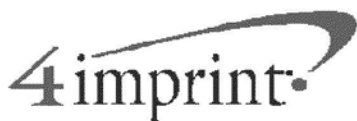


Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1298946
Vendor Name: 4IMPRINT, Inc.
Invoice Number: 25899564
Invoice Date: 9/21/2023
PO Number: P0008720
Check Number: E0097375
Check Amount: \$ 478.03
Check Date: 10/04/2023
Voucher Number: V0803414
Document Type: AP Invoice

Document Below



101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746

Free Fax: 800-355-5043

Main Address

SUSAN MALONEY
COLLEGE OF DUPAGE
425 FAWELL BLVD
SRC 2102
GLEN ELLYN, IL 60137-6599

Invoice Address

Accounts Payable Dept - SRC2049
College of DuPage
425 Fawell Blvd
Glen Ellyn IL 60137-6599
USA

Shipping Address

Susan Maloney
College of DuPage
425 FAWELL BLVD
SRC 2102
GLEN ELLYN, IL 60137-6599
USA
Tel: 942-490-5____

Order Number: 25899564
Order Date: September 21 2023
Account No: 554894
Reference No: 0008720

Questions Call: Avery Harding
Phone: 877-446-7746 Ext. 8045
Fax: 800-355-5043
Email: aharding@4imprint.com

Item	Pencil Stress Reliever		Colors	(Barrel, Trim): Yellow, Multicolor		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
275	9360	Pencil Stress Reliever	1.4700	404.25	404.25	
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00	
		Freight		18.78	18.78	
					478.03	

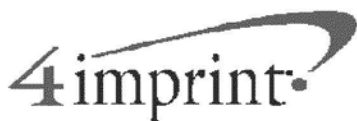
Artwork Instructions

Product Color (Base, Trim): Yellow, Multicolor

Imprint Location: Barrel

Imprint Colors: Black (Standard)

Grand Total 478.03



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Email: aharding@4imprint.com

Thank You! We appreciate your business.
Any overruns you may have received are yours with our compliments.

- If paying by credit card, please contact your customer service representative with your credit card details.
- To ensure proper credit to your account, please quote "25899564/554894" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

4imprint Federal ID #39-1837105. A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - www.4imprint.com To review our privacy policy please visit <https://www.4imprint.com/info/privacy>

Please Remit to:
4imprint, Inc.
25303 Network Place
Chicago, IL 60673-1253

Shipment Details

Shipment to	Qty	Item #	Estimated Ship Date	Carrier, service	Delivery Date	Freight
Address as above.	275	9360	Sep 27 2023	UPS GROUND (Parcel)	Sep 29 2023	18.78

"Maloney, Susan" <maloneys@cod.edu>

Proforma Invoice

"Maloney, Susan" <maloneys@cod.edu>

Thu, Sep 21, 2023 at 08:00 PM UTC

CC:

BCC:

Hello, The rep sent this to me in error.

Susan

Susan Maloney

Administrative Assistant IV

Learning Commons

College of DuPage

630-942-2674

2 attachments

Pro_Forma_Invoice_25899564.pdf

image001.png