 5926530.pdf

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

Check Details:

Check Number: E0114548 **Check Amount:** \$ 2,765.66 **Check Date:** 6/30/2026

Invoice Details:

Invoice Number: 5926526 **Invoice Date:** 6/15/2026 **PO Number:** B0002980
Voucher Number: V0944387

Document Type: AP Invoice

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RADIATION DETECTION CO

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Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5926526		\$17.33

Bill To
College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To
College of DuPage
Attention: Colleen Prola-Gonzalez
425 Fawell Blvd
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
Faculty (on-going)							
5	3859801.1	06/10/2026	82 TLD XBG Badge	07/01/2026-07/31/2026	1	0.00	0.00
5	3859801.1	06/10/2026	82 TLD XBG Badge	07/01/2026-07/31/2026	1	8.32	8.32
5	3859801.2	06/10/2026	ORA ORA Ring	07/01/2026-07/31/2026	1	0.00	0.00
5	3859801.2	06/10/2026	ORA ORA Ring	07/01/2026-07/31/2026	1	9.01	9.01

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5926526		\$17.33

Please remit payment to:

Radiation Detection Co
3527 Snead Drive
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

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Thank you,
Radiation Detection Company

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Invoice 5926526.pdf

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

Check Details:

Check Number: E0114548 **Check Amount:** \$ 2,765.66 **Check Date:** 6/30/2026

Invoice Details:

Invoice Number: 5926529 **Invoice Date:** 6/15/2026 **PO Number:** B0003186
Voucher Number: V0944389

Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5926529		\$15.84

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
<i>Lab 2026-2028</i>							
27	3867129.1	06/15/2026	82 TLD XBG Badge	06/23/2026-09/14/2026	1	15.84	15.84

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5926529		\$15.84

Please remit payment to:

Radiation Detection Co
3527 Snead Drive
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

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BCC:

body, td { font-family: Verdana, Arial, Helvetica, sans-serif; font-size: 11px; } .Personality1 { text-align: right; font-family: Verdana, Arial, Helvetica, sans-serif; font-weight: bold; font-size: 12px; color: #828282; } .GreyText { font-family: Verdana, Arial, Helvetica, sans-serif; font-size: 11px; color: #828282; } .ViewGrid { border: solid 1px #e6e6e6; line-height: 18px; } .ViewGridHeader { font-family: Trebuchet MS, Verdana, Arial, Helvetica, sans-serif; font-weight: normal; font-size: 11px; font-style: italic; color: #5c5c5c; line-height: 24px; } .ViewGridHeader th { padding-left: 4px; } .ViewGrid td { padding-left: 4px; } .ViewGridItem { background-color: #dce2e9; } .ViewGridAltItem { background-color: #fff; }

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.

Radiation Detection Company

Invoice Request

As requested, we are providing you with this invoice which has been issued for services on your account.

Thank you,
Radiation Detection Company

1 attachment

Invoice 5926529.pdf

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1470233 **Vendor Name:** Radiation Detection Company

Check Details:

Check Number: E0114548 **Check Amount:** \$ 2,765.66 **Check Date:** 6/30/2026

Invoice Details:

Invoice Number: 5926528 **Invoice Date:** 6/15/2026 **PO Number:** B0003186
Voucher Number: V0944391

Document Type: AP Invoice

Document Below



RADIATION DETECTION CO

3527 Snead Drive | Georgetown, Texas 78626 | 512.831.7000 | Fax 512.861.0456 | www.radetco.com

Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5926528		\$15.84

Bill To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Ship To

College of DuPage
Attn: Shelli Thacker or Colleen Prola
425 Fawell Blvd
Glen Ellyn IL 60137

Group	Order	Shipped	Description	Wear Period	Quantity	Price	Amount
Clinical 2026-2028							
26	3854297.1	06/07/2026	82 TLD XBG Badge	06/15/2026-09/14/2026	1	15.84	15.84

Please detach and return this portion with your payment

Payment terms are NET 30 days

Account	Date	Invoice	Purchase Order	Amount
104874	06/15/2026	5926528		\$15.84

Please remit payment to:

Radiation Detection Co
3527 Snead Drive
Georgetown, TX 78626

Pay online at:

<https://myradcare.radetco.com>

Please charge my credit card



Name on Card	
Card Number	
Expiration Date	Amount

A 2.75% credit card processing fee will be applied to all payments made by credit card.

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

Radiation Detection

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

Mon, Jun 22, 2026 at 02:58 PM UTC

CC:

BCC:

Thank you!

Colleen Prola-Gonzalez

Program Support and Admissions Specialist, Health Sciences

College of DuPage 425 Fawell Blvd Glen Ellyn, IL 60137

prolac@cod.edu 630-942-2994 (ph) 630-942-4222 (fax)

1 attachment

Rad Detection \$15.84 SENT AP 6.22.26 Invoice 5926528.pdf