

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1085782  
Vendor Name: Holstein's Garage  
Invoice Number: 49367  
Invoice Date: 06/08/20  
PO Number: P0369951  
Check Number: E0080771  
Check Amount: \$ 2,893.00  
Check Date: 07/08/2020  
Department ID: 00701  
Reviewer Name: Kathy Striplin  
Voucher Number: V0631452  
Redaction Type: None  
Document Type: AP Invoice

Document Below

-----  
From: quickbooks@notification.intuit.com

Sent: Tue Jun 23 14:36:51 CDT 2020

To: invoicing@cod.edu,zaverdasm@cod.edu,striplin@cod.edu,sirvatka@cod.edu,mechelle@cod.edu

CC:

Subject: Invoice 49367 from Holsteins Garage Inc.  
-----

INVOICE 49367

Holsteins Garage Inc.

Dear Valued Customer:

We are submitting the attached invoice for payment.

Thank you for your business.

Holstein's Garage

(630) 668-0328

**\$1,513.00**

**Print or save**

Powered by QuickBooks

Holsteins Garage Inc.

309 West Front Street Wheaton, IL 60187 US

Phone (630)668-0328

If you receive an email that seems fraudulent, please check with the business owner before paying.



Holsteins Garage Inc.  
309 West Front Street  
Wheaton, IL 60187 US  
Phone (630)668-0328

## INVOICE

**BILL TO APPROVED**  
College of DuPage  
25 Fairview Boulevard  
Glen Ellyn, IL 60137  
**07/01/20 - DIRK HEID**

INVOICE # 49367  
DATE 06/08/2020  
TERMS Net 30

MAKE / YEAR  
2017 E-350 BUS

LICENSE NO.  
M141176

MILEAGE  
18,794 miles

ACTIVITY	DESCRIPTION	AMOUNT
Charges		
Parts	Front Rotors	250.00
Parts	1 set - Front Pads	100.00
Parts	Seals (front)	20.00
Parts	Rear Rotors	250.00
Parts	1 set - Rear Pads	100.00
Parts	Seal (rear)	70.00
Labor	Remove and replace front brakes	265.00
Labor	Remove and replace rear brakes	440.00
Shop Supplies	Shop Supplies	3.00
Hazardous Material Fee	Hazardous Material Fee	15.00
Labor	* NOTE: FREE PICK UP & DELIVERY *	0.00

P.O. #369951

BALANCE DUE

**\$1,513.00**

**INVOICE REVIEWED**  
**OKAY TO PAY**  
**KATHY STRIPLIN 06/01/20**

I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the car or truck herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above care or truck to secure the amount of repairs thereto.

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1085782  
Vendor Name: Holstein's Garage  
Invoice Number: 50109-#CD-1  
Invoice Date: 06/24/20  
PO Number: B0365625  
Check Number: E0080771  
Check Amount: \$ 2,893.00  
Check Date: 07/08/2020  
Department ID: 00701  
Reviewer Name: Kathy Striplin  
Voucher Number: V0631458  
Redaction Type: None  
Document Type: AP Invoice

Document Below

-----  
From: quickbooks@notification.intuit.com

Sent: Wed Jun 24 09:38:23 CDT 2020

To: invoicing@cod.edu,zaverdasm@cod.edu,striplin@cod.edu,sirvatka@cod.edu,mechelle@cod.edu

CC:

Subject: Invoice 50109 - #CD-1 from Holsteins Garage Inc.  
-----

INVOICE 50109 - #CD-1

Holsteins Garage Inc.

Dear Valued Customer:

We are submitting the attached invoice for payment.

Thank you for your business.

Holstein's Garage

(630) 668-0328

**\$1,380.00**

**Print or save**

Powered by QuickBooks

Holsteins Garage Inc.

309 West Front Street Wheaton, IL 60187 US

Phone (630)668-0328

If you receive an email that seems fraudulent, please check with the business owner before paying.



Holsteins Garage Inc.  
309 West Front Street  
Wheaton, IL 60187 US  
Phone (630)668-0328

## INVOICE

BILL TO

**APPROVED**

College of DuPage

**07/01/20 - DIRK HEID**

123 Fawcett Boulevard  
ATTN: Accounts Payable  
Glen Ellyn, IL 60137

INVOICE # 50109 - #CD-1

DATE 06/24/2020

TERMS Net 30

MAKE / YEAR  
BUS #CD-1 2017

LICENSE NO.  
M141176

MILEAGE  
18,794 MILES

ACTIVITY	DESCRIPTION	AMOUNT
Charges		
Parts	6 - New 10-ply Tires (Lt225/75Rx16)	900.00
User Fee	Tire User Fee	15.00
Tire Disp Fee	Tire Disposal Fee	30.00
Labor	Align	225.00
Labor	Remove and replace (6) tires; Mount & balance (needed for State Safety Test)	210.00

P.O. #365625

BALANCE DUE

**\$1,380.00**

**INVOICE REVIEWED  
OKAY TO PAY  
KATHY STRIPLIN 06/24**

I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the car or truck herein described on streets, highways or elsewhere for the purpose of testing and/or inspection.  
An express mechanic's lien is hereby acknowledged on above care or truck to secure the amount of repairs thereto.