

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1664720
Vendor Name: Trued Consulting
Invoice Number: DP001 10/02/03
Invoice Date: 10/3/2023
PO Number:
Check Number: E0097565
Check Amount: \$ 548.75
Check Date: 10/10/2023
Voucher Number: V0803857
Document Type: AP Invoice

Document Below

Check Request Form

This form may be used to request check payments only for those items for which the issuance of a purchase order would not be appropriate. Attach supporting documentation (e.g., invoice or agreement). Please refer to Administrative Procedure 2.21, Vendor Payment.

Date: _____ Vendor ID: _____ Vendor Name: _____

Payee Address: _____ Payment Due Date: _____

Invoice Number	GL Account number(s) e.g. 01-80-00757-5401001	GL Account Name e.g. Office Supplies	Amount
Total			\$

Check the appropriate box below:

- ☐ We, the undersigned, hereby certify that the goods/services, for which payment is herein requested, have been provided in a satisfactory condition/manner. Consequently, payment is appropriate at this time.
- ☐ We, the undersigned, hereby certify that the goods/services, for which payment is herein requested, have not yet been provided. The first approver indicated below will notify the Accounts Payable Office in writing when the goods/services have been delivered in a satisfactory condition/manner.

Description on Check:

Other Instructions:

All requests will require the following approvals:

Requester: _____ Print Name: _____

Budget Officer: _____ Print Name: _____

Requests \$5,000 and over will require the additional approvals below:

Next Level Supervisor (if applicable): _____ Print Name: _____

Next Level Supervisor (if applicable): _____ Print Name: _____

Next Level Supervisor (if applicable): _____ Print Name: _____

Area Administrator (only required if request is \$5,000 and over): _____ Print Name: _____

Area Cabinet Officer (only required if request is \$10,000 and over): _____ Print Name: _____

Board Approval Date (only required if request is \$25,000 and over): _____

Return approved request and all supporting documentation to Accounts Payable (SRC 2132A), invoicing@cod.edu

Check Request Form (*cont.*)

Processing a Check Request:

To expedite the processing of a check request, or other non-purchase order disbursement, the requesting department should:

1. Verify that the vendor intake process has been completed by the Procurement Office.
Payment cannot be made to a vendor until this process has been completed.
2. Complete and review this check request form and confirm that all relevant supporting documentation is attached including fully executed contracts, if applicable.
3. Ensure the payee information is complete and includes the vendor's Colleague ID number.
4. Ensure that the general ledger account number is included and correct.
5. Maintain a copy of the approved check request form for department records.
6. Submit the completed check request form to the Accounts Payable Office.

The check request form will be returned to the budget officer if the information is incomplete, not in compliance with College Policy, or if budget is not available.

INVOICE



From **Tru Consulting**
2205 West 136th Ave
Suite 106 -320
Broomfield, CO 80023

Invoice ID **DP_001 10/02/23**
Issue Date 10/02/2023
Due Date 11/01/2023 (Net 30)
Subject Invoice

Invoice For **College of DuPage**
425 Fawell Boulevard, IRC 1001
Glen Ellyn, IL 60137-6599

Item Type	Description	Quantity	Unit Price	Amount
Service	[DP_001] Release 1 - Financial Reporting: Linda Teater (08/09/2023 - 09/14/2023)	2.00	\$275.00	\$550.00
Service	Credit to close out project.	1.00	-\$1.25	-\$1.25

Amount Due \$548.75

Notes

All ACH deposits:
Chase Bank

Routing No. 102001017
Account Title: TruEd Consulting INC
Account Number: 281326311

For electronic payment, kindly send remittance detail via email to: billing@truedconsulting.com

Include invoice number to ensure proper credit

BPO Number : B0001137
 Status : Closed
 Status Date : 05/16/23

BPO Date 10/06/22
 Expire Date

Requisitions 1 0006393
 Vouchers 1 V0760772
 Comments 1 May 16 202
 Printed Comments 1 Ship To -
 Currency

Vendor ID 1664720
 Name 1 Trued Consulting
 Address 1 2205 W 136 Ave
 Cty/St/Zp Broomfield CO 80023 USA
 Appr/Date 1

GL Distribution
 GL Account No/Project ID
 Encumbered
 Expensed
 Difference

1	01-80-00758-5309001	65,000.00	64,451.25	548.75
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"Virgilio, David" <virgiliod@cod.edu>

FW: [External] Invoice from TruEd Consulting

"Virgilio, David" <virgiliod@cod.edu>

Tue, Oct 3, 2023 at 04:00 PM UTC

CC:

BCC:

David P. Virgilio, CPA

Controller – Financial Affairs

College of DuPage – Glen Ellyn, IL

phone (630) 942-3028 – fax (630) 942-2297

Fall 2023: M/T: Remote | W/Th/F: On Campus

Check out the Financial Affairs Team Site [Here](#)

From: Shardai Williams <swilliams@truedconsulting.com>

Sent: Monday, October 2, 2023 5:02 PM

To: Virgilio, David <virgiliod@cod.edu>

Cc: Linda Teater <lteater@truedconsulting.com>

Subject: [External] Invoice from TruEd Consulting

CAUTION: This email originated from outside of COD's system. Do not click links, open attachments, or respond with sensitive information unless you recognize the sender and know the content is safe.

Good afternoon David,

I hope this email finds you well. Attached is a final invoice for your review and payment.

Thank you,

Shardai

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4 attachments

Check Request Form TruEd 10.3.23.pdf

image002.png

image003.png

image001.png