

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1086848
Vendor Name: NAFSA Membership
Invoice Number: 20200601-32442
Invoice Date: 06/29/20
PO Number: P0370103
Check Number: 0270945
Check Amount: \$ 2,045.00
Check Date: 07/14/2020
Department ID: 00401
Reviewer Name: None
Voucher Number: V0631873
Redaction Type: None
Document Type: AP Invoice

Document Below

From: brownk346@cod.edu
Sent: Mon Jun 29 09:33:24 CDT 2020
To: invoicing@cod.edu
CC: smidka@cod.edu
Subject: NAFSA Membership Invoice

Good morning!

Attached is the invoice for our department's NAFSA membership dues. I've included the purchase order and contract approval as well. Please let me know if you have any questions.

Best,
Kelsey

Kelsey Brown

International Student Services Assistant, DSO
Co-Chair, Latin American Studies Committee
Co-Advisor, Casa de Amigos
College of DuPage
(630) 942-3328



NAFSA: Association of International Educators
 1307 New York Avenue, NW, 8th Floor
 Washington DC, 20005-4701
 Phone: 1.202.737.3699
 E-mail: membership@nafsa.org
 Website: www.nafsa.org
 Federal ID No.: 13-1878953

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For your security, NAFSA does not accept credit card information over the phone or by email.

Payment is due within 60 days of group membership confirmation.

We look forward to serving you!

Pay Online

Credit/debit card payments are processed securely online at <https://shop.nafsa.org/dues.aspx>.

Pay By Mail

Check payments may be mailed with your invoice to:

NAFSA Membership Department
 P.O. Box 79159
 Baltimore, MD 21279-0159

For wire transfer information, please contact membership@nafsa.org for instructions and details.

APPROVED
GROUP MEMBERSHIP INVOICE
06/30/20 - KATHLEEN SMID
 Invoice # 20200601-32442

Kathleen Smid
 College of DuPage
 International Student Services, SSC 2225
 425 Fawell Blvd
 Glen Ellyn, IL 60137
 UNITED STATES

Group Members

Full Name	Member	Category	Fee	Renewed Thru
	IND	BRONZ	\$409.00	06/30/2021
	IND	BRONZ	\$409.00	09/30/2021
	IND	BRONZ	\$409.00	06/30/2021
	IND	BRONZ	\$409.00	06/30/2021
	NM	BRONZ	\$409.00	06/30/2021
			\$2045.00	Total Due

Bill To:**College of DuPage**

College of DuPage Accounts Payable
425 Fawell Blvd.
Glen Ellyn, IL 60137

Accounts Payable, SRC2049
Phone: 630-942-2228
Fax: 630-858-9078

Vendor:

1086848
NAFSA Membership
PO Box 79159
Baltimore, MD 21279-0159

Attn: Customer Service

Phone: 123-123-1234
Fax:

PURCHASE ORDER

370103

Page: 1

Release Method: Hard Copy

Release Date: 06/29/2020

Created Date: 06/29/2020

Ship To:

College of DuPage Shipping & Receiving
425 Fawell Blvd.
Glen Ellyn, IL 60137

Purchasing, Manager

Phone: 630-942-2238

Fax: 630-942-2417

Deliver To: Brown, Kelsey

PO Created By: Towne, Jordan

Purchase Order Comments:

Requisition Number(s): 680230

Requisitioner Name(s): Kelsey Brown

#	Vendor Item	QTY	UOM	Description	Unit Price	Total Price
1		5	Each	NAFSA Membership - Group Membership	\$409.00	\$2,045.00
Deliver To: Brown, Kelsey						
Sub Total: \$						2,045.00
Total: \$						2,045.00

Account Code Summary

Account Code	Account Description	Amount
01-10-00401-5406002		\$2,045.00

Terms and Conditions:

1. F.O.B. DESTINATION unless otherwise indicated under Purchase Order Comments.
2. College of DuPage will only accept electronic invoices, which can be in any format, including but not limited to PDF, Word, Excel. Invoices must reference the COD Purchase Order Number. Invoices are to be emailed to invoicing@cod.edu. Questions about payment status or other inquiries, please email acctpays@cod.edu or call 630-942-2228.
3. All payments are processed via ACH transfer on a weekly basis. You are strongly encouraged to set up your ACH account upon receipt of this PO to avoid unnecessary payment delays. A letter will be sent to you under separate cover which outlines the set-up instructions, your log-in, and temporary password. Invoices must be received in an electronic format at least three weeks prior to the due date and are to be emailed to invoicing@cod.edu. Paper checks are issued once-a-month. A paper check will be issued to foreign vendors that are not eligible for ACH transfer.
4. All invoices must be provided to the College for services rendered directly to the College. Undisputed invoices will be paid within sixty (60) days of receipt of properly submitted invoices to the Contractor, in accordance with the Local Government Prompt Payment Act.
5. All solicitations must be directed to the Purchasing Department. Any vendor selling directly to any faculty or staff member, without prior authorization from the Purchasing Department will be removed from our vendor list.
6. College of DuPage is exempt from payment of the Retailers' Occupation Tax, the Service Occupation Tax (both state and local), the Use Tax, and the Service Use Tax. The College's Tax Exemption Identification Number is E9997-3391-06.
7. If unable to ship and/or deliver as required, advise the Purchasing Department immediately with full details at 630-942-2217.
8. All packages shall clearly indicate the purchase order number and contain a packing list of all contents with itemized descriptions.
9. All shipments are accepted subject to inspection and approval by College of DuPage.
10. Any company/organization to be awarded a contract for goods and/or services must be in compliance with the fair employment practice act and all rules & regulations thereunder.
11. Suppliers are required to comply with executive orders 11246, 11375, The Rehabilitation Act of 1973, and the Vietnam Readjustment Act of 1974.
12. All contracts for construction work are subject to the provisions of 820 ILCS 130, ch. 48, Par. 39s-1 through 39s-12, providing for payment of the prevailing rate of wages to laborers, workmen & mechanics. Contractor shall submit to the College, monthly certified

Bill To:**College of DuPage**

College of DuPage Accounts Payable
425 Fawell Blvd.
Glen Ellyn, IL 60137

Accounts Payable, SRC2049

Phone: 630-942-2228

Fax: 630-858-9078

payroll records for all workers and sub-contractors utilized for the project.

PURCHASE ORDER

370103

Page: 2

Release Method: Hard Copy

Release Date: 06/29/2020

Created Date: 06/29/2020

CONTRACT APPROVAL COVERSHEET

Contract Name: NAFSA Membership 2020-2021

Requesting Department: International Student Services Date Initiated: 6/1/2020

Contact Name: Kathy Smid Phone: x3328

Email Address: smidka@cod.edu

Vendor Name: NAFSA Phone: 202-737-3699

Vendor Contact: NAFSA Membership Department Email: membership@nafsa.org

Total Contract: \$ 2045.00 Contract Dates: Start: 07/1/2020

FY Budget \$ 2045.00 End: 06/30/2021

Vendor 1: Name _____ Quote: \$ _____

Vendor 2: Name _____ Quote: \$ _____

Vendor 3: Name _____ Quote: \$ _____

Contract Purpose: _____

Contract Type: ☐ Independent Contractor ☐ Service Agreement ☐ Lease
☐ Construction ☒ Other

Has the College contracted with this vendor in the past or is this a renewal or extension of a previously approved contract? ☐ Yes ☒ No (If YES, attach a copy of the relevant agreement.)

Are required support documents attached? (see page 2) ☒ Yes

I certify that I have read and understand the terms of this agreement and have appropriate authority to submit this agreement on behalf of my department. I further certify that the agreement is complete and includes all exhibits, attachments and pages.

Print
Sign & Date

Requester: Kathy Smid

Budget Mgr.: Tamara McClain

Dept. Adm.: Diana del Rosario

Kathleen Smid Digitally signed by Kathleen Smid
Date: 2020.06.18 16:08:05 -05'00'

Tamara McClain Digitally signed by Tamara McClain
Date: 2020.06.22 20:23:05 -05'00'

Diana Del Rosario Digitally signed by Diana Del Rosario
Date: 2020.06.25 11:56:24 -05'00'

Submit to Procurement at purchasing@cod.edu.

Purchasing Dept. Use Only

Comments _____

Approval Initials _____

REVIEWED

By Lisa Erl at 8:23 am, Jun 29, 2020

CONTRACT APPROVAL COVER SHEET (Instructions)

Per Administrative Procedure 10-60, all contracts entered into on behalf of the College of DuPage must be signed by the Vice President, Administration. This form must be completed in full and submitted with all contracts that require a signature at least three (3) weeks prior to the contract start date.

Submit the contract, along with this form and all required support documents as outlined below, to Procurement. Procurement will review all documents, and, if appropriate, will forward to the Vice President, Administration for signature. Contracts submitted without complete documentation will be returned to the requester.

Required support documentation: (Select only one)

- ☒ 1. Contract value less than \$5,000: Contract Purpose section should indicate action taken to confirm best price.
- ☐ 2. Contract value between \$5,000 and \$14,999: minimum of three (3) verbal quotes must be documented (vendor name and quoted amount) on this form or an attached sheet.
- ☐ 3. Contract value between \$15,000 and \$24,999: minimum of three (3) written quotes must be attached.
- ☐ 4. Contract value of \$25,000 or greater: bid results (bid tabulation or RFP evaluation matrix), Board Report, and confirmation of Board approval (meeting minutes or Cabinet confirmation).
- ☐ 5. Contracts submitted as sole source: full justification of sole source and letter from the vendor confirming they are the only source of the product/service.

- *If vendor will be providing a service on campus, a Certificate of Insurance listing the College as an additional insured, accompanied by an endorsement page is required. For additional information contact Risk Manager.*
- *If computer equipment and/or software is being procured, a completed Computer Equipment/Software form (IT Review) must be included.*

Upon signature by the Vice President, Administration, the original contract will be returned to the requester and a copy will be sent to the Procurement Department at purchasingforms@cod.edu for inclusion in the College's contract database. If a vendor/contractor signature is still required after signature by the Vice President, Administration, it is the responsibility of the requester to obtain the remaining signature(s) and forward a copy of the fully executed contract to Procurement at purchasingforms@cod.edu for inclusion in the College's contract database.

This approval cover sheet, and supporting documents, must be submitted at least three (3) weeks prior to the contract start date.

A copy of the signed contract, along with all required support documents, must be attached to the requisition when initiated.



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E-mail: membership@nafsa.org
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GROUP MEMBERSHIP INVOICE

Invoice # 20200617-32442

Kathleen Smid
College of DuPage
International Student Services, SSC 2225
425 Fawell Blvd
Glen Ellyn, IL 60137
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	NM	BRONZ	\$409.00	06/30/2021
			\$2045.00	Total Due

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1307 New York Avenue NW, 8th Floor

Washington, DC 20005-4701

Phone: 1.202.737.3699

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APPROVED

By Ellen M. Roberts at 8:37 am, Jun 29, 2020