lohnson & Johnson Medical

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> SHIP TO ATTN: ATTENTION H1- Retail 123 ADDRESS CT

SAN MATEO CA 94404

V1- New York City 123 ADDRESS CT NEW YORK NY 10022-3422

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TEST

ORIGINAL INVOICE

ACCOUNT NUMBER INVOICE NUMBER

13-SEP-2019 INVOICE DATE

DUE DATE AMOUNT DUE 31-SEP-2019 \$ 2847.36

800001166

PO NUMBER:

CURRENCY: USD

DEPARTMENT: 7777777 PROJECT/JOB: 4444

REQUISITIONER: REQUIST NAME CALLER: SHARON CARPENTE

CUSTOMER PHONE: 555-555-5555 ORDER NUMBER: 1188465007 INCO TERMS: **FOB ORIGIN**

THANK YOU!

FEI NUMBER 36-1150280

FOR QUESTIONS ABOUT THIS INVOICE OR ACCOUNT CALL 1-800-472-4643

| PO LINE# | ITEM# | DESCRIPTION | QUANTITY | UNIT PRICE | TOTAL |
|-------------|-------|--|------------|------------|-------|
| 2 | | SUBSTITUTE STRAND, 1/4IN 5000FT PER REEL | 12 | 9 | 108 |
| 1 | | SHACKLE 0001 RG 2983 | 72 | 9 | 648 |
| 3 | | Transmission - 4 Speed Light Duty | 79 | 24 | 1896 |
| | | | | | |
| | | | | | |
| | | | INIVOICE C | | 2652 |

INVOICE SUB TOTAL TAX 195.36 2652

These items are sold for domestic consumption in the United States. If exported, purchaser assumes full responsibility for compliance with US export controls.

AMOUNT DUE

\$ 2847.36

PAYMENT TERMS Net 30 days - PAY THIS INVOICE. NO STATEMENT SENT. PAYABLE IN U.S. DOLLARS.

PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

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X

V1- New York City 123 ADDRESS CT KINGSTON IL 60145-0000 UNITED STATES OF AMERICA

REMIT TO: Johnson & Johnson Medical DEPT. 800001166 PALATINE, IL 60038-0001

800001166919883000310001698861001402610000000100000014010366

ACCOUNT NUMBER 800001166

DATE 13-MAR-2019 INVOICE NUMBER ABC00006

AMOUNT DUE **\$** 2847.36