

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1618514
Vendor Name: Association of Surgical Techno
Invoice Number: ONLINE MEMBERSHIP
Invoice Date: 02/23/21
PO Number:
Check Number: 0277202
Check Amount: \$ 240.00
Check Date: 03/08/2021
Department ID: 00277
Reviewer Name:
Voucher Number: V0662502
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: Zerrudo, Maria <zerrudom@cod.edu>
Sent: Wed Feb 24 16:38:16 CST 2021
To: invoicing@cod.edu
CC:
Subject: FW: Voucher & Form to be sent

From: Gonzalez, Colleen <prolac@cod.edu>
Sent: Tuesday, February 23, 2021 5:01 PM
To: Zerrudo, Maria <zerrudom@cod.edu>
Subject: Voucher & Form to be sent

Hi Marivic,

I hope you are doing well! I asked Isabel for advice below regarding the attached. The 2nd page of the attached PDF actually needs to be mailed to AST with the Check. How should I proceed with the approval? Did you want both pages to go through ContentWeb for approval or will it get lost?

Thank you!

Colleen Prola-Gonzalez
Program Support Specialist, Nursing and Health Sciences Division
College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137
prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

From: Barrios, Isabel <barriosi142@cod.edu>
Sent: Tuesday, February 23, 2021 2:08 PM
To: Gonzalez, Colleen <prolac@cod.edu>
Subject: RE: Advice for payment

Colleen,

You can absolutely send the attached with the voucher but you need to indicate that it must be sent in with the check. Marivic will be the one processing the voucher for you. You can email her to let her know.
Thanks.

From: Gonzalez, Colleen <prolac@cod.edu>
Sent: Tuesday, February 23, 2021 1:58 PM
To: Barrios, Isabel <barriosi142@cod.edu>
Subject: Advice for payment

Good afternoon,

I wanted to get your advice before sending anything for processing. Vendor # 1618514 for Association of Surgical Technologists, they require sending the attached PDF with payment. Do you think I could send the attached with the voucher and you would then be able to send the attached with the check? Or is it best for me to send the PDF to the vendor on my own? Thank you for your advice!

Thank you!

Colleen Prola-Gonzalez

Program Support Specialist, Nursing and Health Sciences Division

College of DuPage | 425 Fawell Blvd | Glen Ellyn, IL 60137

prolac@cod.edu | 630-942-2994 (ph) | 630-942-4222 (fax)

[attachment: Association of Surgical Tech \$240 invoice with FORM sent to AP 2.23.21.pdf]

From: acctpay@cod.edu
To: [Gonzalez, Colleen](#)
Subject: Voucher Confirmation: V0662502
Date: Tuesday, February 23, 2021 4:57:24 PM

Voucher Number V0662502
Voucher Status In Progress (Unfinished)

Requestor Name Ms Colleen E. Gonzalez

Voucher Date 02/23/21
Due Date 02/25/21
Vendor ID and/or Name 1618514 Association of Surgical Technologists
AP Type IM Invoices < \$15,000
Voucher Total \$240.00

ITEM 1
Item Description AST Exam Gold Student Online Exam bundle
Quantity 1.000
Price \$240.0000
Extended Price \$240.00
GL Distribution 01-10-00277-540100

APPROVED
02/26/21 - DILYSS GALLYOT

COMMENTS

APPROVAL

DATE

NEXT APPROVALS

INVOICE REVIEWED
OKAY TO PAY
COLLEEN GONZALEZ 02/26/21



Student Application

Association of Surgical Technologists

6 West Dry Creek Circle • Suite 200 • Littleton, CO 80120-8031

Phone: 800.637.7433 • Fax: 303.694.9169 • www.ast.org

Please check the appropriate choice for membership dues or bundle.

☐ **STUDENT MEMBERSHIP • \$45**

Requirement: Currently enrolled in a surgical technology program.

☐ **GOLD STUDENT PRINTED EXAM BUNDLE • \$247****

☒ **GOLD STUDENT ONLINE EXAM BUNDLE • \$240****

**** If applying with a group gold bundle - only ONE type of bundle (printed or online) is permitted for the whole group.

COMPARE THE SAVINGS ON GOLD EXAM BUNDLE!

	Nonmember	Gold Student	Online
AST Membership	N/A	\$35	\$35
Exam Study Guide	\$65	\$45	\$45
Exam Application	\$290	\$160	\$160
S&H	\$7	\$7	
TOTAL	\$362	\$247	\$240

** To qualify students **must** be currently enrolled in a CAAHEP or ABHES-accredited surgical technology program. The Gold bundles are for first time certification only. If your program director does not have an ARC Program Code, your program is not approved/accruited/in candidacy, and you do not qualify for the discounted student exam bundles.

STUDENT INFORMATION

L _____
 A _____
 C _____
 C _____

State Assembly (If applicable indicate preferred State Assembly if different from state address listed.) _____

SCHOOL INFORMATION

Complete School Name—do not abbreviate: College of DuPage

Campus Glen Ellyn

ARC Program Code 2797 Start Date Jan / 2021 Graduation Date June / 2021

Instructor's Last Name Campbell Instructor's Email campbella86@cod.edu

PAYMENT METHODS

Due to nonsufficient funds personal checks are NOT accepted. Payments must be submitted by money order, cashier's check, institutional check, Visa, MasterCard, or AMEX. Make checks payable to AST. Dues are not refundable and membership is not transferable. A portion of your dues are allocated to the state assembly of your choice.

☐ Institutional Single Payment—Credit Card Payment Enclosed

☐ Group Payment—Credit Card Payment Enclosed

☐ Individual Payment—Cashier's Check or Money Order Enclosed

☒ Group Payment—Institutional Check, Cashier's Check or Money Order Enclosed

Card # _____ Expiration Date ____/____/____

Signature _____

☒ Check here if you **do not** wish to receive email notification in addition to your regular postal notifications.

☒ AST shares mailing information with a very limited number of organizations which provide membership with liability coverage and other services at a discounted rate as a benefit of membership. Check here if you **do not** wish to receive information.

Join AST
Today!



Print and mail your application with payment to
 AST • 6 West Dry Creek Circle • Suite 200 • Littleton, CO 80120 or fax to
 303.694.9169 (please call to make sure we received your fax.
 or submit this form by email to memserv@ast.org