



INVOICE

Jubilant HollisterStier LLC
 PO Box 3145
 Spokane WA 99220
 Customer Service 800-495-7437

INVOICE DATE	PAGE	OF	INVOICE NO.
12/27/2023	1	2	91855118
DATE ORDER RECEIVED	12/21/2023		
PURCHASE ORDER NO.	LA00108240		
TRACKING NO.	705595171309		

REMITTANCE INFORMATION BELOW

BILL TO:

Our Lady of the Lake Childrens Hosp
 PO Box 83880
 Baton Rouge LA US 70884

SHIP TO:

Pediatric Allergy & Immunology
 PO LA00108240
 8300 Constantin Blvd
 Baton Rouge LA US 70809

PAY INVOICE ONLINE <https://orders.hsallergy.com>

CUSTOMER NUMBER	JHS ORDER NO.	INVOICE NO.	TERMS
37391100	522624	91855118	Net 30 days from invoice date

ITEM NO.	DESCRIPTION	U/M	QTY SHIPPED	UNIT PRICE	AMOUNT
6784UX3	**FOR CUSTOMER SERVICE OR** ** TO ORDER CALL 800.495.7437* Pick List# 0081022896 EACH ITEM CONFIRMED ALL ITEMS NON RETURNABLE Wasp 12D FG (US) WASP VENOM B2300027	EA	5	481.50	2,407.50
6785UX	MULTIDOSE VENOM 1300MCG 12DOSE YELLOW JACKET VENOM B2300014 TAXES	EA	6	400.50	2,403.00
					144.32



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	FREIGHT				

SHIPPING ERRORS MUST BE REPORTED WITHIN 7 DAYS AFTER RECEIPT OF MERCHANDISE.
ITEMS MAY NOT BE RETURNED FOR CREDIT OR EXCHANGE WITHOUT PRIOR WRITTEN AUTHORIZATION, WHICH MUST ACCOMPANY ALL RETURNED GOODS.

NET SALES AMOUNT	MISCELLANEOUS CHARGES	LA TAXES	TERMS DISCOUNT	AMOUNT DUE
4,810.50	0.00	State 0.00 County 0.00 City 0.00 Local 144.32	0.00	4,954.82

Please remit to:
Jubilant HollisterStier LLC
14110 Collections Center Drive
Chicago, IL 60693-0141

PLEASE RETURN THIS STUB WITH REMITTANCE

BILL TO	TELEPHONE
Our Lady of the Lake Childrens Hosp PO Box 83880 Baton Rouge, LA 70884	225-374-6565
PURCHASE ORDER NUMBER	JHS ORDER NO.
LA00108240	522624

Jubilant HollisterStier LLC
14110 Collections Center Drive
Chicago, IL 60693-0141

CUSTOMER	INVOICE NO.	INVOICE DATE	TERMS DISCOUNT	TERMS	AMOUNT DUE
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