

McKESSON

McKesson Medical-Surgical
Government Solutions LLC
9954 Mayland Drive Suite 5176
Henrico, VA 23233

Bill To: 58858328

Invoice

Page 1 of 1

RCHAP6519

Shipped From:

McKESSON MEDICAL-SURGICAL INC(NORTHBORGH)
55 LYMAN STREET, SUITE 1
NORTHBOROUGH, MA 01532
SHIPPED FROM LICENSE: CSW.0001336

Shipped To: 65525743

OXFORD MIDDLE SCHOOL
40 GREAT OAK RD
OXFORD CT 06478-1982
Ordered By: REP
REGULATORY LICENSE: 000322

OXFORD PUBLIC SCHOOLS
ATTN ACCOUNTS PAYABLE
144 OXFORD RD STE 1B
OXFORD CT 06478-1982

Payment / Account Balance Inquires 1-800-453-5180
Phone:

Customer Service Phone: 1-800-234-1464

Sales Order Number	96326751	Invoice Number	18051390
Sales Order Date	02/17/2021	Invoice Date	02/25/2021
PO Number	recliner	Payment Due Date	03/27/2021
Sales Rep Name	PHELAN, MICHAEL	Invoice Amount	\$1,608.67

Notes: The complete Terms of Sale that apply to this purchase are located at <https://mms.mckesson.com/content/terms-of-sale-primary-care>. Customer is responsible for reviewing the Terms of Sale in full.

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com

Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1130956	Vendor: MGM189 Vend Cat#: MCK596T45-TF7	RECLINER, MANUAL TRENDELENBURG PO LN 1	1	EA	1	1608.67	1608.67	.00	
Tracking # 065001363110									
Shipped: 02/25/2021 From: Northborough Via: PRIVATE FLEET - BOST - BOSTON Broker Lic: CSW.0004343									

SUB TOTAL	FREIGHT	TAX	AMOUNT
\$1,608.67	\$0.00	\$0.00	\$1,608.67

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.
PRICING IS CONFIDENTIAL AND PROPRIETARY.

Invoice

RCHAP6519

McKESSON

McKesson Medical-Surgical
Government Solutions LLC
9954 Mayland Drive Suite 5176
Henrico, VA 23233

Account Number	58858328	Date	02/25/2021
Document Number	18051390	Terms	AR NET 30 DAYS
Pay This Amount Before	03/27/2021	Amount	\$1,608.67

OXFORD PUBLIC SCHOOLS
ATTN ACCOUNTS PAYABLE
144 OXFORD RD STE 1B
OXFORD CT 06478-1982

Please contact us regarding electronic payment options at MMS.Treasury@McKesson.com.

Please Remit To:
McKESSON MEDICAL - SURGICAL
PO BOX 936279
ATLANTA GA 31193-6279