

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1512676 **Vendor Name:** Sue Franzen

Check Details:

Check Number: E0110749 **Check Amount:** \$ 1,385.00 **Check Date:** 11/25/2025

Invoice Details:

Invoice Number: BE35002910A **Invoice Date:** 11/18/2025 **PO Number:** P0020243 **Voucher Number:** V0914258

Document Type: AP Invoice

Document Below



Original Bill

Bill Number BE35002910A
Bill Date 11/18/2025
Due Date 1/16/2026
Terms Net 60
Sales Order SE35002910
Sales Person Sue Franzen

Proforma Premiums

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

Sold To

Tracey Dulceak
College of DuPage
425 Fawell Blvd.
Glen Ellyn, IL 60137
Phone: 630-942-2514
dulceakt@cod.edu

Shipped To

College of DuPage
Tracey Dulceak
Rec #P0020243
425 Fawell Blvd.
Glen Ellyn, IL 60137

Customer PO: P0020243

Customer Reference: Milk Chocolate Squares

Item #	Item Description	QTY Billed	QTY Ordered	Back Order	Unit Price	Per	Credit	Amount
Chocolate Squares	Chocolate Foil Squares Milk Chocolate Silver foil Dark green imprint	1,200	1,200	0	0.3300	Each	-	\$396.00
set-up charge		1	1	0	60.0000	Each	-	\$60.00
Line-Item Total	Freight Amount	Tax Amount	Sub Total	Deposits	Credits/Discounts	Amount Due:		
\$456.00	\$42.00	-	\$498.00	-	-	\$498.00 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	BE35002910A	11/18/2025	\$498.00 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 P0020243 - Bill #BE35002910A from Proforma Premiums

Sue Franzen <sue.franzen@proforma.com>

Tue, Nov 18, 2025 at 04:46 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 is the following bill(s):

Customer Bill: BE35002910A | 498.00 USD | 11/18/2025 | PO #: P0020243

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_BE35002910A.pdf

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1512676 **Vendor Name:** Sue Franzen

Check Details:

Check Number: E0110749 **Check Amount:** \$ 1,385.00 **Check Date:** 11/25/2025

Invoice Details:

Invoice Number: BE35002914A **Invoice Date:** 11/18/2025 **PO Number:** P0020271 **Voucher Number:** V0914259

Document Type: AP Invoice

Document Below



Original Bill

Bill Number BE35002914A
Bill Date 11/18/2025
Due Date 1/16/2026
Terms Net 60
Sales Order SE35002914
Sales Person Sue Franzen

Proforma Premiums

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

Sold To

Claude Waller
College of DuPage
425 Fawell Blvd.
Glen Ellyn, IL 60137
Phone: 630-942-2267
wallercl10@cod.edu

Shipped To

College of DuPage
Claude Waller
Rec #P0020271
425 Fawell Blvd.
Glen Ellyn, IL 60137

Customer PO: P0020271

Customer Reference: Can coolers, Post It Notes, Lip Balm

Item #	Item Description	QTY Billed	QTY Ordered	Back Order	Unit Price	Per	Credit	Amount
Koozie	Koozie Brit-Pix Can Cooler Green White imprint	300	300	0	0.9900	Each	-	\$297.00
set-up	set-up charge	1	1	0	55.0000	Each	-	\$55.00
Post It Notes	3x4 Full Color Post It Notes 25 sheets per pad	500	500	0	0.4000	Each	-	\$200.00
SPF 30 Lip Balm	Sunscreen SPF 30 Lip Balm 4 color process	250	250	0	0.8000	Each	-	\$200.00
set-up	set-up charge	1	1	0	40.0000	Each	-	\$40.00
Line-Item Total	Freight Amount	Tax Amount	Sub Total	Deposits	Credits/Discounts	Amount Due:		
\$792.00	\$95.00	-	\$887.00	-	-	\$887.00 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	BE35002914A	11/18/2025	\$887.00 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 P0020271 - Bill #BE35002914A from Proforma Premiums

Sue Franzen <sue.franzen@proforma.com>

Tue, Nov 18, 2025 at 05:38 PM UTC

CC:

BCC:

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Attached is the following bill(s):

Customer Bill: BE35002914A | 887.00 USD | 11/18/2025 | PO #: P0020271

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_BE35002914A.pdf