

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1190633

Vendor Name: Travelport

Invoice Number: 248200701096

Invoice Date: 07/15/20

PO Number:

Check Number: E0081051

Check Amount: \$ 100.00

Check Date: 07/29/2020

Department ID: 00109

Reviewer Name:

Voucher Number: V0637552

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

**AP VERIFIED**

**From:**

acctpay@cods.tu

**To:**

Burns, Paula

**Subject:**

Voucher Confirmation: V0637552

**Date:**

Thursday, July 23, 2020 8:17:53 AM

**07/23/20 - ISABEL BARRIOS**

Voucher Number V0637552

Voucher Status In Progress (Unfinished)

Requestor Name Mrs Paula M. Burns

Voucher Date 07/23/20

Due Date 08/14/20

Vendor ID and/or Name 1190633 Travelport

AP Type IM Invoices < \$15,000

Voucher Total \$100.00

Anthony Ramos

Digitally signed by Anthony Ramos  
Date: 2020.07.23 08:50:45 -05'00'

**ITEM 1**

Item Description Software access - monthly

Quantity 1.000

Price \$100.0000

Extended Price \$100.00

GL Distribution 01-10-00109-5308001

**COMMENTS**

WARNING: All line items on this document have  
been populated with default tax form  
information from the chosen vendor.

APPROVAL

DATE

NEXT APPROVALS

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# Invoice



**AP VERIFIED**  
**07/23/20 - ISABEL BARRIOS**

COLLEGE OF DUPAGE  
425 FAWELL BLVD  
ANNA GAY PROGRAM SUPPORT SPECIALIST  
BIC 1441  
GLEN ELLYN, IL 60137  
UNITED STATES

Invoice Number : 248200701096  
Invoice Date : 15-JUL-20  
Customer Number : 0000423537  
Customer Tax Number : 36-2594972

Please direct queries to [US.Collections@travelport.com](mailto:US.Collections@travelport.com)  
Telephone no: +1 44 1793 883797

**Customer Number: 0000423537**  
**IATA: 1453748**  
**Primary PCC: 1585**

COLLEGE OF DUPAGE  
425 FAWELL BLVD  
GLEN ELLYN IL 60137  
US

Product Description	Period	Tax %	Quantity	Amount
SSL DA FEE	01-JUN-2020 to 30-JUN-2020		28	0.00 USD
PRO-FILES	01-JUN-2020 to 30-JUN-2020		1	0.00 USD
CRS PROGRAM ACCESS	01-JUN-2020 to 30-JUN-2020		1	100.00 USD
Total:				100.00 USD
Customer Total:				100.00 USD

Invoice Total : **100.00 USD**  
Invoice Total Due : **100.00 USD**  
Payment Due Date : **14-AUG-20**

**Note: Please send payment quoting 0000423537/248200701096 to**

**Travelport, LP c/o Drawer CS 198537**  
**Atlanta, Georgia, 30384-8537**

\* = Taxable Item

Anthony Ramos

Digitally signed by Anthony  
Ramos  
Date: 2020.07.23 08:50:58 -05'00'

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From: acctpay@cod.edu  
Sent: Thu Jul 23 09:14:42 CDT 2020  
To: invoicing@cod.edu  
CC:  
Subject: FW: Travelport Invoice payment  
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**From:** Burns, Paula  
**Sent:** Thursday, July 23, 2020 8:54 AM  
**To:** Accounts Payable <acctpay@cod.edu>  
**Subject:** Travelport Invoice payment

Hello,

Please process the attached voucher payment request.

Thank you,

Paula

Paula Burns  
Administrative Assistant  
College of DuPage  
Arts, Communication, and Hospitality Division  
425 Fawell Blvd.  
Glen Ellyn IL 60137  
burnsp@cod.edu  
630-942-4209