

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1763602

Vendor Name: Finger Lakes Community College Association Inc

Check Details:

Check Number: 0337557

Check Amount: \$ 450.00

Check Date: 3/26/2025

Invoice Details:

Invoice Number: 3102025A

Invoice Date: 3/19/2025

PO Number: NULL

Voucher Number: V0878548

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: 3/19/2025 Vendor ID: 1763602 Vendor Name: Finger Lakes Community College Association, Inc.

Payee Address: 3325 Marvin Sands Dr., Canandaigua, NY 14424 Payment Due Date: 3/28/2025

Invoice Number	GL Account number(s) e.g. 01-80-00757-5401001	GL Account Name e.g. Office Supplies	Amount
3102025	01-30-12054-5503006	Volley Ball Team-Men's: Out-of-State Travel Costs	450.00
Total			\$ 450.00

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:

Men's Volleyball Banquet

Other Instructions:

This must be a separate check. This is for the Men's Volleyball Invite in New York. Beverly Smith will pick up the check.

All requests will require the following approvals:

Requester: Ryan Kaiser Print Name: Ryan Kaiser

Budget Officer: Ryan Kaiser Print Name: Ryan Kaiser

Requests \$10,000 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 \$10,000 and over): _____ Print Name: _____

Area Cabinet Officer (only required if request is \$25,000 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

Smith, Bev

From: Kaiser, Ryan
Sent: Monday, March 10, 2025 12:35 PM
To: Samantha Boccacino
Cc: Smith, Bev; Dawkins, Richard
Subject: RE: [External] Re: College of DuPage Men's Volleyball Practice Time

Sam,

We will have 18 for the banquet. I am flying in that night so will be arriving as you all head into the coaches meeting.

Beverly, please make a check out to FLCC Athletics in the amount of \$450. (Banquet)

Beverly, please make an entry fee check to FLCC Athletics in the amount of \$120. (Entry Fee)

These are two separate checks.

3325 Marvin Sands Drive
Canandaigua, NY 14424

rk



From: Samantha Boccacino <Samantha.Boccacino@flcc.edu>
Sent: Monday, March 10, 2025 11:58 AM
To: Kaiser, Ryan <kaiserr2964@cod.edu>
Cc: Koskinaris, Tolis <koskinarist@cod.edu>; Martinez, Francisco <martinezf60@cod.edu>; Woods, Braden <woods736@cod.edu>
Subject: [External] Re: College of DuPage Men's Volleyball Practice Time

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.

Confirmed, thank you!
Sent from my iPhone

On Mar 10, 2025, at 12:56 PM, Kaiser, Ryan <kaiserr2964@cod.edu> wrote:

"Smith, Bev" <smithb244@cod.edu>

Attached Image

"Smith, Bev" <smithb244@cod.edu>

Wed, Mar 19, 2025 at 06:42 PM UTC

CC:

BCC:

1 attachment

4944_001.pdf