

**INVOICE****Invoice No. 2025-0026**

mrresearch@wright.edu

937-775-3904

Description: MRI scans for project titled "MRI Scanning Support Cog Neuro"

**Bill To:**

Wright State University  
Department: NCBP  
Contact Person: Matthew Sherwood  
Contact Email: matt.sherwood@wright.edu  
Contact Phone: 937-524-3924  
Fund: 672130  
Org: 224654  
Account: 731200  
Program: 20052

**Remit To:**

Wright State University  
CoNECT MRI  
3640 Colonel Glenn Hwy  
Dayton, OH 45435  
3640 Colonel Glenn Hwy

date	arr. time	dep. time	sch. dur.	cancelled on	charged time	direct scan fee
08/11/25	1052	1258	105	-	2.25	\$612.00
08/12/25	1015	1300	150	-	2.75	\$748.00
08/13/25	1016	1245	150	-	2.5	\$680.00
08/14/25	1025	1300	150	-	2.75	\$748.00
08/15/25	1015	1130	75	-	1.25	\$340.00
08/18/25	1015	1200	105	-	1.75	\$476.00
08/19/25	0915	1145	150	-	2.5	\$680.00
08/20/25	0845	1115	150	-	2.5	\$680.00
08/21/25	0920	1200	150	-	2.75	\$748.00
08/22/25	0915	1030	75	-	1.25	\$340.00
08/25/25	1145	1300	105	no show - cx @ 1145 8/25	1.75	\$476.00
08/26/25	0915	1030	150	no show - cx @ 1145 8/25	2.5	\$680.00
TOTAL					26.50	\$7,208.00

'arr. time' is the arrival time on the physical scan log

'dep. time' is the departure time on the physical scan log

'sch. dur.' is the scheduled duration in minutes

'charged time' is the greater of scheduled duration or actual duration in hours

This invoice was produced using the scan rate of \$272 per MRI hour in accordance with the CoNECT MRI billing policy. The billing policy is available via [www.wright.edu/connect-lab](http://www.wright.edu/connect-lab).