

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1512676

Vendor Name: Sue Franzen

Check Details:

Check Number: E0106024

Check Amount: \$ 1,744.00

Check Date: 3/4/2025

Invoice Details:

Invoice Number: BE35002615A

Invoice Date: 2/25/2025

PO Number: P0015915

Voucher Number: V0872913

Document Type: AP Invoice

Document Below



Original Bill

Bill Number BE35002615A
Bill Date 2/25/2025
Due Date 4/25/2025
Terms Net 60
Sales Order SE35002615
Sales Person Sue Franzen

Proforma Premiums

Telephone: 630-844-3147
Email: sue.franzen@proforma.com

Sold To

Mia Schumann
College of DuPage
Rec PO#
425 Fawell Blvd.
Glen Ellyn, IL 60137
Phone: 630-942-2800
schumannm192@cod.edu

Shipped To

College of DuPage
Ashley McLaughlin
Rec #P0015915
425 Fawell Blvd.
Glen Ellyn, IL 60137

Customer PO: P0015915

Customer Reference: Forest Green Totes

Item #	Item Description	QTY Billed	QTY Ordered	Back Order	Unit Price	Per	Credit	Amount
Big Thunder	Big Thunder Forest Green White imprint	500	500	0	2.4500	Each	-	\$1,225.00

Line-Item Total	Freight Amount	Tax Amount	Sub Total	Deposits	Credits/Discounts	Amount Due:
\$1,225.00	\$177.00	-	\$1,402.00	-	-	\$1,402.00 USD

Bills that are paid beyond terms will be adjusted to reflect current retail prices in addition to a 1.5% per month (18% per annum) service charge. Vendor makes no warranties, express or implied, on merchantability, fitness or otherwise which extend beyond the description of the product herein. Furthermore, buyer agrees through payment of this bill that Vendor's damages, if any, shall be limited to the total selling price of any item purchased.

Please indicate on your remittance the bill numbers to which the payment is to be applied.

Thank you for your business!

Please detach this portion and return with your payment.

Remittance Advice

Billed Customer #	Bill Number	Bill Date	Amount Due
C0E3500193	BE35002615A	2/25/2025	\$1,402.00 USD

BILL TO:

College of DuPage
Accounts Payable
425 Fawell Blvd.
Glen Ellyn, IL 60137

PLEASE SEND PAYMENT TO:

Proforma
P.O. Box 640814
Cincinnati, OH 45264-0814

Sue Franzen <sue.franzen@proforma.com>

[External] Purchase Order P0015915 - Bill #BE35002615A from Proforma Premiums

Sue Franzen <sue.franzen@proforma.com>

Tue, Feb 25, 2025 at 03:38 PM UTC

CC:

BCC:

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.

Attached are the following bill(s):

BE35002615A | 1402.00 USD | 02/25/2025 | PO #: P0015915

Please let me know if you have any questions or need additional information.

Thank you very much for your business!

Sue Franzen

Owner

(630) 844-3147

Proforma Premiums

<http://www.proforma.com/premiums>

1 attachment

Customer_Bill_BE35002615A.pdf

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1512676

Vendor Name: Sue Franzen

Check Details:

Check Number: E0106024

Check Amount: \$ 1,744.00

Check Date: 3/4/2025

Invoice Details:

Invoice Number: BE35002614A

Invoice Date: 2/28/2025

PO Number: P0015913

Voucher Number: V0873073

Document Type: AP Invoice

Document Below



Original Bill

Bill Number BE35002614A
Bill Date 2/28/2025
Due Date 4/28/2025
Terms Net 60
Sales Order SE35002614
Sales Person Sue Franzen

Proforma Premiums

Telephone: 630-844-3147
Email: sue.franzen@proforma.com

Sold To

Maren McKellin
College of DuPage
Rec PO#
425 Fawell Blvd.
Glen Ellyn, IL 60137
Phone: 630-942-3762
mckellin@cod.edu

Shipped To

College of DuPage
Lynn Dudzik
Rec PO#P0015913
425 Fawell Blvd.
Glen Ellyn, IL 60137

Customer PO: P0015913

Customer Reference: Pens

Item #	Item Description	QTY Billed	QTY Ordered	Back Order	Unit Price	Per	Credit	Amount
Pens	Aspen Pens 100 of each color white imprint exact repeat of previous order Red, blue, green, purple, orange	500	500	0	0.6400	Each	-	\$320.00

Line-Item Total	Freight Amount	Tax Amount	Sub Total	Deposits	Credits/Discounts	Amount Due:
\$320.00	\$22.00	-	\$342.00	-	-	\$342.00 USD

Bills that are paid beyond terms will be adjusted to reflect current retail prices in addition to a 1.5% per month (18% per annum) service charge. Vendor makes no warranties, express or implied, on merchantability, fitness or otherwise which extend beyond the description of the product herein. Furthermore, buyer agrees through payment of this bill that Vendor's damages, if any, shall be limited to the total selling price of any item purchased.

Please indicate on your remittance the bill numbers to which the payment is to be applied.

Thank you for your business!

Please detach this portion and return with your payment.

Remittance Advice

Billed Customer #	Bill Number	Bill Date	Amount Due
C0E3500193	BE35002614A	2/28/2025	\$342.00 USD

BILL TO:

College of DuPage
Accounts Payable
425 Fawell Blvd.
Glen Ellyn, IL 60137

PLEASE SEND PAYMENT TO:

Proforma
P.O. Box 640814
Cincinnati, OH 45264-0814

Sue Franzen <sue.franzen@proforma.com>

[External] Purchase Order P0015913 - Bill #BE35002614A from Proforma Premiums

Sue Franzen <sue.franzen@proforma.com>

Fri, Feb 28, 2025 at 04:30 PM UTC

CC:

BCC:

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Attached are the following bill(s):

BE35002614A | 342.00 USD | 02/28/2025 | PO #: P0015913

Please let me know if you have any questions or need additional information.

Thank you very much for your business!

Sue Franzen

Owner

(630) 844-3147

Proforma Premiums

<http://www.proforma.com/premiums>

1 attachment

Customer_Bill_BE35002614A.pdf